

## Abstracts

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**Results:** The misidentified objects are seen with suspicion and hostility, because patients perceive it as a threat which leads to aggression, in self-defence. Aggressive acts can go from verbal aggression to physical assault that may escalate to murder. There are some factors that seem to be associated with an increased risk such as: history of physical aggression, male sex, long-standing delusions, poor social and occupational skills, primary psychiatric pathology and blunted affect. Other aspects that increase the likelihood of aggression include erotomania or delusional jealousy, impulsivity and alcohol or substance abuse. The victims are usually a cohabiting family member or a caregiver.

**Conclusions:** Given the risk of violence, DMS should be incorporated into dangerous assessments. There are no guidelines for treatment, but the target must be the disorder in which DMS appears. Because of the lack of research there is a need for more studies about DMS.

**Conflict of interest:** No

### EPP0559

#### Involuntary hospitalization and future coercive experiences - a retrospective study

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**Introduction:** The involuntary hospitalization is required when an individual with severe mental illness poses serious danger to himself or others. Therefore, it is an intervention that profoundly affects one's self-determination. The literature reports that patients being involuntarily admitted to hospital have a higher risk of involuntary readmissions.

**Objectives:** To evaluate the influence of involuntary hospitalization on other future coercive hospital admissions.

**Methods:** This is a retrospective study of a sample of 28 patients with a mean age of 46,9 years who underwent a psychiatric evaluation in the years of 2017 and 2018 at Coimbra Hospital and University Centre, Coimbra, Portugal. Several variables were collected, including the existence of past history of involuntary hospitalization and the need for further coercive hospitalization after the evaluation. All statistical data analyses were performed using IBM SPSS<sup>®</sup> version 26.

**Results:** There was no statistically significant relationship between the history of involuntary hospitalization and subsequent compulsive hospital admissions ( $p > 0.05$ ,  $\alpha = 0.05$ ).

**Conclusions:** The results of our study do not corroborate data from previous research. Although we should take into account the small size of our sample, it is important to highlight the low rate of involuntary hospitalization in our country (3.2%) compared to other European countries (e.g. 30% in Sweden). The robust social support in the community, as well as our institution's rehabilitation and psychotherapeutic programs focusing on insight, could be crucial contributors to these results.

**Conflict of interest:** No

**Keywords:** Involuntary hospitalization; forensic psychiatry

### EPP0562

#### Evaluating the effectiveness of a pilot 'understanding psychosis' group intervention on open rehab wards in a forensic hospital. A quality improvement project

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**Introduction:** With the derive towards community-based treatment as compared to hospital-based treatment, it has become increasingly crucial that patients and relatives or carers develop and improve adequate coping strategies and non-pharmacological approaches. Our group was conducted in an inpatient setting in a forensic hospital with people who were considered to be in transition to the community

**Objectives:** To understand whether an "Understanding psychosis" group could improve the awareness and coping of patients with diagnoses of psychosis and reduce symptomatology.

**Methods:** The evaluation focused on investigating the effects of psychological intervention on patients' awareness and well-being. Six patients in the cohort were selected by the MDT from the open cluster in a Forensic hospital. We adapted a group programme designed by the psychology department at this Forensic Hospital. Patients completed a base-line scale consisting of 17 questions and PSYRATS (hallucination and delusion scales). Patients completed a qualitative evaluation at the end of the intervention.

**Results:** More than 50% of the participants scored higher on post-PYRATS Hallucination scale and about 50% scored higher on post-PYRATS delusions scale; however, this did not coincide with these participants' progression and presentation in the group. This suggests that the participant's PSYRATS scores are not a reflection of his progress. Patients reported finding the group helpful, practical and valued hearing each other's experiences regarding psychosis.

**Conclusions:** The 'Understanding Psychosis' intervention in a group setting can be an effective tool to help improve patients' awareness of their mental health and to equip them to be more aware, and better manage their psychotic experiences.

**Conflict of interest:** No

**Keywords:** understanding psychosis; group intervention; open rehabilitation; forensic

### EPP0565

#### The risk factors of violent acts among patients with bipolar disorder.

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**Introduction:** Bipolar disorder and violence are significantly linked and their connection seems pretty complex. However, and despite