

psychiatric conditions. It is thus crucial to evaluate the relation between psychotropic medication use and the occurrence of TdP.

Objectives: The primary objective of this study is to assess the relative contribution of psychotropic medications (antidepressants, antipsychotics) among all TdP risk factors (e.g. sex, hypokalemia, antiarrhythmic drug use). We hypothesize that psychotropic drug use will indeed be associated to TdP, but that this association is negligible compared to other TdP risk factors.

Methods: A retrospective case-control study (1 :3 ratio) of patients hospitalized at the Montreal Heart Institute was carried out (n=444).

Results: Antidepressant and antipsychotic medication use proportions among the cases are 27% and 12% respectively, compared to 17% and 5% in controls ($p=.018407$ and $p=.016326$). In our study, patients who take antidepressants [OR=1.83; 95% CI 1.10-3.04] or antipsychotics [OR=2.47; 95% CI 1.16-5.26] are more likely to experience TdP. Patients with a psychotropic polypharmacy are also more prone to TdP [OR=5.67; 95% CI 2.58-12.42]. However, cases are also significantly more likely ($p=.000281$) to take concomitant medications associated with QTc prolongation (based on CredibleMeds, July 2022 list). Female sex [OR=2.40; 95% CI 1.55-3.71], hypokalemia [OR=3.46; 95% CI 1.65-7.26], kidney failure [OR=1.61; 95% CI 1.05-2.48], a QTc interval greater or equal to 500 ms [OR=5.89; 95% CI 3.59-9.65] are also associated with TdP.

Conclusions: In this study, psychotropic drug use is indeed associated to TdP. Further analyses, *i.e.* multivariate logistic regressions, will determine psychotropic drugs' relative contribution among the identified risk factors for TdP.

Disclosure of Interest: None Declared

Forensic Psychiatry 02

EPP0846

Mental health during the covid-19 pandemic and domestic violence from the point of view of work at the institute of forensic psychiatry

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Introduction: The Institute of Forensic Psychiatry is an institution which, with the orders of the courts, evaluates the mental state of persons who have committed criminal offenses of all kinds.

From 2019, with the entry into force of the new penal code in Kosovo, even domestic violence is a criminale offense punishable by law up to three years in prison.

Objectives: With the beginning of the pandemic and the measures that have been put into place by the government, which also meant the complete closure of many institutions and businesses with the aim of preventing the spread of the disease, restrictions on movement, and the presentation of many other problems such as the economy, the purchasing power, the loss of jobs that led to an increase in requests made by the courts to the Forensic Psychiatric Institute for the evaluation of the mental state of many perpetrators of domestic violence.

Methods: Data were collected retrospectively from March 2019 to March 2020 in the time before the pandemic. March 2020 to March 2021 during the Lock Down, and March 2021 to March 2022, the time after the pandemic when we did not have these measures. These data have been provided by the archive of the Forensic Psychiatric Institute by collecting all the cases - the orders of the courts where the persons have been accused of the crime of domestic violence under Article 248 of the Criminal Code of the Republic of Kosovo.

Results: During the Lock Down, there was an increase in cases of domestic violence. The number of requests from the Courts in the Forensic Psychiatric Institute increased from 494 before the pandemic to 648 orders during the pandemic and a slight decrease to 562 orders after the pandemic. The criminal offense with which they were accused most often was domestic violence from 119-23.68% of cases before the pandemic, in 202-3.17% of cases during the lockdown and a slight decrease after the pandemic in 156-27.75% of cases.

An increase in domestic violence caused by the female gender was also observed from 19 cases - 16.23% of all cases referred before the pandemic 61 cases - 30.19% of cases during the pandemic and a slight decrease in the time after repentance in 29 cases - 19.86%.

Conclusions: During the pandemic, domestic violence experienced a significant increase that was a consequence of the government's lock down measures to prevent the spread of the disease.

The number of cases of reoccurrence of violence in the family also increased among people who have had problems with mental health before.

There has also been a significant increase in domestic violence caused by the female gender, which was unexpected for our culture.

Disclosure of Interest: None Declared

EPP0847

Adverse incidents and therapy options for opioid use disorders in forensic psychiatry

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Introduction: Patients admitted into Forensic Clinics for Dependency Diseases (FCDD) in Germany are diagnosed with at least one substance use disorder. Opioid use disorders is common in this clinical population. Surprisingly, data on the availability and practice of opioid substitution treatment (OST) options in German FCDD according to Sect. 64 of the German Criminal Code (StGB) is scarce. Additionally, important data on the prevalence of adverse incidents such as violent behavior, relapse or escape from the clinic are missing for this highly specific treatment setting.

Objectives: Our aim was to describe the clinical practice regarding opioid substitution therapy in forensic psychiatry in Germany and to identify the prevalence of relevant adverse incidents during the therapy process.

Methods: We conducted an observational study including all FCDD units in Germany via a questionnaire. We assessed the clinical practice and total number of patients that received an OST, clinical reasons for beginning and ending the OST, number of treatments terminated without success, number of successful treatments and

relevant adverse incidents such as violent behavior, relapse, escape and reoffending. The data was analyzed descriptively.

