

included in a 6-month program of weekly CBT sessions with focus on metacognition, emotional dysregulation, social functioning and subjective well-being. Patients were assessed with the Metacognitions Questionnaire-30, Difficulties in Emotion Regulation Scale, Heinrichs Quality of Life Scale, The Psychological General Well-Being Index, Brief Psychiatric Rating Scale, Hamilton Depression Rating Scale at baseline and at 3 and 6 months, to verify any improvement on these specific domains and, possibly, on general psychopathology.

Results: In this study CBT showed to be effective on all domains evaluated, most notably for younger patients with a short history of disease (<5 years). Metacognitive capacity was the dimension with most evident improvements, followed by the ability to modulate emotions and the consequent improvement in psychosocial functioning and perceived subjective well-being. During the 6 months follow-up none of the enrolled patients experienced symptoms exacerbation or psychotic relapses.

Conclusions: In conclusion, the 6-month CBT treatment showed to be effective for stabilized psychotic patients, improving metacognitive functions, emotional regulation, psychosocial functioning, and subjective well-being. In addition, insight, adherence and the therapeutic alliance improved. The absence of psychotic relapses is not attributable with certainty to the effect of CBT since, for this purpose, longer duration studies on larger case series and with RCT methods are required. However, it is plausible that the improvement obtained in disease awareness and adherence may be a facilitating factor in relapse reduction.

Disclosure of Interest: None Declared

EPP0502

Bridging the Gap between Cognitive Behaviour Therapy and Psychodynamic Therapy: The Added Value and Impact of Introducing Training in Cognitive Analytic Therapy

F. Cassar* and D. Mamo

Psychiatry, Mental Health Services Malta, Attard, Malta

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.805

Introduction: Cognitive Analytic therapy (CAT) is a brief focal therapy consisting of 16 - 24 sessions in the context of complex cases. It involves three stages: reformulation, recognition and revision (Taylor *et al*, 2017 Dec;90(4):511-529). CAT was shown to have an effect within a 24-session format and has been found to be particularly helpful by those who work with these 'hard to help' patients, including abuse survivors, the elderly and offenders.

Objectives: To introduce CAT to Malta as a Creative Service Initiative with outcome measures in part-fulfillment of the Malta Postgraduate Training Programme in Psychiatry. To perform a qualitative study to see the attitudes of course participants towards other modalities of therapy besides Cognitive Behavioral Therapy and Psychodynamic Psychotherapy.

Methods: A CAT Skills Training Course was organised for the first time in Malta in collaboration with Richmond Foundation, the Malta Association of Psychiatrists and the International Cognitive Analytic Therapy Association. The course was delivered over 6 days. This was divided into 35 hours of theory and 8 hours of skills based sharing and learning with a particular emphasis on contextual

mapping including team dynamics, systemic and structural role positioning within health services and organisations.

A qualitative questionnaire was disseminated to participants at the end of the 6-month programme which included supervision via skype and completion of a reflective essay. A follow-up training course in 2022 was organised and the introduction of CAT Malta to psychiatric trainees planned for March 2023.

Results: A total of 20 participants participated in the original CAT Training in March 2020 of which 1 was a psychiatrist, 2 were psychiatric trainees, 6 were social workers, 3 were counsellors and the remainder were psychologists. From this group of participants 4 members (1 psychiatrist, 1 psychiatric trainee, one psychologist and one social worker) continued to level 2 of training with the aim of continuing to CAT practitioner training. The remaining 16 participants dropped out in view of personal commitments and pressures presented during the COVID-19 pandemic. A new cohort of 14 participants were recruited in September 2022 of which all plan to continue to level 2 of training with the hopes of becoming CAT practitioners. A qualitative study into their reflective essays is being undertaken.

CAT Malta was established in 2022 with the 4 members who continued CAT training level 2. These members are in the process of becoming CAT practitioners and pioneering this new treatment into mental health services amongst the Maltese islands.

Conclusions: In conclusion the above proves that the implementation of CAT Training is feasible and acceptable. It will be introduced to Maltese psychiatric trainees in March 2023.

Disclosure of Interest: None Declared

EPP0503

Hidden face of pandemic – Case study of an art therapy process during the pandemic of the virus COVID-19

I. Barun*, D. Svetinović, S. Vuk Pisk, V. Grošić and I. Filipčić

University psychiatric hospital Sveti Ivan, Zagreb, Croatia

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.806

Introduction: Pandemic caused by the virus COVID-19 had a significant impact on mental health of the population, not only by increasing the levels of stress and anxiety, but by affecting the most vulnerable ones, aggravating the symptoms of mental illnesses in people suffering from one of the mental health conditions [1], including the people suffering from schizophrenia. Pandemic made the increased need of that particular patient population for various psychotherapeutic and sociotherapeutic interventions even more evident. Art therapy is a form of psychotherapy that in itself integrates expressive characteristics of art with explorative characteristic of psychotherapy using the visual language of arts as the main media of communication and expression. Art therapy has been used from its beginnings with people suffering from one of the psychotic disorders [2] and it is enlisted today in NICE guidelines as one of the psychological therapies of schizophrenia [3].

