

weeks ($F(1) = 24.25, p = .000^{***}$). Goal attainment showed substantial progress over time, with significant improvements in both groups ($F(1) = 5.03, p = .03^*$; $F(1) = 31.61, p = .000^*$), indicating that users were making meaningful strides toward their therapeutic goals.

Conclusions: This study underscores the usage pattern and clear preference for chat-based therapy, particularly among younger users. Chat-based emotional support therapy was found effective in reducing psychological distress, suggesting that online platforms, especially those offering chat-based therapy, are both accessible and clinically effective. Further research should focus on refining these services to maximize clinical outcomes, adapt to diverse user demographics, and ensure long-term engagement.

Disclosure of Interest: None Declared

EPV0764

Development of app-based neuropsychological tasks for screening people at mental health high risk

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Introduction: Depressive and anxiety disorders have a high prevalence and pose a significant socioeconomic burden. To reduce this, the importance of early intervention through the screening of high-risk groups has been highlighted by many researchers and clinicians. However, due to the heterogeneity of symptoms and comorbidity with other mental disorders, it is challenging to identify high-risk groups of depression and anxiety disorders early on. To address this issue, we developed App-based neuropsychological tasks for screening high-risk groups and classifying subtypes of depression and anxiety disorders through services in the metaverse.

Objectives: As a preliminary step, we have developed four app-based neuropsychological tasks for the early screening and subtype classification of individuals at high risk for depression and anxiety disorders, and examined the reliability and validity of the tasks.

Methods: Subjects were 30 adults with mean age of 32.93 (male=8, female=22). After obtaining written agreement to participate in the study, smartphones with the app-based neuropsychological tasks were provided to them, and then smartphone app tasks as well as digitized self-report scales related to depression and anxiety were performed. To analyze the reliability of the tasks, Cronbach's alpha was calculated. And correlation analyses were conducted between the scores of each task (ex; number of correct response, reaction time, number of skipping the task level) and the scores of the self-questionnaires to verify validity of the tasks. The overview of the tasks developed in this study is as follows: The catching raccoon task investigates the tendency to abandon performance in complex working memory task situations. The soccer task measures vitality and planning abilities. The risk-taking decision-making task examines the tendency to take risks. In the verbal memory task with mood induction, we investigate whether attention bias towards negative emotions, such as depression, affect the memory functions after inducing negative emotions through audiovisual stimuli.

Results: The range of Cronbach's alpha values for the task was between .71 and .92, showing that the tasks are reliable. Additionally, three out of the four tasks showed statistically significant correlations

with the scores of depression or anxiety measured by self-report rating scales, confirming the validity of the tasks.

Conclusions: Despite being conducted with a normal population, these results verified the reliability and validity of the tasks, suggesting the potential usefulness of the tasks for early intervention through the screening of high-risk groups with depression and anxiety disorders.

Disclosure of Interest: None Declared

EPV0766

A 12-week app-based multidomain intervention ameliorates cognitive performance in patients with mild cognitive impairment: preliminary results of the MEMODIO_APP@CARE RCT

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Introduction: The *Lancet Commission on dementia prevention, intervention and care* and the *WHO Guidelines on risk reduction of cognitive decline and dementia* provide evidence-based recommendations on lifestyle behaviours and interventions to delay or prevent cognitive decline and dementia. Due to demographic change and because new developments in pharmacotherapy are not suitable for all patients, there is a great need for non-pharmacological interventions. The MEMODIO app was developed to provide a multi-domain therapy for users with Mild Cognitive Impairment (MCI) and dementia. A screenshot of the app is shown in Image 1.

Objectives: The aim of this study was the exploratory evaluation of whether an app-based therapy can improve cognitive function in patients with MCI and mild dementia. For the interim analysis as of October 2024, the results of the MCI study arm are reported (n=42).

Methods: One hundred forty patients with confirmed diagnosis of MCI [Montreal Cognitive Assessment (MoCA) score 21-25] or Mild Dementia (MoCA score 14-20) were randomized to an intervention (IG) or standard of care (SoC) group. IG patients received SoC plus the MEMODIO app, providing cognitive and physical exercises, as well as psychoeducation on a brain-healthy diet and risk factors for cognitive decline, for 12 weeks. MoCA, Amsterdam Instrumental Activity of Daily Living Questionnaire - Short version (A-IADL-Q-SV) Dementia-Related Quality of Life (DEMQL) as well as Physical Activity Questionnaire (PAQ 50+) were collected at baseline and study end.

Results: In the MCI group, the mean age was 71 years, 20 out of 42 patients were female. Preliminary outcomes are shown in Images 2 and 3.

The preliminary analysis on MCI patients (mean age: 71 y \pm 9.49 SD, 48% were female) showed statistically significant improvements in MoCA in the IG (-0.84 ± 3.5 SoC vs. 1.96 ± 2.7 IG, $p=0.006$). Quality of life, physical activity and activities of daily living at the time point of the interim evaluation were not significantly different from baseline, but the activity level measured by PAQ showed a non-significant improvement in the SoC group.

Image:



Image 2:

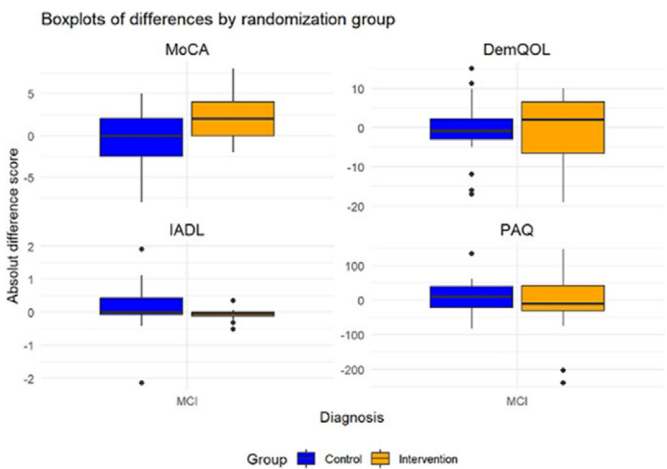


Image 3:

Outcome	Mean of differences t0 to t1 control group (SD)	Mean of differences t0 to t1 intervention group (SD)	p-Value
MCI (n=42)			
Cognitive function (MoCA)	-0.836 (3.46)	1.957 (2.74)	0.006
QoL (DEMQL)	-0.609 (7.72)	-0.565 (8.67)	0.986
Daily abilities (A-IADL-Q-SV)	0.092 (0.74)	-0.071 (0.18)	0.339
Activity level (PAQ 50+)	9.368 (48.7)	-8.757 (92.3)	0.453

Conclusions: In this RCT, a significant improvement in cognition was shown in MCI-patients using the MEMODIO app compared to those receiving SoC alone. Further analyses are ongoing.

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