

they enjoyed the activity and felt more connected to their peers afterwards.

**Disclosure of Interest:** None Declared

## EPV1084

### Psychiatry training in Hungary, difficulties and advantages

I. A. Van Der Wijk

Sántha kálmán Member Hospital, SzSzBM County Hospital, Nagykálló, Hungary

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**Introduction:** While in theory our training program is quite satisfactory, in practise it often falls short. The first two years give a more general knowledge, including spending time at internal, ICU and neurological wards as well as attending a month-long course about communication, palliative care and basic legal principals important in healthcare. The second three years provide the opportunity to engage in profession-related rotations, like psychotherapy, psychiatric rehabilitation and addictology.

**Objectives:** The design in itself is clear, but the supervision for its enactment is insufficient. This leads to regional differences between the four faculties of our country, not everyone is able to partake in the supposedly mandatory rotations (mostly because of shortcomings in staff) and the organization of our theoretical education varies greatly in each region to the point of non-existence in one area, since the COVID-19 pandemic started. The personal supervision of each psychiatry trainee also leaves much to be desired both on professional and – in psychiatry very important – mental levels. Competence and responsibility limits are often vague, and, especially in country hospitals, too much is expected of the resident (i.e. doing a nightshift alone, without direct supervision).

**Methods:** It is a positive thing that in theory there are standards in place, the problem is that they are more viewed as guidelines, than demands to be met. Nevertheless, some of the faculties provide well-organized education (even subdivided per year of training) and/or take rotations outside of the ‘home ward’ seriously. The opportunity to gain a basic knowledge in psychotherapy is also beneficial and a good aspect of our training. Easily accessible or even obligatory participation in psychotherapy for ourselves during our training however, is lacking.

**Results:** The decreasing number of psychiatry trainees sadly is a worldwide trend and Hungary is no exception. This poses more difficulties, i.e. making it harder to let a resident go on ‘outside’ rotations, especially from wards already struggling with staff shortages. Because of the latter, there is also little time to teach the trainees appropriately and pay them the attention they need.

**Conclusions:** All in all, there is much potential in our training program and its standards, also leaving room for substantial improvement in realizing the practical aspects. The decline in numbers of psychiatry trainees is worrisome and calls for more general intervention on a European or even global level.

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## EPV1085

### Experiences and attitudes of UK early career psychiatrists towards electroconvulsive therapy

L. Alexander<sup>1,2\*</sup>, G. Bhatia<sup>1</sup> and M. Pinto da Costa<sup>1,2,3</sup>

<sup>1</sup>South London and the Maudsley NHS Foundation Trust; <sup>2</sup>Institute of Psychiatry, Psychology and Neuroscience, King’s College London, London, United Kingdom and <sup>3</sup>Institute of Biomedical Sciences Abel Salazar, University of Porto, Porto, Portugal

\*Corresponding author.

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**Introduction:** Electroconvulsive therapy (ECT) is effective in treating severe major depressive disorder, manic episodes, and catatonia. Despite this, it is a controversial treatment amongst patients, carers, and even some psychiatrists in the UK.

**Objectives:** To determine the experiences and perceptions of UK psychiatric trainees and early-career psychiatrists regarding the use of ECT in clinical practice.

**Methods:** An anonymous survey was distributed online to UK psychiatric trainees and early-career psychiatrists across the country. The questionnaire consisted of 36 multiple-choice and Likert scale questions.

**Results:** So far, 44 trainees and early-career psychiatrists have responded. The vast majority had witnessed ECT administration during training and had administered ECT under supervision. Most respondents agreed or strongly agreed that ECT was a safe and effective treatment, and most respondents disagreed or strongly disagreed that ECT is cruel or outdated. There were more varied views regarding perceptions of side effects and contraindications: a minority of respondents were unsure about whether ECT had long-term side effects, and whilst most respondents disagreed or strongly disagreed that ECT has many risks and contraindications, just under half were unsure or agreed.

**Conclusions:** Most UK psychiatric trainees and early-career psychiatrists have experience of ECT during training and believe ECT is a safe and effective treatment. Respondents had a mixed view regarding the side-effect profile and risks/contraindications of ECT, which may be an important area for further education and training.

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## EPV1086

### Psychiatry Trainees’ Perspectives on Psychotherapy Training in Residencies Worldwide

R. M. Salgado<sup>1,2\*</sup> and O. von Doellinger<sup>1</sup>

<sup>1</sup>Centro Hospitalar do Tâmega e Sousa, Penafiel and <sup>2</sup>Faculty of Medicine of the University of Porto, Porto, Portugal

\*Corresponding author.

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**Introduction:** Incorporating psychotherapy into the curricula of psychiatry residency programs has been proven difficult, even in countries where psychotherapy training is a requirement for psychiatry residents to become psychiatrists. There is a risk that future psychiatrists lacking psychotherapy skills will be restricted in managing the wide scope of disorders and personalities they will face in clinical practice. It is important to assess what psychiatry trainees