

latency for the first entry of an open arm (latency 1st visit) and time until subjects reach the end of an open arm (latency endexploration).

Statistical analyses were carried out using IBM SPSS Statistics 23.0 (IBM Corp., Armonk, NY, USA) and R software (R version 4.0.2). Pearson correlation was performed to assess associations between psychopathic traits and measures of anxiety-related constructs.

Results: Reduced levels of anxiety were associated with higher psychopathic traits. This was reflected in a correlation between the PPT sum score and all measures of anxiety-like behavior on the EPM (time on open arms: $R = .29$, $p < 0.001$; number of entries to open arms: $R = .32$, $p < 0.001$; latency 1st visit: $R = -.29$, $p < 0.001$; latency endexploration: $R = -.30$, $p < 0.001$). Psychopathic traits were also negatively correlated with subjective levels of anxiety on the EPM ($R = -.23$, $p = 0.004$). Sensation seeking (SSSV) ($R = .33$, $p < 0.001$) but not general levels of acrophobia (ACQ) ($R = -.13$, $p = 0.11$) were moreover associated with psychopathic personality traits.

Conclusions: In light of the ongoing discussion, our results demonstrate a correlation between psychopathic personality traits and anxiety-related behavior in a non-clinical sample. This supports the theory of a lack of fear in psychopathy and may influence risky and potentially harmful behavior in this population.

Disclosure of Interest: None Declared

EPP0850

Profile of forensic patients hospitalized in psychiatry

F. Azraf*, H. Berrada, S. Belbachir and A. Ouanass

Arrazi Hospital, Faculty of Medicine and Pharmacy of Rabat, sale, Morocco

*Corresponding author.

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Introduction: The question of violence and dangerousness is a central subject in psychiatry, since it is a source of stigmatization for many patients and represents a major element of medical, legal and social care. Violence being defined as: "the deliberate use or threat of deliberate use of physical force or power against oneself, against another person or against a group or community, which results in or is very likely to lead to trauma, death, moral damage, maldevelopment or deficiency". The violent character of the mentally ill was among the precursors to the discussion around the first therapeutic measures for the mentally ill. A better knowledge of the risk factors for the passage to a violent act in mental disorders is therefore necessary for the development of therapeutic and preventive strategies.

Objectives: The objective of our work is to determine the socio-demographic, clinical and criminological characteristics of forensic patients and to seek the predictive factors of violence in these patients.

Methods: This is a retrospective study spread over 10 years on a series of forensic patients who were hospitalized at the Ar-razi psychiatric hospital in Salé (Morocco). The collection of data was carried out from clinical observations, psychiatric expertise and an exploitation sheet.

Results: Numerous studies have defined subgroups of patients at risk. Factors such as positive symptoms, poor treatment compliance, and comorbidities such as substance use disorders or

antisocial personality traits have been described as predictive of violence.

Conclusions: The prevention of medico-legal acts must take into consideration these associated factors, in particular early management of the disorders, improvement of therapeutic observance and family care.

Disclosure of Interest: None Declared

EPP0851

Criminal behaviors and substance abuse in psychiatric patients

B. Benatti^{1,2}, F. Achilli^{1*}, S. Leo¹, L. Molteni¹, E. Piccoli¹, D. Gobbo³ and B. M. Dell'Osso^{1,2,4}

¹Luigi Sacco University Hospital, Psychiatry 2 Unit; ²CRC 'Aldo Ravelli' for Neuro-technology and Experimental Brain Therapeutics; ³Luigi Sacco, Centro Psicosociale, Università degli Studi di Milano Statale, Milan, Italy and ⁴Department of Psychiatry and Behavioral Sciences, Bipolar Disorders Clinic, Stanford University, Stanford, CA, United States

*Corresponding author.

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Introduction: People with mental illness are overrepresented throughout the criminal justice system. In Italy, an ongoing process of deinstitutionalization has been enacted: the Judicial Psychiatric Hospitals are now on the edge of their closure in favor of small-scale therapeutic facilities (Residenze per l'Esecuzione delle Misure di Sicurezza - REMS). Law 81/2014 prescribes that a patient cannot stay in a REMS for a period longer than a prison sentence for the same index offense. Therefore, when patients end their duty for criminal behaviors, their clinical management moves back to outpatient psychiatric centers. Elevated risks of violent behavior are not equally shared across the spectrum of psychiatric disorders. In the past several years, multiple studies in the field of forensic psychiatry confirmed a close relationship between violent offenders and comorbid substance abuse.

Objectives: In order to broaden the research in this area, we analyzed sociodemographic, clinical and forensic variables of a group of psychiatric patients with a history of criminal behaviors, attending an outpatient psychiatric service in Milan, with a focus on substance abuse.

Methods: This is a cross-sectional single center study, conducted in 2020. Seventy-six subjects with a history of criminal behaviors aged 18 years or more and attending an outpatient psychiatric service were included. Demographic and clinical variables collected during clinical interviews with patients were retrospectively retrieved from patients' medical records. Appropriate statistical analyses for categorical and continuous variables were conducted.

Results: Data were available for 76 patients, 51,3% of them had lifetime substance abuse. Lifetime substance abuse was significantly more common in patients with long-acting injectable antipsychotics therapy, >3 psychiatric hospitalizations, history of previous crimes and economic crime (Table 1). Additionally, this last potential correlation was confirmed by logistic regression.