Results: 15 of the existing 46 FCDD participated in our study (33%). In total, 2483 patients were treated in the participating FCDD, 18% of the patients were relocated into prison due to treatment termination and 15% were discharged successfully. 275 adverse incidents were reported: violence against a patient (4%), violence against staff (1,6%), escape (4,7%) and reoffending (0,5%). Merely in seven FCDD treating 1153 patients, an OST was available. Available options included buprenorphine/naloxone, buprenorphine, methadone and levomethadone. Regarding adverse incidents and successful discharge, no differences were detected in the clinics with or without an OST. In the clinics that offered an OST, we found a significantly higher rate for treatment termination without success ($p < 0.007$) in comparison to clinics without this program. 99 patients received an OAT and this treatment was ended due to illegal drug abuse (57%), refusal to give an urine drug sample (71%) and in cases where the OAT was given away to other patients (85%).

Conclusions: Surprisingly, opioid substitution therapy is only accessible in a part of the FCDD in Germany. Reasons for this are unclear. Critical incidents such as violent behavior against staff/patients and escape are not uncommon in this forensic psychiatric treatment setting. Further studies are needed to enhance the understanding of the limited OST practice and the risks for patients and staff in this specific forensic treatment setting.

Disclosure of Interest: None Declared

EPP0848

Aggressive behavior and severe mental disorders in Prison psychiatry

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Introduction: Aggressive behavior can be understood as a complex and social phenomenon. A number of studies have shown that the risk of aggressive behavior is increased for patients with severe mental disorders such as schizophrenia. Although specialized forensic institutions exist in many countries, most offenders with mental disorders are still found in prison settings what corresponds to international literature suggesting an increased prevalence of mental disorders in prison inmates. Still, data on the specific characteristics of patients demonstrating aggressive behavior in medical and mental health settings is limited, especially for prison environments.

Objectives: The aim of our study was to identify patient characteristics that are potentially associated with aggressive incidents in a psychiatric setting.

Methods: In routine documentation in German prisons, specific incidents, as e.g. aggressive behavior are reported through an official reporting system. Analyzing these official reports, we collected all aggressive incidents concerning at the Department of Psychiatry of the Berlin prison hospital between 1997 and 2019. In addition, for each patient acting aggressively, we collected data on an equal number of patients who did not demonstrate this behavior during their hospital stay. For those patients with more

than one inpatient treatment period, only the first stay in the prison hospital was included. Furthermore, patients were excluded based on age (younger than 16 or older than 70) or death during treatment. The statistical data was analyzed descriptively.

Results: In total, 225 treatment episodes were included of which in 118 cases violent behavior were documented. The items older age, German citizenship, previous violent crimes (OR = 0,40, 95 % KI: 0,35 – 1,17) and antipsychotic (OR = 0,28, 95 % KI: 0,14 – 0,55) or antidepressant (OR = 0,35, 95 % KI: 0,13 – 0,88) treatment within six months prior to admission had a rather protective effect on the occurrence of aggressive behavior during inpatient treatment. Alcohol (OR = 1,21, 95 % KI: 0,64 – 2,27) and drug use disorders (OR = 2.18, 95 % KI: 1,09 – 4,44) tended to be risk factors for aggressive behavior. Thus, the results in this prison psychiatric population correspond to the risk factors described in the literature.

Conclusions: The reported results point in the direction that optimising the availability of psychopharmacological treatment options and offering specialized treatment for patients with comorbid substance use disorder may lead to the prevention of aggressive behavior in patients with a schizophrenia diagnosis.

Disclosure of Interest: None Declared

EPP0849

Influence of psychopathic personality traits on anxiety in a mixed reality Study

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Introduction: The personality construct of psychopathy consists of severe deficits in behavior, emotion and cognition, often categorized in the two dimensions affective-interpersonal and antisocial-lifestyle. Research indicates that a lack of anxiety and fear play an important role in psychopathic personalities. Understanding the interplay of psychopathic traits, fear and threat processing and reactive behavior is important due to its implications for risky and potentially antisocial behavior.

Objectives: We conducted a mixed reality study using the elevated plus-maze in a non-clinical sample to test anxiety-related behavior in correlation to psychopathic personality traits. Our hypothesis was that higher psychopathy would lead to higher expression of risky behavior and, thus, to longer time on open arms, higher number of entries to open arms and reduced latency for a first visit on open arms and for open arm endexploration.

Methods: Healthy volunteers were recruited (N=170) and completed the Sensation Seeking Scale V (SSSV), the Acrophobia Questionnaire (AQ), and the Brief Questionnaire of Psychopathic Personality Traits. The included subjects were tested on the human elevated plus-maze, which consists of a physical life-sized wooden platform and its representation in a virtual environment. Data recording was performed via the virtual reality tracking system (HTC Vive Base Station®, Seattle, USA) and custom soft-ware (A+ cross®) using the following parameters: total time spent on open arms (time on open arms), number of entries to open arms,