depressive symptoms, measured by the Patient Health Questionnaire (PHQ-9), as well as functional impairment measured by the WHO Disability Assessment Schedule-12 (WHODAS). We calculated the mean difference (MD) for the outcomes, with 95% confidence intervals (CIs). Statistical analysis was performed using Review Manager (RevMan) 8.1.1 with a fixed-effect model. Heterogeneity was assessed using the I^2 statistic.

Results: Three RCTs were included, encompassing 604 patients, of whom 263 (43.5%) participated in SbS. The population consisted of 35.1% males and 64.9% females. The mean age was 28.8 years, with a standard deviation of 8.7. SbS reduced PHQ-9 scores (MD = -3.48; 95% CI [-4.44, -2.52]; P < 0.00001; I^2 = 3%; Figure 1) and WHODAS scores (MD = -3.37; 95% CI [-4.84, -1.90]; P < 0.00001; I^2 = 0%; Figure 2) compared with ECAU.
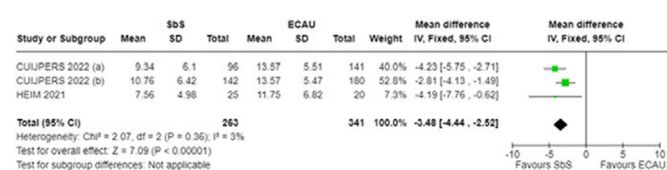
Image 1:

Figure 1 - Forest plot showing a significant reduction in depressive symptoms (PHQ-9 Scores) with SbS compared to ECAU (P < 0.00001)
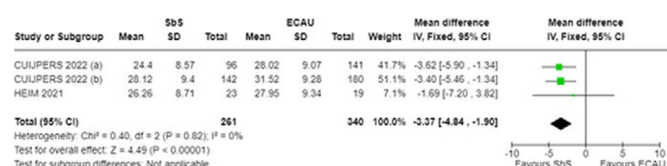
Image 2:

Figure 2 - Forest plot indicating a significant improvement in functional impairment (WHODAS Scores) with SbS compared to ECAU (P < 0.00001)

Conclusions: This meta-analysis of RCTs suggests that SbS has a positive effect in reducing depressive symptoms and functional impairment compared with ECAU.

Disclosure of Interest: None Declared

EPV0736

My Virtual Parent, Adult, and Child: Simulating Ego-States in Transactional Analysis with LLM

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Introduction: Recent advancements in large language models (LLMs) demonstrate their ability to perform verbal generalization and simulate agency, opening new possibilities for innovative applications in psychotherapy. One promising avenue is the integration of LLMs into Eric Berne's Transactional Analysis, a psychotherapeutic approach that conceptualizes human personality through three distinct ego-states: Parent, Adult, and Child.

Objectives: To investigate the potential of LLMs in Transactional Analysis.

Methods: LLM capabilities described in the literature were compared with demands derived from the theory.

Results: By examining the interactions among ego-states in Transactional Analysis, individuals can become aware of their behavior patterns and modify ineffective ones, fostering healthier relationships and improving social adaptation. Incorporating LLMs into Transactional Analysis offers a novel tool for psychotherapeutic interventions. Therapists could utilize AI to help clients recognize emotional experiences and identify maladaptive interaction patterns. By simulating the Parent, Adult, and Child ego-states, an LLM could engage in dialogues that reflect these internal states, allowing the client to explore and better understand their emotional reactions and needs. This interaction would enable clients to actively engage with different parts of their personality, promoting self-awareness and providing valuable insights into the causes of relational difficulties. While the potential benefits are clear, further research is needed to assess the practical effectiveness of integrating LLMs into Transactional Analysis. Empirical studies should investigate the degree to which LLMs can accurately simulate ego-states and contribute to positive therapeutic outcomes. Additionally, ethical considerations must be addressed to ensure that the application of AI in psychotherapy is both responsible and beneficial for clients.

Conclusions: The proposed approach fosters a deeper understanding of internal conflicts and provides a structured, controlled environment where clients can work through problematic situations.

Disclosure of Interest: None Declared

EPV0737

Developing an early support mHealth intervention for women and partners after perinatal loss: A secondary study of the e-Perinatal Project

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Introduction: Perinatal loss is a prevalent health concern worldwide, with one in four pregnancies ending in loss. Spontaneous perinatal loss (i.e., miscarriage, stillbirth, and neonatal death) is an excruciating experience that becomes part of parental identity and represents a unique form of grief. Online interventions offer a cost-effective and feasible option for reducing symptoms of depression, anxiety, and grief in cases of perinatal loss. Involving stakeholders during the early stages of content design and development results in interventions that are more relevant and effective.