Table 1.

	Lifetime substance abusers (N=39)		Non-lifetime substance abusers (N=37)		Proportion Difference N	P-value %
	N	%	N	%		
Depot administration						
Yes	11	(28,9%)	0	(0%)	28,9%	0,02
Hospitalizations						
Four or more	25	(64,1%)	5	(33,3%)	30,8%	0,04
Economic crime						
Yes	15	(40,5%)	1	(6,7%)	33,8%	0,02
Previous crimes						
Yes	17	(51,4%)	2	(13,3%)	38,1%	0,02

Conclusions: Data emerging from this survey provide new information about offenders in an Italian mental health service with a focus on lifetime substance abuse in these patients. Our preliminary results should be confirmed in larger sample sizes.

Disclosure of Interest: None Declared

EPP0852

One year snapshot: antipsychotic use in institute of forensic psychiatry of kosovo

G. Halilaj^{1,2*}, M. Gjoca³, N. Daka³, F. Drevinja², S. Rakaj⁴ and N. Fanaj³

¹UBT Prishtinë Kosovo; ²Institute of Forensic Psychiatry, Prishtina; ³Alma Mater Europaea Campus College Rezonanca, Prishtina, Prishtinë and ⁴QDT BIOING, Prizren, Kosovo

*Corresponding author.

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Introduction: The use of antipsychotics in the treatment of the mentally ill represents a complex modality, especially in specialized institutions such as the Institute of Forensic Psychiatry of Kosovo. Current best practices are summarized in clinical guidelines, which nevertheless recognize the importance of individualizing treatment. In literature there is the scarcity of knowledge on the effectiveness of pharmacological treatment within a forensic psychiatric population.

Objectives: To understand the features of the use of antipsychotics in IPFK as a prerequisite for increasing the quality and adequate treatment in psychiatric institutions in Kosovo.

Methods: It is a retrospective study. The files of 100 patients admitted to IPFK for evaluation and treatment in 2021 were analysed. The age ranged from 18 to 71 years (Mage=36.33; SD=12.66). General demographic data, types of antipsychotics, their doses, their combinations were looked at. Data analysis was processed with SPSS 26 and Microsoft Excel 2016.

Results: 43% of patients were not prescribed any antipsychotic drugs. 38% used one antipsychotic, 16% used 2 antipsychotics at the same time and 3% used three types of antipsychotics. 12% of patients used four types of psychotropic drugs (antipsychotic,

anxiolytic and mood stabilizer), 12% were on three types of psychotropic drugs, 42% did not use any type of medication. No side effects were noted. Only one case of refusal of therapy was recorded. The doses of the drugs used are within the recommended therapeutic limits. Most of the antipsychotics used were of the second generation. In 44% of cases they received Risperidone, in 17% of cases Haloperidol, in 14% of cases Olanzapine, in 5% of cases Clozapine and in only 1% Aripiprazole.

Conclusions: Antipsychotic medication is the main method of treatment in IPFK, based on the specifics of the cases. The impression of overuse of several antipsychotics at the same time requires deeper professional consideration in order to avoid chemical restraint as a management method.

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EPP0853

A long trip toward REMSs (Residenze per l'esecuzione delle misure di sicurezza): critical issues and perspectives in admitting patients to the Italian forensic psychiatric system

G. Listanti^{1*}, A. Vaia², L. Baldassarri Hoger Von Hogerthal¹, C. Romano¹, D. Gioia³ and M. Bustini³

¹REMS - Dipartimento di Salute Mentale e Dipendenze Patologiche, ASL Rieti, Rieti; ²Azienda Ospedaliera Sant'Andrea, Roma and ³Dipartimento di Salute Mentale e Dipendenze Patologiche, ASL Rieti, Rieti, Italy

*Corresponding author.

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Introduction: REMSs (Residenze per l'Esecuzione delle Misure di Sicurezza, which roughly translates into Facilities for the execution of security measures) are psychiatric residential facilities introduced in Italy following the discontinuation of Forensic Psychiatric Hospitals, a process started between 2012 and 2014 and concluded in 2017. REMSs are forensic psychiatric communities, focusing on treatment and rehabilitation, managed exclusively by the Italian NHS. They host psychiatric patients, who have committed crimes, but are not sent into the ordinary jail circuits because judged as mentally impaired and socially dangerous, with the aim that of stabilizing and treating psychiatric symptoms and that of their gradual social re-insertment. After the closure of psychiatric hospitals in 1978, the overcoming of forensic psychiatric hospitals is the big new thing happening in Italy when it comes to mental health. The introduction of REMSs has spotlighted how much is needed a care program used as a prevention tool, putting the mentally impaired with a social danger profile back into their dignity as human beings. Notwithstanding, after 10 years from its greenlight, some remarkable issues about REMSs system are at hand, starting from long waiting lists, which triggers the double risk of illegal jail detention of the mentally impaired; or leaving free without containment socially dangerous subjects.

Objectives: Purpose of the present study is to offer an overview of the Italian REMSs system, focusing on its critical issues such as waiting lists to be admitted and treating prospects for improvement.

Methods: Our work involves a research review on literature on REMSs, forensic psychiatric services and admitting procedures.