S658 e-Poster Viewing

EPV0723

Explanation of the personality factor with the Enneagram in the selection of the specialty branch of the intern doctors

B. Özen, E. Ilgin*, E. Akça, A. Özercan, P. Seçgin and Ö. Yanartaş Psychiatry, Marmara University Research & Training Hospital, Istanbul, Türkiye

*Corresponding author. doi: 10.1192/j.eurpsy.2024.1365

Introduction: Personality characteristics have an important place in the choices of interns who are at the stage of deciding how their profession will be shaped in the future. While the Big 5 personality model has been widely used in evaluating the personality traits factor in career planning, the Enneagram has increased in popularity in recent years. In this study, it was aimed to investigate how senior medical students evaluate their professional future between these choices and the students' personality types.

Objectives: Forms and scales were presented to 221 interns who agreed to participate in our study and were studying in their final year in the 2022-2023 period at three different faculties, two state universities and one private university in the Marmara Region in Turkey. **Methods:** The sociodemographic data form, Enneagram Personality Types and Subtypes Inventory, and Positive Future Expectation Scale, prepared by the researchers and containing questions about the factors that may be effective in choosing medical specialization, obtained through a face-to-face pilot interview with ten students and literature review, were applied to the participants. Participants answered the forms and scales via 'Google forms'.

Results: 211 out of 221 participants, who did not constitute outliers, were included in the analysis. The mean age of the participants was 24.43 (S.E= 0.11)

In terms of Enneagram typologies, Type 2 (39.3%) exhibited the highest prevalence, followed by Type 1 (13.3%), Type 6 (11.8%), and Type 7 (8.5%).

Furthermore, a statistically significant relationship was found between specialization area and Enneagram types (Fisher exact <.001, p<.001). Post-hoc examinations highlighted specific associations, such as the relationship between Type 3 and Cardiovascular Surgery, Orthopedics and Traumatology; Type 4 and Pneumology, Psychiatry; Type 5 and PRC, Type 6 and Infectious Diseases, Neurology, Medical Microbiology; Type 7 and Cardiology; Type 8 and Pediatrics, Medical Biochemistry; and Type 9 and Family Medicine, Radiology, Psychiatry, Medical Pathology.

Conclusions: When the results are evaluated, the highest rate of type 2 and type 1 of the Enneagram typology in senior medical faculty students supports the fact that the medical profession consists of responsible and principled people who love helping others. It is compatible with the character traits of people with type 9 who avoid stress and conflict, preferring the department to have a low workload, and turning to family medicine, radiology, psychiatry and medical pathology departments, which are estimated to have relatively fewer working hours and emergency applications. Our study suggests that this scale be used more widely, as the Enneagram typology, which is used in many professional and career choices, shows results compatible with the participants' preferences in choosing a medical specialty.

Disclosure of Interest: None Declared

EPV0724

From schizotypy to psychosis: is it a natural continuum?

M. A. Andreo Vidal, M. B. Arribas Simón*, M. Calvo Valcárcel,

M. P. Pando Fernández, P. Martínez Gimeno,

M. D. L. Á. Guillén Soto, B. Rodríguez Rodríguez,

N. Navarro Barriga, M. Fernández Lozano, M. J. Mateos Sexmero,

C. De Andrés Lobo, M. D. C. Vallecillo Adame,

T. Jiménez Aparicio, Ó. Martín Santiago, A. Monllor Lazarraga,

M. Ríos Vaquero, L. Rojas Vázquez, L. Sobrino Conde,

A. Apario Parra and G. Lorenzo Chapatte

Psychiatry, Hospital Clínico Universitario de Valladolid, Valladolid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1366

Introduction: Schizotypal personality is a condition suffered by 4% of the population. It is defined by presenting interpersonal, behavioral and perceptual features similar to the clinical features of psychotic disorders, such as schizophrenia, in less intensity and dysfunctionality, but at risk of reaching psychosis.

Objectives: Presentation of a clinical case about a patient with premorbid schizotypal personality traits presenting with an acute psychotic episode.

Methods: Literature review on association between schizotypal personality and psychosis.

Results: A 57-year-old woman with a history of adaptive disorder due to work problems 13 years ago, currently without psychopharmacological treatment, goes to the emergency room brought by the emergency services due to behavioral alteration. She reports that "her husband and son wanted to sexually abuse her", so she had to run away from home and has been running through the streets of the town without clothes and barefoot.

Her husband relates attitude alterations and extravagant behaviors of years of evolution, such as going on diets of eating only bread for 40 days or talking about exoteric and religious subjects, as believing that the devil got inside her husband through a dental implant. He reports that these behaviors have been accentuated during the last month. She has also created a tarot website, and has even had discussions with several users. She is increasingly suspicious of him, has stopped talking to him and stays in his room all day long, with unmotivated laughter and soliloquies.

It was decided to admit him to Psychiatry and risperidone 4 mg was started. At the beginning, she was suspicious and reticent in the interview. As the days went by, communication improved, she showed a relaxed gesture and distanced herself from the delirious ideation, criticizing the episode.

Conclusions: In recent years, there has been increasing interest in understanding the association between schizotypy and serious mental disorder. Several theories understand schizotypy as a natural continuum of personality that reveals genetic vulnerability and that can lead to psychotic disorder when added to precipitating factors. Other theories define schizotypy as a "latent schizophrenia" where symptoms are contained and expressed in less intensity.

Around 20% evolves to paranoid schizophrenia or other serious mental disorders. It is complex to distinguish between those individuals in whom schizotypy is a prodrome and those in whom it is a stable personality trait. To date, studies applying early psychotherapeutic or pharmacological interventions have had