mental states from those of others,has recieved increasing interest. Studies that have explored SOD in psychiatric or neurodevelopmental disorders generally used static images or movies that progressively morph from one's own face to another's. However, these paradigms may be insufficient for SOD assessment given the centrality of embodiment in the pathophysiology of these disorders. The new Alter Ego double mirror paradigm was developped to specifically explore SOD under greater ecological conditions.This innovative device allows the progressive morphing of one's own face to that of another between two subjects physically facing each other on either side of the device.

Objectives: Two pilot studies were conducted to investigate self-recognition and self/other distinction respectively in adolescents with Anorexia nervosa (AN) and Autism Spectrum Disorder (ASD) compared with matched healthy controls through a self/other face identification task using the "Alter Ego" TM double mirror system.

Methods: Participants had to watch a double mirror in which their own face was gradually morphed into the face of an unfamiliar other (self-to-other) or vice versa (other-to-self), requiring them to indicate at which point they judged the morph to look more like their own face than the other's face.Two judgment criteria were used: 1) M1: Threshold at which the subject starts recognizing his own face during the other-to-self morphing sequence 2) M2: Threshold at which the subject starts recognizing the other's face during the self-to-other morphing sequence. For participants with AN, in a second part, SOD was reassessed during five different sensorimotor tasks aimed at increasing body self-consciousness.

Results: Compared to controls, participants with ASD and AN showed an earlier self recognition in the other-to-self direction and a delayed other recognition in the self-to-other direction. Moreover, contrasting with controls, in ASD and AN participants, the critical threshold for switching between self and other varied with the direction of morphing. Finally, when participants with AN were seated with a backrest and footrest reinforcing the median axis of their body, the self-recognition threshold (M1) increased significantly approaching that of controls.

Conclusions: The preliminary results of these studies uncovered novel findings showing first behavioral evidence of impaired self/other distinction in individuals with ASD and AN through an embodied face-recognition paradigm. These results confirm the interest of the Alter Ego double mirror paradigm for the study of alterations in self-consciousness and Self/Other Distinction as a transosographic dimension common to various neurodevelopmental or psychiatric disorders.

Disclosure of Interest: None Declared

EPV1276

General practitioner hospitalists in psychiatry – may we help you?

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Introduction: Patients admitted to psychiatric services present with several acute and long-term somatic health problems. Psychiatrists have limited time and expertise to manage those conditions. Nevertheless, general practitioner (GP) hospitalists rarely exist in psychiatric facilities.

Objectives: To examine the effects of a novel hospitalist service we describe performance of GP hospitalists.

Methods: HUS Helsinki University Hospital Psychiatry has 12 hospital campuses (550 beds in total) and over 30 outpatient clinics in Southern Finland. During February-May 2024 the organization had three part-time GP hospitalists covering 11 acute adult psychiatric wards (307 beds), six forensic psychiatric wards (120 beds), and two out-patient clinics. Hospitalist assessments at hospital wards and outpatient clinics included structured health checks and consultations from psychiatrists and registered nurses. The hospitalists collected characteristics from consecutive assessments by filling in an online survey. Somatic health conditions assessed in consultations, and those needing attention in health checks were coded according to ICD-10 classification.

Results: The hospitalists provided 245 assessments: 223 consultations and 22 health checks. The majority (n=146,60%) of the assessments lasted for 30-90 minutes, one third (n=82,33%) lasted less than 30 minutes, while some (n=17,7%) took over 90 minutes. Of the assessments 49% (n=120) were hospitalist's appointments, 12% (n=29) were provided by a phone call, 1% (n=3) were video appointments and 38% (n=93) were solved based on patient records. The most common conditions in the consultations were endocrine and cardiovascular related (Image 1). The hospitalists estimated that eight referrals to emergency departments and 22 to somatic specialists were avoided with the help of the consultations. In turn, hospitalists themselves referred 18 patients to somatic specialists. In the health checks the hospitalists identified 56 somatic conditions needing attention: cardiovascular, endocrine, gastrointestinal, dermatological and vision related problems were the most prevalent (Image 2).

Image 1:

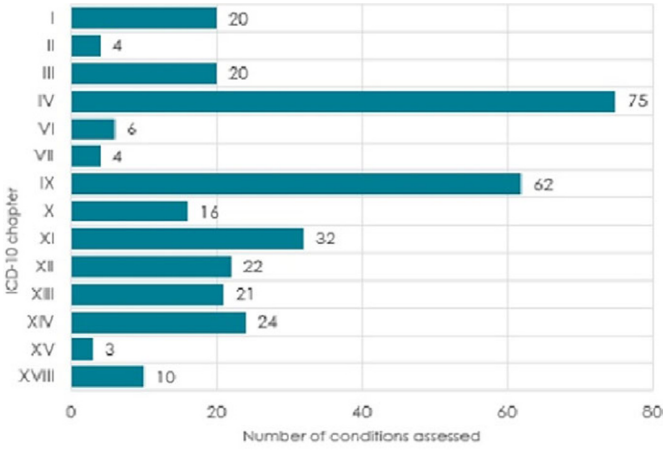


Image 1. Conditions assessed in consultations according to ICD-10 classification.

