professional (10.9% in 2020; p=0.111), the same number of students were taking any prescribed medication for mental health (10.9% in 2020; p=0.111). One-third of respondents (n=53; 34.9%) had taken non-prescription medication in the last year to improve their well-being or mood (27.3% in 2020; p=0.143), and 45 (29.6%) had taken medication in the last year to improve concentration or academic performance (38.3% in 2020; p=0.107).

Conclusions: The study showed high mental health care needs among medical students with a tendency to self-medication. Notably, mental health indicators have not improved since 2020 despite the end of the COVID-19 pandemic. Our findings highlight consistent trends in medical students' mental health and underscore the need for targeted interventions to support this vulnerable population.

Disclosure of Interest: None Declared

EPV0939

Breaking the barrier: stigma, psychiatric disorders and life-threatening risks in healthcare: case report

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Introduction: The existing studies found that stigma expands also among healthcare professionals when it comes to psychiatric patients, where a particular group is represented by substance use disorder patients, who are often perceived as manipulative, irresponsible or non-compliant.

Objectives: The aim of this case presentation is to emphasize the importance of stigma reduction especially among healthcare professionals.

Methods: A 26-year-old female patient with medical history of treatment-resistant epilepsy and misuse of cannabis and alcohol was brought into the Psychiatry ward after multiple grand-mal seizures, which occurred after weeks of daily use of alcohol and no adherence to the medical treatment.

Results: Prior to the admission, the patient was directed to the Neurology ward, where the hospitalization was declined due to her psychiatric history and the multi-drug test result, which turned positive for THC.

On the first day after admission, the patient had two seizure episodes, lasting 10 and respectively 30 minutes, after which she was transferred to the ICU department, where she was stabilized. Therefore, she returned to the psychiatric ward, where the patient enters status epilepticus, for which she underwent an neurological examination and received emergency treatment successfully.

The following day, the patient presents another episode of status epilepticus, after which she does not recover her respiratory function spontaneously and suffers cardiac arrest. The resuscitation protocol was initiated, an Emergency Medical team was requested to take over. After 4 minutes of CPR, the patient became pulmonary and hemodynamically stable.

Conclusions: Stigma is one of the factors that can influence the quality of the healthcare services provided by physicians. In the given case, stigma led to a life-threatening scenario, in which the patient was denied to receive adequate neurological treatment due to cannabis and alcohol use disorder. The impact of stigma on healthcare delivery and the barriers to receiving adequate treatment in these cases emphasize the need for training and education for all healthcare professionals.

Disclosure of Interest: None Declared

EPV0940

A naturalistic study on physioterapy in acute psychiatric service

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Introduction: There is clear evidence on the physical and psychological benefits of a bodily approach for the treatment of psychiatric disorders. They can have a significant impact on the patient's perceived suffering (Carek et al. IJPM 2011; 41(1) 15–28). In January 2024, a Physiotherapy Project started at the Acute Psychiatric Service of the Rieti ASL in collaboration with the Physical and Rehabilitation Medicine service.

Objectives: Evaluate the impact of the physiotherapy program on psychopathological dimensions and on the patients subjective well-being.

Methods: The naturalistic study was conducted on subjects consecutively hospitalized at the SPDC from January to June 2024 who voluntarily joined the physiotherapy activity. The intervention was administered with bi-weekly sessions of about 45 minutes and included: stretching, orientation exercises, active movement, coordination, muscle strengthening. The Exclusion Criteria were: sedation status, disorganization, behavioral problems. The General Health Questionnaire-12 (GHQ-12) and the Brief Psychiatric Rating Scale (BPRS) were adminstred at admission (T0) and discharge (T1). A Self-evaluation of the useful of the program was administred only to discarege (T1): participants answered by choosing between "not useful", "partly useful", "very useful" to 4 questions on the usefullness of the intervention.

