Guidelines/guidance

EPV0340

Practice guidelines for intramuscular injection in mental health: A delphi method

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doi: 10.1192/j.eurpsy.2021.1909

Introduction: Intramuscular injections (IMI) remain a frequent practice in mental health. The available guidelines for IMI in mental health only focus on the technical side of the practices. Moreover, no recent update has been performed to improve practice of IMI in mental health
Objectives: To assess a formalized consensus agreement regarding the best practice concerning IMI in mental health and to develop practice guidelines.
Methods: A two-round Delphi method was used. The scientific committee consisted in one psychiatrist, one orthopaedic surgeon, one infection control practitioner, one hospital pharmacist, one mental health nurse, one nurse exploring care relationship and one nurse educator. From literature review, each expert proposed specific recommendations. The panel experts were asked to rate the appropriateness and the applicability in current practice of each recommendation on a 9-point Likert scale. Panel members were recruited in five mental health institutions. The first round questionnaire was emailed to each respondent on February 2020 and the second one on June. Propositions were considered appropriate and applicable in current practice if the median was >=7. Agreement among experts were judged by the statistical measure of the Interpercentile Range
Results: From the first round, 46 recommendations were retained by 49 nurses. 27 propositions were retained after this second round by 32 nurses. The scientific committee added 12 other recommendations because of their importance in the literature and clinical practice.
Conclusions: This study provides consensus-based recommendations on IMI in mental health. Nursing staff need to be educated about the new guidelines from both the theoretical and clinical perspectives

Disclosure: No significant relationships.
Keywords: Delphi method; Intramuscular injections; Nurse practices; Mental health nursing

Intellectual disability

EPV0342

Psychotropic medication for challenging behavior in people with learning disabilities in Qatar

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doi: 10.1192/j.eurpsy.2021.1910

Introduction: Challenging behavior is a common reason for referral to psychiatric service. Psychotropic medications widely used to modify behaviors, even when no evidence of diagnosable mental illness. However, literature show little evidence that benefits outweigh the risks in their prescription. Monitoring using International guidelines may help improving the outcomes. We audit current practice against known standards.
Objectives: - To assess adherence within the Qatar Mental Health Services to National guidelines on using medication to manage behavior problems in adults with a learning disability. - To identify strengths and weaknesses in current practice. - To Make recommendations to improve LD patient care
Methods: Patients with LD attending psychiatric clinic screened using selection and exclusion criteria and data collected and analyzed using format from the International standards.
Results: 102 patients screened, 85 selected and 17 cases excluded Age range 18 to 50 years. 27% mild, 29% moderate and 44% severe LD, Autism 40% Psychiatric Diagnosis 55% Challenging behavior 45% Antipsychotic prescribing: 79% Rationale documented in 74%, Capacity assessment in 81%, Review of side effects in 53% Safety of medication in 61%, Medication discontinuation in 66%, Reasons for discontinuation in 36%
Conclusions: Antipsychotics use (79%) is high with several combinations of IM and oral or more than 2 drugs. There is need for improvement across all standards. Rationalising the prescribing for LD patients to improve the outcomes for the safety of these patients. The audit indicate need for specialist service to monitor prescribing and apply standards of care in clinical service.

Disclosure: No significant relationships.
Keyword: Learning disabilities

EPV0343

The structure of the cognitive reserve in Alzheimer's disease

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doi: 10.1192/j.eurpsy.2021.1911

Introduction: Alzheimer's disease is common among the modern population. Emotional support for caregivers and a stable social role contribute to the maintenance of cognitive resources in Alzheimer's.

https://doi.org/10.1192/j.eurpsy.2021.1909 Published online by Cambridge University Press