Introduction: The immediate antidepressant effect of Ketamine has become a breakthrough in the treatment of depression. Cytochrome CYP3A4 and 2B6 primarily metabolize Ketamine.
Objectives: The present study explores potential pharmacokinetic and pharmacodynamic interactions of Lamotrigine and Ketamine.
Methods: A literature search was conducted using ("ketamine" OR "Lamotrigine" AND Interactions in PubMed, Embase, and PsycINFO. Our literature search resulted in 72 hits and result in qualified five studies.
Results: We found five studies: one RCT study, a RCT, a crossover design, Two case reports, and one murine model study. In the first RCT conducted on 16 healthy normal volunteer subjects. lamotrigine significantly decreased ketamine-induced perceptual abnormalities ($P < 0.001$), positive ($P < 0.001$) and negative symptoms ($P < 0.05$), and learning and memory impairment ($P < 0.05$) which shows the counter effect of ketamine. Another study revealed Ketamine evoked increases in all the BPRS subscale scores, and all scores were lower after lamotrigine pretreatment. A case report from 2014 reports the failure of ketamine anesthesia in a patient with lamotrigine overdose. Another case report mentions that Lamotrigine reduced the craving in a patient with ketamine use disorder. A murine model study with lamotrigine showed improved PPI (Prepulse inhibition) ketamine-induced disruption. These results suggest that Lamotrigine may exert this effect via a glutamatergic system.
Conclusions: The literature review suggests that Lamotrigine interferes with glutamatergic neurotransmission reducing the effect of Ketamine. It is not clear how this may impact Ketamine's antidepressant action. Future large scale and well-designed RCTs are required to confirm these findings.

Conflict of interest: No significant relationships.

EPP0752

Perceived stress among nurses: A hospital-based study

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doi: 10.1192/j.eurpsy.2021.1061

Introduction: Stress can be described as a dynamic and reciprocal relationship between the person and the environment. Nursing is considered as an occupation with a constellation of circumstances leading to stress.
Objectives: This study aims to assess perceived stress among staff nurses in Hedi Chaker and Habib bourguiba Hospital from Sfax city, Tunisia
Methods: Nurses from Hedi Chaker and Habib bourguiba University hospitals in Sfax- Tunisia were invited to complete a structured self-report questionnaire. The questionnaire consists of the following parts: Perceived Stress Scale (10-item form), personal data and information relevant to types of work shifts and years of experience.
Results: A total of 146 (males = 49; females = 97) nurses participated in this study. The mean age was 37 years. Nearly 82 % of the participants considered themselves in very good health. Rotating shifts work was noted in 72.50% of cases. The average length of working experience was 7.96 years. The stress in most of nurses was in severe level (74.65%), followed by mild (23.28%) and moderate (2.05%) levels. High level of perceived stress was significantly associated with general health problems (P= 0.032). No significant association was found between level of perceived stress, types of work shifts and years of experience.
Conclusions: The results show a significantly high level of stress among staff nurses. Hence, nurses need support and subsequent interventions to cope with stress. Actions in this direction may contribute to the improvement of health, well-being and quality of life of the professionals.

Conflict of interest: No significant relationships.

EPP0753

Mental health service providers: Barriers in collaboration

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doi: 10.1192/j.eurpsy.2021.1062

Introduction: Collaboration between psychiatrists and psychologists (counsellors) is one of the key factors impacting efficiency of services in child and youth mental health. Despite the clear benefits, a teamwork approach is still limited and has some difficulties.
Objectives: The objective of the study was to explore potential barriers in the collaboration between professionals with different backgrounds.
Methods: Anonymous online survey for staff from various mental health clinics across Russia was completed by 142 psychologists and 70 psychiatrists ($\Sigma = 212$).
Results: 77.7% participants reported that collaboration is helpful in adult mental health services; 91.3% see partnership as an essential part of child and youth mental health. 61.6% specialists work together; 44.7% described it as a successful experience. At the same time 58.4% believe that pharmacological treatment should start first, and counselling may be postponed. 49.5% believe that doctors often diminish the importance of counselling. Fears and biases towards psychiatrists were reported by 28.9% of the sample. 25.4% participants reported lack of trust and limited understanding of counselling methods. Top barriers for collaboration that were reported: lack of opportunities on an organizational level (20% doctors and 45% psychologists), unclear professional boundaries and responsibilities (28.5% doctors and 15.4% psychologists), lack of motivation (20% doctors and 7% psychologists), lack of positive experience (11.2% psychologist and 0% doctors). The main reported benefit of collaboration by 39.6% was improved compliance and better treatment outcomes.
Conclusions: In order to make collaboration among mental health professional more efficient, there is a need to address the barriers listed above.

Keywords: quality of services; barriers; collobiration; Child Psychiatry