a comprehensive understanding of how resilience can be supported and enhanced in these critical professionals.
Objectives: To identify the key factors that influence psychological resilience in first responders and rescue team members during disaster response. To evaluate current research on resilience building interventions and their effectiveness in enhancing psychological resilience in these professionals. To highlight gaps in the existing literature and suggest directions for future research on supporting psychological resilience in first responders.
Methods: A thorough literature search was conducted across several databases, including Web of Science, Scopus, Cochrane, PubMed, Medline, and Embase, focusing on articles published between 2019 and 2023. The search terms used were (emergency OR disaster) AND (psychological resilience) AND (rescue workers OR first responders OR firefighters OR ambulance personnel AND prehospital emergency medical services). Articles were selected based on inclusion and exclusion criteria, and only full-text articles published in English or Turkish were considered. Qualitative synthesis was used to analyze the data and draw insights.
Results: The review reveals several critical factors affecting psychological resilience, including stress management techniques, emotional regulation strategies, social support systems, and training programs. It also identifies areas where existing research is lacking, particularly regarding specific interventions designed to bolster resilience in high-stress environments.
Conclusions: Enhancing psychological resilience in first responders is crucial for both their individual well-being and the effectiveness of disaster response efforts. This review provides valuable insights into the factors that contribute to resilience and highlights the need for targeted interventions and support systems. By addressing these factors and promoting resilience, it is possible to improve both the performance of first responders and their capacity to cope with the demands of disaster situations.
Keywords: Psychological resilience, first responders, rescue workers, mental health.

Disclosure of Interest: None Declared

EPV1252

Innovation in Suicidology: Artificial Intelligence-Based Risk Assessment

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Introduction: The use of artificial intelligence (AI) in suicide risk assessment is gaining prominence as AI algorithms are capable of processing and analyzing large volumes of data quickly. Suicide risk assessments are traditionally carried out by psychiatrists and clinical psychologists following established protocols, but AI systems can provide valuable support in this area, particularly in prevention and faster detection. Based on the collected data, AI algorithms can create predictive models that identify individuals at the highest risk. These models can take into account previous mental health disorders, suicide attempts, and other social or economic factors.
Objectives: The aim of our study was to test a suicide prediction model using an XGBoost machine learning tool.
Methods: We included 357 individuals, out of which 146 were psychiatric patients with a history of suicide attempts in their anamnesis, 154 were psychiatric patients without a history of suicide attempts, and 57 individuals formed the sine morbo control group. Initially, 71 individuals (test dataset) were randomly selected from the total 357, and the remaining sample (training dataset) was used to train the XGBoost machine learning tool. This training process involved optimizing and selecting the best parameters. Afterward, the final model was tested on the reserved test dataset consisting of 71 individuals.
Results: During the machine learning process, we were able to very accurately predict who had a history of suicide attempts and who did not, with a high performance indicated by a ROC AUC score of 0.96. This demonstrates the model's excellent ability to distinguish between individuals with and without suicide attempts based on the data used.
Conclusions: AI systems can complement traditional methods in suicide prevention, but they cannot replace human expertise. It is also important to pay attention to ethical issues, such as data protection and the reliability of these systems. AI can be a powerful tool in predicting suicide risk if properly integrated into mental health services.

Disclosure of Interest: None Declared

EPV1253

Perinatal Psychopathology and Bonding: Implications for Maternal-Infant Attachment and Infant Development

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Introduction: Perinatal psychopathology, encompassing a spectrum of psychiatric disorders such as perinatal depression, generalized anxiety disorder, post-stress traumatic disorder (PTSD), bipolar disorder, and postpartum psychosis, has been increasingly recognized for its potential to disrupt early mother-infant interactions. These disruptions may have profound consequences on the formation of secure attachment, which is crucial for healthy infant neurodevelopment. Attachment theory posits that early relational experiences shape the foundation of emotional regulation and social functioning, making it essential to understand how maternal psychopathology influences this critical developmental period.
Objectives: This study aims to explore the impact of perinatal psychopathology on the development of attachment between mothers and their infants. Specifically, it seeks to identify how various mental health disorders affect maternal sensitivity and responsiveness, and how these alterations contribute to insecure or disorganized attachment styles in children.
Methods: A comprehensive review of the literature was conducted by searching major medical databases (e.g. PubMed and Google Scholar), giving preference to studies published between 2000 and 2024. Articles were selected based on relevance to perinatal

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psychopathology and attachment theory. This narrative review includes both quantitative and qualitative studies, clinical trials, and observational research that examine how maternal mental health conditions during pregnancy and the postpartum period affect attachment processes. Key themes and findings were extracted to provide a holistic view of the current state of knowledge on this subject.

