Introduction: Anxiety disorders are one of the most common mental disorders, yet only less than 20% of people with anxiety disorders receive adequate treatment. Digital interventions for anxiety disorders can potentially increase access to evidence-based treatment. However, there is no comprehensive meta-analysis study that covers all modalities of digital interventions and all anxiety disorders.
Objectives: A preliminary meta-analysis was conducted to examine the treatment efficacy of digital interventions [e.g., virtual reality (VR)-, mobile application-, internet-based interventions] for anxiety disorders and to identify potential moderators that may lead to better treatment outcomes.
Methods: We searched Embase, PubMed, PsycINFO, Web of Science, and the Cochrane Library for randomized controlled trials examining the therapeutic efficacy of digital interventions for individuals with anxiety disorders from database inception to April 18, 2023. Search keywords were developed by combining the PICOS framework and MeSH terms. Data screening and extraction adhered to PRISMA guidelines. We used a random-effects model with effect sizes expressed as Hedge's *g*. The quality of the studies was assessed using the Revised Cochrane risk-of-bias tool for randomized trials (RoB 2). The study protocol was registered in PROSPERO on April 22, 2023 (CRD42023412139).
Results: A systematic literature search identified 19 studies with randomized controlled trials (21 comparisons; 1936 participants) with high overall heterogeneity ($Q = 104.49$; $P < .001$; $I^2 = 80.9\%$). Digital interventions reduced anxiety symptoms with medium to large effect sizes ($g = 0.78$; 95% CI: 0.55-1.02; $P < .001$), with interventions for specific phobia showing the largest effect size ($n = 6$; $g = 1.22$; 95% CI: 0.51-1.93; $P < .001$). VR-based interventions had a larger effect size ($n = 6$; $g = 0.98$; 95% CI: 0.39-1.57; $P < .001$) than mobile- or internet-based interventions, which had medium effect sizes. Meta-regression results exhibited that effect sizes of digital interventions were associated with the mean age of participants ($\beta = 0.04$; 95% CI: 0.02-0.06; $P < .001$).
Conclusions: The results of this study provide evidence for the efficacy of digital interventions for anxiety disorders. However, this also suggests that the degrees of effectiveness in reducing anxiety symptoms can be moderated by the specific diagnosis, the modalities of digital technologies, and mean age, implying that the application of digital interventions for anxiety disorders should be accompanied by personalized guidance.

Disclosure of Interest: None Declared

Sexual Medicine and Mental Health

EPP0690

Risk assessment and treatment - Evaluation of a group therapy for people with pedophilia

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Introduction: Deviant sexual interest for children (pedophilia, hebephilia) is associated with a higher risk of sexual offending against children (CSA) and consuming child sexual abuse images (CSAI). There is a general shortage of therapeutic programs for individuals who feel sexually attracted to juvenile bodies and are concerned about their sexual behaviour. Efforts to establish regional centres throughout Germany offering preventive support led to the prevention network "Don't become an offender" ("Kein Täter werden").
Objectives: To identify dynamic risk factors (DRFs) and evaluate a treatment programme aiming to reduce CSA and CSAI among potential or existing pedosexual offenders (who have not been legally charged). In addition, changes in the course of therapy are examined to provide information about the accessibility and motivation of the target group and its therapeutic responsiveness.
Methods: Participants undergo standardized diagnostic and treatment procedures. Therapy comprises an outpatient psychotherapy program (group therapy) over the course of approx. 48 weekly sessions, optional individual and partner/relative including sessions, as well as additional pharmaceutical treatment. Assessments are carried out through self- and other-reported psychometric test batteries pre-, during and post-treatment up to a 3.5 year follow-up. The test battery includes clinical questionnaires (WHO-5, CTQ-SF), personality questionnaires (ISK-K, NEO-FFI), sexuality questionnaires (EKK-R, KV-M, MSI, HBI-19) and risk assessment procedures (VRAG-R, STATIC-99, VRS:SO). Main outcome measures are self- and externally-reported DRF changes well as offending behaviour characteristics.
Results: By September 20, 2023, N=12 individuals were enrolled in the treatment program. All individuals had a deviant sexual preference (exclusive/non-exclusive pedo-/hebephilia). Nine individuals reported past and/or current use of CSAI. Of these, two individuals reported at least one CSA in the past. Three had no previous use of CSAI or CSA history.
In the first treatment group (N=6), preliminary results show reduction in dynamic risk factors (e.g., Cognitive Bias, Sexual Compulsivity, Impulsivity) after the first 12 weeks of treatment. The evaluation of additional clinical data is pending.
Conclusions: To date, therapy for individuals with pedophilia or hebephilia has been insufficient – particularly when not offending. Ongoing evaluation of the therapy program should provide further insight into responsiveness and therapeutic motivation of this target group. In particular, the impact of therapy on changing dynamic risk factors for CSA and CSAI remains to be examined.