Objectives: To understand and to activate the potential of artistic expression in patients suffering from psychotic disorders during the pandemic of virus COVID-19.

Methods: During the period of lockdown in pandemic of virus COVID-19, a young male patient suffering from schizophrenia was admitted to the Acute ward of the University psychiatric hospital

Sveti Ivan in Zagreb. As the patient was keen on visually expressing himself, five individual psychodynamically oriented art therapy sessions were carried out on a weekly basis with professionally trained art therapist during the period of patient's hospitalization. The patient was offered various art materials allowing him to visually express himself in a free manner and the artistic artefact created during the process served as a catalyst for later therapeutic work.

Results: During the therapeutic process, single image was being gradually made and developed session by session. As new layers of color and form were added to the painting, each session revealed new layers of meaning and symbolism to both patient and therapist. First sessions pertained to the anxiety caused by the experience of pandemic, but as the process moved forward, deeper subject matters were brought to the surface, such as the nature of the therapeutic relationship, patient's *splitting*, hidden aggressive potentials and, in the end, the nature of father-son relationship connecting the image of coronavirus causing fear and discomfort with the image of the oppressive father.

Conclusions: Circumstances caused by the pandemic of virus COVID-19 aggravated the patient's symptoms and his internal conflicts. The art therapeutic process, with its possibility of projections and its multilayered interpretations, enabled the patient to express the true conflict and disturbing content hiding underneath the anxiety related to the pandemic of coronavirus which the patient was primarily complaining about.

Disclosure of Interest: None Declared

EPP0504

Change Process in Psychotherapy for Depressed Inpatient: A Case Within Trial Study

K. Tzartzas^{1*}, Y. de Roten² and G. Ambresin²

¹Département des Policliniques (DDP), Unisanté - Centre de médecine générale et de santé publique and ²University Institute of Psychotherapy, Department of Psychiatry, Lausanne University Hospital, Lausanne, Switzerland

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.807

Introduction: Results of a randomized controlled trial supported the efficacy of a manualized, Intensive and Brief Psychodynamic Psychotherapy (IBPP) for inpatients with severe depression, but the mechanisms by which the interaction between a psychotherapist and a patient can be involved in a process of change require more direct study.

Objectives: The study aimed to explore how the psychotherapist and the patient interacted to work through the themes of focalization of their therapeutic work and how their work was part of a potential process of change.

Methods: A pragmatic case study was conducted on two cases selected from the umbrella study with one responder and one nonresponder to treatment (response defined as > 46% decrease in depressive symptoms on the MADRS). For each case, the verbatims of 6 sessions were analyzed, focusing on the themes of the IBPP manual.

Results: Two main functions were revealed: 1) "**Becoming the subject of one's depression**", which includes the following themes:

i) "Following the Tracks of Pain and Loss"; ii) "Negotiating the Distance to the Cemetery"; iii) "Beginning to Accept"; iv) "Investing in New Projects"; and 2) "**Regaining a sense of support**" which includes the following themes: i) "Not Being Beaten Down"; ii) "Emptying a Full Closet"; iii) "Fear of Ending Up Alone". The supportive interactions (regaining a sense of support) were present in a similar way in both cases, whereas the specific interactions (becoming the subject of one's depression) were more present in the responder case.

Conclusions: In the psychotherapy of inpatients with severe depression, specific therapeutic interventions aiming to mobilize internal processes of symbolization, comprehension, and appropriation are necessary to reactivate a previously frozen mourning process. However, such interventions should be carried out in conjunction with interactions aiming to help the patient regain a sense of support. The central role of interactions that serve to build a therapeutic space and to restore epistemic trust was an unexpected result. It invites psychotherapists to pay particular attention to acknowledging a patient's melancholic suffering, and to continuously seek to adjust their interventions to foster the continuity of emotional contact and the emergence of a sense of support. Theoretical and clinical implications of these findings will be discussed.

Disclosure of Interest: None Declared

Schizophrenia and other psychotic disorders 04

EPP0505

New insights into cerebellar dysfunction in patients with delusional disorder: A systematic review

A. González-Rodríguez^{1*}, A. Guàrdia¹, A. Alvarez¹, M. Natividad¹, C. Pagés¹, C. Ghigliazza¹, E. Román¹, B. Sánchez¹ and J. A. Monreal²

¹Mental Health, Mutua Terrassa University Hospital. University of Barcelona (UB). CIBERSAM and ²Mental Health, Mutua Terrassa University Hospital. University of Barcelona (UB). CIBERSAM. Inst. Neurosc. UAB, Terrassa, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.808

Introduction: The cerebellum has been implicated in cognitive, affective and motor functions, including emotion regulation, executive control and sensorimotor processing. In schizophrenia, cerebellar dysfunction has been associated with treatment resistance and clinical features. However, few studies have been focused on delusional disorder (DD).

Objectives: Our main purpose was to review the evidence available on cerebellum abnormalities and dysfunctions in patients with DD.

Methods: A systematic review was conducted through PubMed, Scopus and ClinicalTrials.gov (inception-June 2022) according to the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) directives. The following search terms were used: cerebellum OR cerebellar AND ("delusional disorder" AND paranoia). Reference lists from included studies were hand-checked to find other potential relevant papers.