

**Objectives:** To study the state of mental health of internally displaced persons (IDPs) and to develop, on this basis, a system of therapy and prevention of mental disorders.

**Methods:** A combination of clinical-psychopathological and psychodiagnostics methods of studying were used to identify peculiarities of the mental state and various forms of mental pathology.

**Results:** 270 IDPs were examined. It was established that the group of IDPs is heterogeneous and includes 3 categories: 1 group of IDPs who do not have signs of mental disorders (conditionally healthy) (34.81%), 2 group of IDPs who have separate symptoms of mental disorders (risk group) (25.19 %) and the 3 group of IDPs with established mental disorders (40.00 %). The assessment of the general condition of the IDPs of the 1 group shows that they have various somato-neurological disorders and the absence of mental disorders. The assessment of the emotional state of the IDPs of the 2 group indicates the presence of various emotional disorders that include asthenic syndrome ( $41.18 \pm 5.97$  %), agripnic syndrome ( $45.59 \pm 6.04$  %), somato-vegetative syndrom ( $30.88 \pm 5.60$  %), anxiety-depressive syndrome ( $20.59 \pm 4.90$  %). That separate syndromes do not meet the criteria of ICD-10 and were subthreshold. The general features of mental disorders in group 3 IDPs are characterized by the predominance of disorders of the anxiety-depressive spectrum and includes adjustment disorders (F43.2) in 35,18%; post-traumatic stress disorder (F43.1) in 17.59%; a moderate depressive episode (F32.1) in 16, 67%; organic affective (depressive) disorder (F06.3) in 14.81%; organic anxiety disorder (F06.4) in 9.28%; recurrent depressive disorder (33.1) in 6.48%.

**Conclusions:** A system of treatment of mental disorders in IDPs has been developed, which includes pharmacotherapy (the usage of antidepressants, anxiolytics and, if necessary, antipsychotics), cognitive-behavioral and family psychotherapy. For prevention mental disorders among IDPs of groups 1 and 2, a psychoeducational program was created, aimed at forming awareness of clinical manifestations of mental disorders, opportunities to prevent their formation, and necessary actions in conditions of exacerbation of the mental state. Evaluation of the effectiveness of the developed system of therapy and psychoeducation has testified to their effectiveness.

**Disclosure of Interest:** None Declared

## EPP0166

### Polish psychiatrists' experiences consulting displaced patients from ukraine in 2022

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**Introduction:** The ongoing conflict in Ukraine has resulted in a significant influx of refugees seeking asylum in other countries, including Poland. Among these refugees are individuals who are struggling with mental health issues. Polish psychiatrists have stepped up to provide care for these patients, despite facing a number of challenges in the process.

**Objectives:** This presentation aims to shed light on the experiences of Polish psychiatrists treating refugees during the war in Ukraine,

highlighting the difficulties they have encountered and the strategies they have employed to provide the best possible care to their patients. The presentation also examines the impact of war on mental health, and the long-term effects on the well-being of refugees.

**Methods:** A questionnaire study was done among Polish Psychiatrists about the forms of support they provided for Ukrainian psychiatric patients they consulted after 24 February 2022. The responses to questionnaires were collected during psychiatric Congresses.

**Results:** The most commonly reported symptoms were anxiety (44.1%), followed by depression (35.3%), and panic attacks (23.5%). Other symptoms like irritability and sleep disorders were reported by 11.8% and 8.8% of the respondents, respectively. Disturbingly, thoughts of resignation and suicidal ideation were also reported, albeit at lower frequencies (8.8% and 2.9%, respectively). A small percentage (2.9%) reported no new symptoms.

The high prevalence of anxiety and depression suggests that the war has had a profound impact on the mental health of the affected population. The emergence of severe symptoms like psychotic thoughts and suicidal ideation, although less frequent, is alarming and calls for immediate intervention. It is also noteworthy that a small but significant portion of the population reported no new symptoms, which may indicate resilience or other coping mechanisms at play.

**Conclusions:** The war in Ukraine has led to a range of new psychological symptoms among the affected populations, with anxiety, depression, and panic attacks being the most prevalent. Immediate and long-term psychological interventions are urgently needed to address these emerging mental health issues. Further research is also required to understand the resilience factors among those who reported no new symptoms.

**Disclosure of Interest:** None Declared

## Personality and Personality Disorders

### EPP0167

#### Cognitive functioning of patients with borderline personality disorder

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**Introduction:** The neurocognitive deficit model as a characteristic of patients with borderline personality disorder (BPD) has been the focus of research for the past 20 years. However, no such studies have been performed in Russia.

**Objectives:** The aim of the present study was to investigate the neurocognitive profile of patients with BPD.

**Methods:** Fifty patients with BPD (according to DSM-V criteria) in stable mental state (72% women; mean age  $22.44 \pm 4.32$ ) were examined. BPD symptom severity was assessed using the Borderline Personality Disorder Questionnaire (PBQ-BPD), which was validated in the Russian population (34 points or more indicated a higher probability of BPD diagnosis). The Brief Assessment of Cognition in Schizophrenia (BACS) was used to assess cognitive function (in order to use these data for differential diagnosis with