ECP013

Speech analysis in psychiatric disorders: experiences from the CALIBER study

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Abstract: Bipolar disorder (BD) is characterized by mood and cognitive fluctuations that manifest in speech patterns. Current assessments rely on subjective clinical evaluation, but advances in natural language processing (NLP) offer new opportunities for objective monitoring. This study analyzes speech from BD patients across different mood states—euthymia, mania, and depression—using structured tasks, spontaneous speech, and standardized text reading. Key acoustic, linguistic, and emotional features are extracted and correlated with clinical scales. Machine learning models are being developed to predict symptom severity and mood phase. This approach could provide reliable digital biomarkers, enhancing diagnosis, monitoring, and early relapse detection in BD. Standardized speech protocols may pave the way for international collaboration and large-scale validation.

Disclosure of Interest: None Declared

ECP014

Burnout and mental health issues in the psychiatry training and career pathway

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Abstract: Burnout and mental health issues have become increasingly prevalent among psychiatry trainees and early career psychiatrists, posing significant challenges to their well-being. This presentation explores the multifaceted relationship between psychiatry training environment and the occurrence of burnout, characterized by emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment. Factors contributing to the severe burnout in psychiatry trainees include long working hours, lack of supervision, and not having regular time to rest (Jovanović N. et al., 2016). Other potential factors described include the high demands of clinical responsibilities, emotional strain from patient interactions, and inadequate support systems. Encountering possible suicidal patients and coping with patients' violence are other factors that can have a strong influence on psychiatry trainees and early career psychiatrists' clinical activity, especially in the absence of appropriate training in the field and supervision (Chumakov E. et al., 2022; Longo G. et al., 2023). Studies indicate that a significant proportion of psychiatry residents experience symptoms of mental distress (Pitanupong J. et al., 2024; Toni F. et al., 2024) with depression being an important source of impaired mental well-being. Furthermore, the stigma surrounding mental health within the medical community often discourages trainees from seeking help, exacerbating feelings of isolation and distress. There's no question that poor mental health can affect not only psychiatry trainees and early career psychiatrists' personal health but also their professional development and patient outcomes. In this presentation the implications of these issues for the psychiatry field will be discussed. There's a growing demand for advocacy for comprehensive training programs that integrate wellness strategies, enhance supervision, and promote open conversations about mental health. By fostering a supportive environment and prioritizing self-care, the psychiatry community can mitigate the risks of burnout and mental disorders among peers, ultimately leading to a more resilient workforce and improved patient care. This presentation underscores the need to support the mental health of future psychiatrists and ensure the integrity of mental health services.

Disclosure of Interest: None Declared

ECP015

Burnout in doctors

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Abstract: Burnout is a set of experiences and symptoms which occurred in the context of stress and high ideals in the helping professions who feel drained, exhausted, tired, listless and unable to cope. Burnout leads to disengagement, blunted emotions, helplessness and hopelessness with feeling trapped causing detachment and depression. Prevention of burnout is important and includes interventions at policy, institutional and personal levels. These resources must include financial and human resources where appropriate; prompt and culturally acceptable help is available and easily accessible. Institutions must allocate sufficient funds for well-being of its staff. Various steps can be taken but perhaps most important is accessibility of services in a non-stigmatising manner. These services must be confidential, fit for purpose and widely advertised and accessible. Physical space to rest and access to affordable nutritious food are important. Access to occupational heath services or primary care are important.
Dinesh Bhugra

Disclosure of Interest: None Declared

ECP016

Prevention strategies in stress coping and life crisis in trainees and early career psychiatrists

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Abstract: The current post-covid situation and the increase of violent situations in the ward within another risk factors flourished

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