Disclosure of Interest: None Declared

EPP0691

Psychological Background of Sexual Dysfunctions – a Comparative Study on Hungarian and Spanish Samples

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Introduction: Sexual dysfunctions are prevalent issues affecting individuals' sexual well-being and relationships. These conditions encompass a range of difficulties in sexual functioning, from desire

and arousal to orgasm and pain. Psychological factors, such as dysfunctional beliefs about sexuality, play a significant role in the development and perpetuation of sexual dysfunctions (Nobre, Pinto-Gouveia, 2006; Nobre, Pinto-Gouveia, 2008). Additionally, personality traits, particularly those associated with the Dark Triad (Machiavellianism, narcissism, and psychopathy), have been suggested as potential protective factors to sexual problems, probably in interaction with sexual assertiveness and a wider experience in sexual behavior (Pilch, Smolorz, 2019).
Objectives: This study investigates the interplay between sexual dysfunctions, sexual dysfunctional beliefs, and Dark Triad personality traits, and compares the differences and similarities in the two different cultural (Hungarian and Spanish) samples.
Methods: Both samples were collected online by sharing the questionnaires on various platforms. Apart from the demographic and sexuality related background questions (age, sex, gender, sexual orientation, sexual lifestyle, etc.) our set of questionnaires included the Arizona Sexual Experience Scale (ASEX), Sexual Dysfunctional Beliefs Questionnaire (SDBQ, Male and Female Version) and The Short Dark Triad Questionnaire (SD3).
Results: The Hungarian sample consists of 465 participants, the Spanish of 215. However, the processing of the data is still underway, our preliminary results show, that there is a connection between the number of dysfunctional beliefs and occurrence of sexual dysfunctions. Just like Dark Triad traits seem to have negative correlation with dysfunctions.
Conclusions: Our research gives an opportunity to a better understanding of the psychological background of sexual dysfunctions. By taking in consideration the relationship between dysfunctional beliefs and said disorders, professionals can optimize sexual education to aid the prevention of them. Nevertheless, our findings can help the practice of psychotherapy in finding more advanced treatments, thus improving individuals' overall sexual, and general well-being.

Disclosure of Interest: None Declared

EPP0692

Tunisian parents' expectations and approaches regarding sex education of their children according to their age: a cross-sectional study

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Introduction: Adolescents often lack vital information for making wise sexual and reproductive decisions, leading to risks like abuse, unwanted pregnancies, and infections. Comprehensive, early, and age-appropriate sex education is crucial. While parents should play a significant role, many underestimate their responsibility. The perception of sex education is changing, with younger parents being more open to participating in their children's education.
Objectives: This study compares the approaches of Tunisian parents with adolescent and pre-adolescent children towards sex education.
Methods: This study used a cross-sectional design to collect data from Tunisian parents of children between the ages of 1 to 18 using an online survey. Two groups were recruited based on the age of their children, one group had parents of children younger than 10 years old, and the other had parents of adolescents. The survey included questions about the participants' demographics, approach to sex education, reasons for their approach, and opinions on sex-related education in public schools. The survey was anonymous and confidential, and data were collected from January to March 2023 through various social media platforms.
Results: This study surveyed 232 Tunisian parents with children between the ages of 1 and 18, divided into two groups based on the age of their children. The majority of participants were female (62.1%) and married (81.9%). The majority of participants in both groups agreed that sex education is important and indispensable, but only 54.7% of parents in the older children group responded positively to teaching sexual education as an independent subject. There was a significant difference between the two groups regarding their opinions about the appropriate age of sexual education for their children, and who they think should discuss sexual and reproductive health with young people. Most participants indicated that the human body and its development, sexual and reproductive health, prevention of sexually transmitted diseases and infections, contraception as well as puberty are the most important subjects to be addressed. Sexuality and sexual behaviors, the concepts of violence and safety, interpersonal relationships, consent, insults, harassment, and sexist cyberbullying were less frequently mentioned.
Conclusions: In conclusion, this study highlights the importance of sex education in Tunisia. Parents in both groups support it but differ on timing and integration. Barriers like communication challenges and religious beliefs exist. These insights can guide tailored sex education programs for Tunisian parents, promoting youth sexual and reproductive health.

Disclosure of Interest: None Declared

Neuroscience in Psychiatry

EPP0695

Electroencephalogram monitoring during ketamine antidepressant treatment: a pilot study

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Introduction: Depression is a major cause of disability world-wide. Up to a third of patients have a treatment-resistant form (TRD), presenting a major challenge. Ketamine has been introduced as a novel rapid-acting antidepressant effective in this population. However, at present, ketamine treatment is not routinely informed by any objective neural markers. Basic research has shown promising electroencephalogram (EEG) changes including a decrease in alpha power. However, clinical translation is lacking.