E-mental Health

EPV0730

Digital Cognitive Behavioral Therapy (CBT) Apps for ADHD: A Systematic Review of Recent Evidence

A. Alalsultan Alghory[1]
[1]Istanbul Medipol University, Istanbul, Türkiye
doi: 10.1192/j.eurpsy.2025.1417

Introduction: Attention-deficit/hyperactivity disorder (ADHD) is a neurodevelopmental condition characterized by persistent patterns of inattention, hyperactivity, and impulsivity. Cognitive Behavioral Therapy (CBT) is a well-established intervention for ADHD, helping individuals manage symptoms by targeting dysfunctional thought patterns and behaviors. In recent years, the accessibility of digital CBT apps has expanded, providing a potential alternative to traditional therapy. This systematic review aims to assess the efficacy of digital CBT apps for symptom management in individuals with ADHD.
Objectives: This review seeks to (1) evaluate the effectiveness of digital CBT apps in reducing ADHD-related symptoms such as inattention and impulsivity, (2) assess the adherence and usability of these apps, and (3) identify gaps in the literature to guide future research on digital interventions for ADHD.
Methods: A systematic search was conducted using PubMed and Google Scholar to identify peer-reviewed studies published within the last 5 years (2019–2024). The search terms used included "ADHD," "digital CBT," "mobile apps," and "cognitive behavioral therapy." Inclusion criteria were studies that focused on the use of digital CBT interventions specifically for ADHD symptom management in both children and adults. Studies that assessed the effectiveness of these interventions using standardized symptom rating scales were prioritized. Articles that involved non-CBT digital interventions, case reports, or review articles were excluded.
Results: Six studies met the inclusion criteria. The results showed promising outcomes for ADHD symptom reduction, particularly in reducing inattention and impulsivity. Lenhard et al. (2018) demonstrated significant improvement in ADHD symptoms in children using digital CBT programs. Nigg et al. (2020) found similar improvements in adults. Sibley et al. (2021) observed enhanced executive functioning with high adherence to app-based interventions. In Torous et al. (2020), digital CBT apps improved patient engagement and accessibility to care. Hirvikoski et al. (2017) reported moderate effectiveness in symptom control but emphasized the need for continued monitoring of user adherence. Russell et al. (2021) highlighted the potential for personalization in digital therapies, although further research is needed to optimize these interventions.
Conclusions: The review suggests that digital CBT apps offer a promising approach for ADHD symptom management, particularly in increasing accessibility and adherence to therapy. While these interventions show moderate to significant effectiveness in reducing core symptoms like inattention and impulsivity, further research is needed to address personalization and long-term efficacy. This highlights the growing potential for digital mental health interventions to complement traditional ADHD treatments.

Disclosure of Interest: None Declared

EPV0731

A promising future for tele-mental health in Oman: A qualitative exploration of clients and therapists' experiences

T. Al-Mahrouqi[1]*, K. Al-Alawi[1], M. Al-Alawi[2], N. Al Balushi[2], A. Al Ghailani[1], H. Al Sabti[1] and H. Al Sinawi[2]
[1]Oman Medical Speciality Board and [2]Sultan Qaboos University Hospital, Muscat, Oman
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1418

Introduction: Objectives: Tele-mental health services can play an important role in overcoming barriers in mental health services in the Eastern Mediterranean Region. However, despite its potential, tele-mental health has not been widely adopted in Oman.
Objectives: This study is an exploratory investigation into the experiences of therapists and their clients in utilizing video-based tele-mental health care during the COVID-19 pandemic.
Methods: A total of 19 semistructured qualitative interviews were individually conducted, it included 13 adult clients with mental health conditions who received video-based tele-mental health care and six clinical psychologists who provided video-based tele-mental health care during the COVID-19 pandemic.
Results: The clients reported favorable experiences using tele-mental health, with the primary benefits being convenience, easy accessibility to subspecialized care, reduced absenteeism from work with commuting costs, and alleviated mental health stigma. The therapists also expressed experiencing benefits from tele-mental health, such as reduced risk of intrahospital infection, reduced healthcare costs, and the achievement of work-life balance. Primary concerns were related to the lack of public tele-mental health services, lack of specified tele-mental health guidelines, shortage of trained therapists, limited access to high-speed Internet, electronic devices, privacy, and concerns toward the security of tele-health systems in general.
Conclusions: Clients and therapists report that tele-mental health offers new opportunities to improve the quality of mental health-care services in Oman, and that the challenges could be resolved by establishing governmental tele-mental health services along with developing tele-mental health guidelines and implementing local postgraduate clinical psychology programs in universities in Oman.