Results: Thirty-five participants (17 M, 18 F; mean age 38.2±15,4) were admitted to physical activity. They recieved the following diagnoses: 48.6% Psychotic Disorder, 20% Depressive Disorder, 2.9% Bipolar Disorder, 28.6% Personality Disorder. Eleven of 35 participants had comorbid substance use disorder (14.3% alcohol, 5.7% cocaine, 5.7% cannabis, 2.9% opioids, 2.9% other substances). The hospitalization time was 11.8±4.3 and the average number of physical sessions was 1.7±0.8. The BPRS (44.4±11vs25.9±4.5; F=1024.25; p<0.001) and GHQ-12 (24.6±4.9vs15.11±5.8; F=833,43; p<0.001) mean scores significant improved in two time of evaluation (T0 and T1).

	very useful	partly useful	not useful
How useful was it for you to practice physiotherapy during your hospitalization?	46,2%	53,8%	
How much has it helped you manage anxiety?	65,4%	34,6%	
How much has it helped you muscle tension?	73,1%	19,2%	7,7%
Did participating in the group improve your mood?	61,5%	30,8%	7,7%

Conclusions: Participants showed a reduction in psychopathological severity and an increase in perceived well-being between T0 and T1. They found useful to practice physioterapy during hospitalozation and to manage anxiety, muscle relaxation and mood improvement.

Disclosure of Interest: None Declared

EPV0941

Advancing resilience in healthcare professionals: A multifaceted IoMT-based strategy to combat burnout

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Introduction: The escalating burden of occupational stress and chronic health issues among healthcare professionals frequently culminates in burnout syndrome.
Objectives: This study proposes the development of a prototype mobile recommendation system that utilizes the Internet of Medical Things (IoMT) for health monitoring and burnout assessment, while simultaneously offering coping strategies for healthcare professionals.
Methods: A digital framework was conceptualized using the Unified Modeling Language (UML), **which outlined** the system's modules and graphical interfaces. The proposed system **integrates a range of** biometric sensors, including an **electrocardiogram** (ECG), a blood pressure monitor, a blood oxygen saturation monitor, and temperature sensors, complemented by a psychometric **assessment tool** to evaluate burnout syndrome.
Results: The **results of this study demonstrate that the proposed** system **can offer significant** benefits **in terms of** promoting physical and mental well-being. By **functioning** as a **continuous** health monitoring tool and a preventive measure against stress and chronic illnesses, **the proposed system can enhance** the resilience of healthcare professionals.
Conclusions: The proposed system not only facilitates proactive health surveillance but also delivers targeted interventions to alleviate burnout effects. **The implementation of** this technology could revolutionize mental health management in the workplace, paving the way for robust health policy formulation within medical institutions.

Disclosure of Interest: None Declared

EPV0942

Desire for social distance towards mentally ill people

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Introduction: Familiarity with, social distance from people with mental illness and socio - demographic characteristics has been linked to conditions that lead to weaker prejudiced beliefs and a more positive opinion about mental illness.
Objectives: The relation of the attitudes and perceptions of the citizens of Larissa city towards mental illness and their desire for social distance from the mentally ill people, in relation to their familiarity with mental illness and their demographic characteristics.
Methods: A **convenience sampling survey** was conducted in Greece, **Larissa City (n=220).** The research tools which were used were: a) **Familiarity** was assessed using **the Level of Contact Report**, b) **The Social Distance Scale**, to measure the desire for social distance from people with mental illness c) Attitudes about mental illness were assessed using **The Opinions About Mental Illness (OMI) Questionnaire** and finally d) **a questionnaire for the socio - demographic information.**
Results: Univariate and multivariate analysis was applied for the statistical analysis of the data, which showed that: Desire for social distance from people with mental illness is positively related with the familiarity (with mental illness) but on the other hand is negatively related to the opinions / attitudes about mental illness.
Conclusions: The results from this study highlight and emphasize the important role of familiarity (with mental illness) and the desire for social distance (from people with mental illness) in the formation of positive/negative (prejudiced) attitudes and perceptions about mental illness.

Disclosure of Interest: None Declared

EPV0943

The Relationship between Mental Health and Music Listening in the Elderly: Is There a Connection?

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Introduction: All older adults have a strong desire to age healthily and successfully. Because of this, the research community has extensively researched various influences on an older person's aging experience. One of those influences is music, which is associated with a positive impact on the aging experience and contributes to an individual's health, wellness, and quality of life.
Objectives: This study aims to explore the relationship between older adults' mental health and music listening.
Methods: A self-report survey was employed in this study with 168 people over the age of 65, using a convenience sample. The survey had two parts: the first part included socio-demographic information and a variety of music and listening factors, while the second part was a health-related quality of life assessment—the SF-36.
Results: The Mann–Whitney statistical test was used to examine the hypothesis that the mean total score of the SF-36 mental health subscale is different between participants who identified as enjoying