

Introduction: 34-year-old patient with multiple sporadic and brief contacts with mental health services, which he unilaterally chooses to discontinue. He has a long history of parasuicidal behavior dating back to adolescence. The patient does not report any prior diagnoses and has no history of inpatient admissions. The patient describes experiencing social isolation, lacking contact with his family of origin, and having no significant peer relationships.

Objectives: The primary goal is to improve the patient's engagement with mental health services, particularly in a case experiencing chronic, unaddressed symptoms, by utilizing intensive and structured programs. An additional objective is to address the patient's self-identification with suicidal ideation.

Methods: The patient's first contact with mental health services in this region of Spain was through the emergency department following a suicidal episode. During this encounter, the clinician introduced an intensive program designed to address suicidal ideation through regular visits over a set period. The patient agreed to participate and was subsequently enrolled in the PRISURE program at HGUGM in Madrid, where he received multiple sessions each month (between 2 and 4) with both a psychiatrist and a nurse from March to June 2024.

Results: At the beginning of the program, the patient was fixated on the idea of suicide from a romantic/nihilistic perspective, displaying a pervasive rejection of interpersonal contact and a narcissistic element in interactions. He expressed persistent suicidal ideation. Over the course of frequent visits, the patient gradually began to connect with the chronic nature of his behaviors and started to identify additional symptoms. Despite partial engagement in the program, in this case with some missing consultations, his attendance at consultations improved significantly compared to his prior behaviors. An inpatient stay was initially offered and declined by the patient; however, after further consideration, he later presented to the emergency room and agreed to inpatient treatment. During the admission, a diagnostic assessment was carried out and discussed with the patient, revealing challenges in identity, object relations, and moral functioning, which were positioned within the spectrum of personality disorders, particularly highlighting narcissistic and antisocial traits.

Conclusions: Initially focused on his suicidal ideation, the patient, through the PRISURE program, gradually explored underlying difficulties contributing to his suicidal behavior. This process allowed him to accept further support, ultimately leading to an inpatient stay. Potential diagnoses were discussed openly with the patient, helping him to gain a clearer understanding of his lifelong challenges and enabling him to articulate these difficulties within the therapeutic context.

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Suicide Prevention Strategies in Europe: A Comparative Analysis of National Approaches

F. S. A. M. Swilem^{1*}, A. Brezina², A. Tarrada³, D. Ori^{4,4}, S. M. Hein⁵, A. Pouloutidou⁶, K. Silagadze⁷, M. Gebele⁸, O. Giannakopoulos⁹, M. Skrobo¹⁰, M. Jeurissen¹¹, I. Vandeputte¹², E. I. Guliyev¹³, G. F. Fucho-Rius¹⁴, C. Alla¹⁵ and I. Jora-Boerosu¹⁶

¹Child and Adolescent Psychiatry, Cambridge and Peterborough NHS foundation Trust, Peterborough, United Kingdom; ²Department of Neurology, Centre Hospitalier de Luxembourg, Luxembourg, Luxembourg; ³Department of Neurology, University Medical Center of Nancy, France, France; ⁴Institute of Behavioural Sciences, Semmelweis, Budapest, Hungary; ⁵Child and Adolescent Psychiatry, North East London NHS Foundation Trust, London, United Kingdom; ⁶Department of Psychiatry, Aristotle University of Thessaloniki, Greece, Greece; ⁷Department of Psychiatry, National family Medicine centre, Tbilisi, Georgia; ⁸Subacute Psychiatry Department, Gintermuiza Hospital, Latvia, Latvia; ⁹Department of Psychiatry, 251 HAF General Hospital, Athens, Greece; ¹⁰Department of Psychiatry, UHC Sestre Milosrdnice, Zagreb, Croatia; ¹¹Department of Addiction, LVR-Clinic, Duren, Germany; ¹²Department of Psychiatry, Onze Lieve Vrouw, Bruges, Belgium; ¹³Department of Psychiatry, Istanbul Faculty of Medicine, Istanbul, Türkiye; ¹⁴Department of Psychiatry and Legal Medicine, Institut d'Investigacio Parc Tauli (I3PT), Barcelona, Spain; ¹⁵Medeferent-P Clinic, Chisinau, Moldova, Republic of and ¹⁶The Mind Clinic, Bucharest, Romania

*Corresponding author.

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Introduction: Inspired by discussions at the EPA Summer School 2024 on suicide prevention, this poster explores local strategies implemented across European nations. Emphasizing the importance of tailored approaches, the study analyses successful initiatives and community-based programs, and investigates how country-specific factors influence suicide rates. Key findings from research papers on innovative methodologies were also examined, offering insights to inform future practices in suicide prevention.

Objectives: The poster aims to:

- Present local strategies for suicide prevention across European countries, focusing on the contributions of clinicians who attended the EPA Summer School.
- Highlight how knowledge of diverse strategies can impact clinical practice in mental health across Europe.

Methods:

- **Categorization:** European countries are grouped by suicide rates—high, medium, and low—using WHO and European CDC data.
- **Summarization:** Local prevention strategies and programs in each group are summarized.
- **Analysis:** Various socio-economic and cultural factors influencing suicide rates are discussed, including stigma, economic conditions, and access to healthcare.
- **Comparative Approach:** Strategies are compared to identify common successful elements and contextual challenges.

Results:

Conclusions: Local strategies tailored to national contexts are essential in suicide prevention efforts. Comparing diverse strategies reveals that approaches addressing cultural and economic factors hold the most promise for reducing suicide rates across Europe. This analysis underscores the need for continued cross-border collaboration and the exchange of best practices to create more effective, context-specific interventions.

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