Results: The findings align with existing research on the impact of maternal mental health on early attachment, reinforcing the role of maternal sensitivity as a mediator between psychopathology and attachment security. Psychiatric conditions impair the mother's ability to engage in synchronous interactions with her infant, disrupting the child's ability to develop a secure base. Moreover, the presence of comorbid psychiatric conditions and chronicity of symptoms were identified as risk factors for more severe attachment disruptions. Pharmacological treatment and psychotherapy were shown to mitigate these effects, highlighting the need for integrated perinatal mental health services.

Conclusions: Perinatal depression, PTSD, and psychosis significantly compromise maternal-infant attachment, increasing the risk of insecure or disorganized attachment styles. Timely psychiatric interventions can enhance maternal mental health and promote healthier attachment outcomes. This review underscores the importance of integrating maternal mental health treatment into perinatal care to prevent long-term developmental issues in children and foster secure attachment relationships.

Disclosure of Interest: None Declared

EPV1254

Applied Improvisation to Improve Mental Health Training

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Introduction: Medical improvisation, or HPTI (Health Professional Training Improv), enhances critical skills in healthcare professionals. These skills include communication, empathy, time pressure management, and creative problem-solving. Our presentation aims to showcase a practical application of HPTI, demonstrating its relevance and effectiveness in mental health training.

Objectives: In this presentation, we will demonstrate our training method, including a short session with exercises adapted to healthcare professions. The session is divided into four parts. Each part is designed to maximize engagement and learning, with debriefing sessions to clarify teaching objectives and foster reflective practice.

Methods: Warm-Up Exercises: Physical and vocal exercises to optimize communication and awareness. Improvisation Techniques: Exercises focused on mastering emotions and various forms of communication, allowing participants to explore their strengths and limitations. Medical Scenario Applications: Short clinical scenarios to emphasize the cognitive and affective dimensions of empathy. Review of Existing Workshops and Research: Presentation of current workshops and research to encourage further exploration and application in training. Each part includes a debriefing session to clarify teaching objectives, develop a reflective approach, and identify areas for improvement.

For our ongoing comparative study we have implemented the following questionnaires for our training participants: IUS (uncertainty intolerance scale) and Acceptance and Action Questionnaire-II (AAQII). A total of 50 students participated in our research in both countries.

Results: Hungarian training participants included medical school students in Hungary and fourth-year speech therapy students in France and included professional scenarios based on stress and emotion management, interdisciplinary collaboration and collaboration with the patient, and communication, with debriefing on their performance. The data is currently being collected.

Conclusions: Applied improvisation through HPTI offers a valuable approach to improving mental health training. By enhancing communication, empathy, and problem-solving skills, healthcare professionals can provide better patient care and navigate their roles more effectively. Our presentation demonstrates these techniques and encourages their integration into regular training programs.

Disclosure of Interest: None Declared

EPV1258

Observational study of referrals to mental health from primary care

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Introduction: Following the COVID pandemic, there has been an increase in mental health consultations in recent years, often referred to as a 'fourth wave'. However, what has been observed in mental health centres is that these consultations are not so much about serious mental disorders, but rather occasional disorders due to social and work-related factors.

Objectives: The aim of this study is to analyse the data collected from referrals to psychology in a mental health centre.

Methods: Referrals to psychology from primary care at the Majadahonda Mental Health Centre were analysed for the period from October 2022 to April 2024 in a specific weekly consultation for the psychology waiting list.

The data collected are the diagnoses of these patients, whether or not they attend the assessment consultation and whether or not they are discharged after the first consultation.

Results: A total of 115 patients were seen between October 2022 and April 2024. These patients were all notified of the appointment one week in advance.

Of the total number of patients who attended, 29 consulted for depressive-anxiety-adaptive disorder, 22 were referred for work-related reasons (burn out), 12 for marital problems, 7 for parenting problems, 12 had no clinical reason for referral to Mental Health and 25 did not attend the consultation.

Those who were discharged at the first consultation were 33.