Disclosure of Interest: None Declared

EPV0732

Suicide Prevention based on IA detection for Inpatients (SPIIN)

S. Berrouiguet[1], C. Appréderisse[1]*, L. Carvalho-Fontes[2] and M. Irles[2]
[1]Adult Psychiatry, CHU Brest and [2]Human Science department, ISEN, Brest, France
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1419

Introduction: Hospital suicide rates vary according to study from 100 to 550 per 100,000 admissions. This is 10 to 30 times the rate of suicide rate in the general population. In prison, there is an average of one death every two or three days, Most of them by suicide.

https://doi.org/10.1192/j.eurpsy.2025.1419 Published online by Cambridge University Press

Sensors and Artificial Intelligence to avoid and/or interrupt suicide in the inpatients population. Preliminary explorations will determine weather this kind of device might be acceptable for care providers and patients.
Objectives: Determine weather careproviders (doctors, nurses) consider the SPIN system as usable in a routine hospilat care setting Determine weather careproviders (doctors, nurses) consider the SPIN system as acceptable
Establish the technical feasability of the SPIN sytem includin hadware (sensors) and softwar (algorithm) in an invitro setting.
Methods: A full presentation of the spin device was presented to the careproviders in a in vitro setting and via a video tutorial of the data capture procédure.
Participants were interviewed during a personal meeting.
Evaluation criteria were :Score to the SUS usablity scale, score the net promoter score and Analysis of the qualitative contents of the interviews.
Results: Qualitative analysis of the interviews contents showed a good
The Spin system will enable earlier intervention in cases where risk factors associated with increased suicidal risk are identified, as well as adjustment of therapies associated with the management of suicidal risk. It can also be used to adjust hospitalization conditions for patients at risk of suicide. transfer knowledge to the prison environment, for example, or to the home of a patient identified as being at high risk (repeat patient).
According to participants, the SPIN device will:

- alleviate the mental workload of caregivers whose job it is to supervise high-risk patients (risk of falling, risk of agitation, risk of suicide, etc.).
- admit patients under better conditions (less frequent searches on admission, less frequent room visits, more human-centred care).

This type of system will free us from the logistical constraints associated with the proximity of surveillance rooms and treatment rooms, or even their availability. In this way, patients in intensive care units (monitoring rooms with a view of the nurses' station) can benefit from more flexible hospital conditions (accommodation), thanks to a remote monitoring system.

Image:

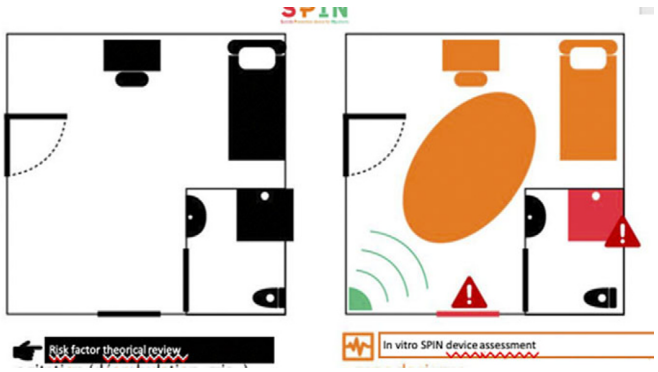
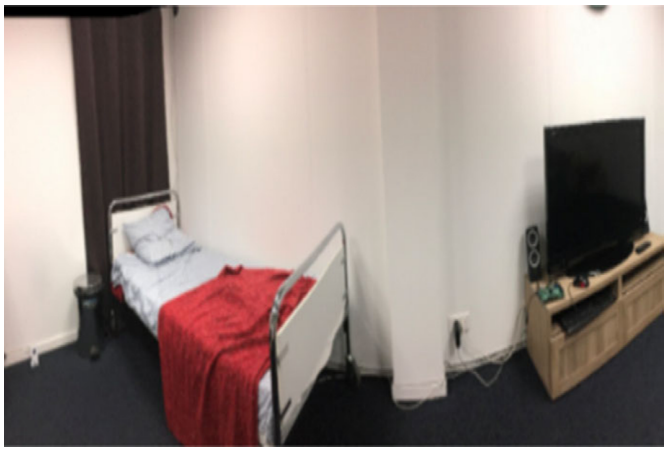


Image 2:



Conclusions: Overall, our study showed a good acceptance of the in vitro setting of the SPIN device in the careproviders population. The newt step of our study will decribe the acceptance in a patient populations and the efficiency on suicidal outcomes in routine population.

Disclosure of Interest: None Declared

EPV0733

Efficacy of Step-by-Step (SbS) in Improving Depressive Symptoms and Functional Impairment: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

V. Astori[1]*, F. Pesente[2], G. de Oliveira e Souza[3], T. Y. Kimura[3], G. Coachman Hollenstein[1], L. Pontes de Oliveira[1] and D. Fernandes Holanda[4]

[1]Escola Superior de Ciências da Santa Casa de Misericórdia de Vitória; [2]Universidade Federal do Espírito Santo, Vitória; [3]Universidade Federal de Minas Gerais, Belo Horizonte and [4]Universidade Federal do Amazonas, Manaus, Brazil
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1420

Introduction: The growing need for effective solutions to bridge the mental health treatment gap is particularly critical in countries where economic and political crises have exacerbated existing mental health challenges. In this context, the urgency for scalable and accessible interventions is evident. Step-by-Step (SbS), a guided digital self-help program developed by the World Health Organization (WHO), has been implemented as a promising approach to alleviate depressive symptoms and improve functionality in vulnerable populations.
Objectives: This meta-analysis aims to evaluate the findings of studies that examined the efficacy of SbS, compared with enhanced care as usual (ECAU), in reducing depressive symptoms and functional impairment.
Methods: We systematically searched PubMed, Cochrane, and Scopus for randomized controlled trials (RCTs) comparing SbS with ECAU. The pooled outcomes were the overall improvement in