

therapeutic benefit of vortioxetine in cardiac remodeling associated with depression in patients with chronic heart failure, underscoring the need for further research and exploration.

Disclosure of Interest: None Declared

O0121

The psychosocial assessment of heart transplant candidates in Ireland

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doi: 10.1192/j.eurpsy.2024.239

Introduction: We aim to describe the psychosocial features, including Stanford Integrated Psychosocial Assessment for transplantation (SIPAT) scores of individuals undergoing assessment for heart transplantation in Ireland.

Objectives: All potential heart transplant candidates undergo assessment of psychosocial criteria to enhance selection and improve transplant outcomes. The Mater Hospital Consultation Liaison Psychiatry (CLP) department provides this national service in Ireland. All potential heart transplant candidates should receive a biopsychosocial assessment and screening via SIPAT tool as per international best practice. The SIPAT is a psychosocial evaluation and risk assessment tool which can help to determine suitability for organ transplant and identify modifiable risk factors to optimise a patient for transplant. Lower scores represent higher rates of suitability with a score < 21 representing an *acceptable* candidate and ≥ 21 *minimally acceptable*.

Methods: We retrospectively examined the clinical files of all individuals referred to the national centre for heart transplant assessment over a five-year study period between January 2014 and December 2019.

Results: One-hundred and fifty four individuals were referred for heart transplant assessment with 79% (n=122/154) listed for a heart transplant. The most common indication for heart transplant assessment was non-ischaemic cardiomyopathy (48%, n=74/154). Of those listed for transplant, 74% (n=90/122) went on to receive a heart transplant. Of those undergoing assessment for heart transplant, 92% (142/154) were assessed by CLP and 94% (144/154) received social work assessment.

SIPAT scores were available for 64/154 individuals with 22% (14/64) deemed *excellent* candidates for transplant, 59% (38/64) deemed *good* candidates, 14% (9/64) *minimally acceptable* candidate and 5% (3/64) deemed *high risk*. The SIPAT domain breakdown was as follows: patient readiness (mean 3.9, SD 3.4); social support system (mean 2.9, SD 4.2); psychological stability (mean 5.1, SD 4.9); and substance use (mean 3.8, SD 2.4), with an average total score of 16 (SD 12.4).

Post-transplant, 26% (23/90) were referred and seen by CLP, 53% (48/90) were referred to social work and 32% (29/90) required psychology services. Seventeen individuals (19%, 17/90) received

a psychiatric diagnosis and 27% (24/90) were prescribed psychotropic medication in the post-transplant period.

Conclusions: This study describes for the first time the psychosocial factors and SIPAT scores of a national cohort of individuals referred for heart transplant. Psychiatric morbidity is high and this has implication for transplant suitability and post-operative course. This highlights the need for services to proactively identify and treat psychosocial factors in potential transplant recipients.

Disclosure of Interest: None Declared

Cultural Psychiatry

O0122

Involve fathers in family dynamics and in early interactions with children, in the face of cultural factors

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doi: 10.1192/j.eurpsy.2024.240

Introduction: In the first years of life, parents and a secure family environment are essential to the survival and development of young children.

Attention is focused on the undeniable importance of mothers' role in childcare. But it's also important to involve fathers, who are often sidelined from the responsibilities of this role, not least because of cultural factors linked to the separation of roles. In some situations, this is compounded by the psychological suffering that men may feel, without being able to admit it or express it, as a result of representations linked to masculinity.

Objectives: The aim of the intervention was to strengthen the psychosocial and parenting skills of men, while taking into account their distress. The objective was to reduce intra-family violence, to involve men more in family life and in the care of young children, and to work on cultural representations of the role and cultural dynamics within the family and the community.

Methods: Men, fathers and future fathers were recruited in the Mweso region in the Democratic Republic of Congo, following community psychoeducation. The group protocol took the form of five weekly sessions covering various themes linked to psychological distress, emotion management, psychosocial skills as well as gender roles and child development.

Results: Between 2021 and 2023, 727 men participated in the program. They showed an improvement in well-being (reduction in anger, symptoms of anxiety, depression and PTSD), better management of emotions and the acquisition of strategies to address cultural factors linked to fatherhood within the family unit and the community.

Conclusions: The use of this protocol allowed men to become more aware of the issues of psychological suffering and fatherhood linked to cultural factors by allowing them better inclusion in the family dynamic.

Disclosure of Interest: None Declared