Image 2:

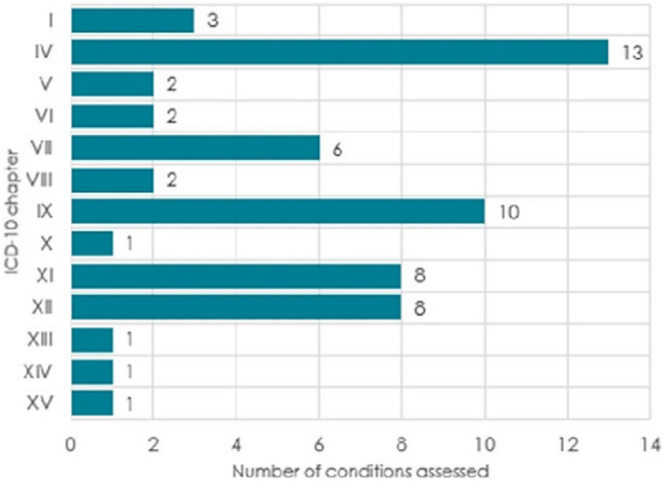


Image 2. Conditions assessed in health checks according to ICD-10 classification.

Conclusions: The variety and amount of untreated chronic common diseases and specific somatic conditions related to psychiatric diseases/medications was substantial, and even for the GP hospitalists, time-consuming to handle. Cardiometabolic problems were the most prevalent of health concerns. GP hospitalists are one of the real-world solutions in improving the overall health of patients with severe mental illnesses, and in alleviating the heavy workload of treating psychiatrists.

Disclosure of Interest: None Declared

EPV1277

Validity Evidence Based on the Content of the MAPS-B Cognitive Assessment Instrument

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Introduction: The MAPS-B is part of a project focused on the construction of instruments for cognitive assessment in the Brazilian population. Comprising eight subtests, MAPS-B aims to enhance understanding of cognitive functioning in individuals over 50 years old. The subtests assess autopsychic and allopsychic orientation, perception, naming, memory, praxis, visual and auditory focused attention, working memory, automatic language, inhibition, and semantic memory. Validity evidence is essential to ensure the safe use of new instruments in psychological assessments. Content-based validity evidence reflects the degree to which the instrument aligns with and adequately measures the construct of interest. Such evidence can be derived from expert judgment.

Objectives: To investigate the content-based validity evidence of the MAPS-B.

Methods: The analysis involved four judges with expertise in neuropsychological assessment, who completed a questionnaire on MAPS-B's subtests. The judges assessed the adequacy and clarity of the instructions and the relevance of each subtest for measuring the proposed construct, using a Likert scale (0 to 4). Space was also provided for comments and suggestions. Responses were analyzed using the Content Validity Index (CVI), calculated individually (CVI-I) and globally (CVI-T) for the instrument. A CVI score above 1 was considered acceptable (Yusoff, Education in Medicine Journal Int 2019; 51). Additionally, items with suggestions from the judges were qualitatively reviewed.

Results: Expert analysis indicated total agreement across all subtests, with individual and total CVI scores of 1, demonstrating adequacy in terms of relevance, clarity, and overall suitability. However, qualitative adjustments were suggested for two subtests assessing orientation and perception. Following analysis and consensus among the authors, modifications were made as shown in **Table 1**.

Table 1

Original Item	Post-Judge Analysis Adjustment
"What part of the day is it?"	A note was added to the manual, allowing assessors to clarify the question by adding, 'What part of the day are we in? Morning, afternoon, or evening?'"
"What is your address?"	A note was added to the manual specifying that correct answers may include just the street name and house number.
"Mentally assemble it and name it."	Rephrased to "Can you mentally assemble the figure and name it?"

Conclusions: This study provides content validity evidence for the MAPS-B, showing that its subtests adequately represent the constructs being assessed. All items achieved satisfactory CVI scores in line with literature recommendations (CVI > 1), indicating agreement on item relevance and suitability. The qualitative suggestions from experts contributed to refining the MAPS-B. Although the current results are satisfactory for the instrument's proposed use, future studies are needed to gather further validity evidence and investigate the instrument's reliability.

Disclosure of Interest: None Declared

EPV1278

Study of Correlations between Cognitive Performance, Age, and Education in the MAPS-T Screening Test

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Introduction: The MAPS-T is a screening instrument currently under development in Brazil, designed for patients over 50 years of