

## Poster

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Session (Foyer 2)

**Poster 8**

[P-8-01]

Prevalence of Hypokalemia in Psychiatric Inpatients at Grhasia Mental Hospital Yogyakarta

\*Theresia Rini Krisniati<sup>1</sup>, Fathimah Az Zahra<sup>1</sup>, Naila Amalia<sup>1</sup>, Januarius Sefriyanto, Wikan Ardiningrum<sup>1</sup> (1. Grhasia Mental Hospital, Yogyakarta (Indonesia))

[P-8-02]

Examining the efficacy, feasibility and acceptability of MEmory Training for Recovery Adolescents (METRA) on Psychiatric Symptoms among Adolescents in Humanitarian Contexts

\*Laura Anne Jobson<sup>1</sup>, Sayed Jafar Ahmadi<sup>2</sup>, Azi Berzengi<sup>3</sup> (1. Monash University (Australia), 2. Bard College (United States of America), 3. University of East Anglia (UK))

[P-8-03]

Analysis of Patient Profile in the Psychiatric Emergency Department of a Public Specialized Hospital Over the Past Decade

\*JenChin Lee<sup>1,2</sup>, ChiaHsiang Chan<sup>3</sup> (1. Director, Emergent and Intensive Care Psychiatric Medicine, Taoyuan Psychiatric Center (Taiwan), 2. Attending Physician, General Psychiatric Department, Taoyuan Psychiatric Center (Taiwan), 3. Director, General Psychiatric Department, Taoyuan Psychiatric Center (Taiwan))

[P-8-04]

Restricting Access: Recent Legislative Trends in the US on Opposing Gender-Affirming Care for Transgender Youth

\*Victoria Evelyn Lindegaard<sup>1</sup>, \*Christopher Justin Gideon<sup>1</sup> (1. Michigan State University (United States of America))

[P-8-05]

How Zhongyong Thinking Influences Job Satisfaction among Psychiatric Healthcare Workers: The Mediating Role of Work Engagement

\*Bowen Xue<sup>1,2</sup>, Hong Luo<sup>1,2</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China), 2. Research Center for Mental Health and Humanities, Zhejiang University School of Medicine (China))

[P-8-06]

Training Tomorrow's Culturally-Informed Child Psychiatrists: The Univerisity of New Mexico Approach

\*Tomoko Hamma<sup>1</sup> (1. University of New Mexico School of Medicine, Department of Psychiatry and Behavioral Sciences, Division of Child and Adolescent Psychiatry (United States of America))

[P-8-07]

Quantifying Speech Slowing through Prosodic Analysis of Episodic Memory Recall in Alzheimer's Disease

\*Miju Kang<sup>1</sup>, Sungmin Kim<sup>1</sup>, Suji Jung<sup>2</sup>, Jiwon Chun<sup>2,3</sup>, Dajin Kim<sup>4</sup> (1. Department of Medical Sciences, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea), 2. Department of Medical Informatics, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea), 3. The Catholic Medical Center Institute for Basic

Medical Science, The Catholic Medical Center of The Catholic University of Korea, Republic of Korea (Korea), 4. Department of Psychiatry, Seoul St. Mary's Hospital, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea))

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### [P-8-01] Prevalence of Hypokalemia in Psychiatric Inpatients at Grhasia Mental Hospital Yogyakarta

\*Theresia Rini Krisniati<sup>1</sup>, Fathimah Az Zahra<sup>1</sup>, Naila Amalia<sup>1</sup>, Januarius Sefriyanto, Wikan Ardiningrum<sup>1</sup> (1. Grhasia Mental Hospital, Yogyakarta (Indonesia))

Keywords : antipsychotic, hypokalemia, schizophrenia

**Background:** Hypokalemia, defined as a plasma potassium level below 3.5 mEq/L, is often overlooked in psychiatric patients despite its clinical significance. **Methods:** This study examines the prevalence of hypokalemia in psychiatric inpatients at Grhasia Mental Hospital, Yogyakarta, from October to December 2023. A cross-sectional analysis of 365 patient records was conducted. **Results:** The majority (74.8%) were diagnosed with schizophrenia spectrum and other psychotic disorders. The overall prevalence of hypokalemia was 28.8%, with 4.9% of cases presenting with potassium levels below 3.0 mEq/L. Chi-square analysis showed no significant association between psychiatric diagnosis and hypokalemia ( $p=0.517$ ) or between prior psychiatric treatment and hypokalemia ( $p=0.144$ ). **Conclusion:** Given the high prevalence, routine electrolyte monitoring in psychiatric inpatients is essential to prevent complications. Further research is needed to explore the impact of antipsychotic medications on potassium regulation and to develop strategies for early detection and management of hypokalemia in psychiatric care.

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## [P-8-02] Examining the efficacy, feasibility and acceptability of MEmory Training for Recovery Adolescents (METRA) on Psychiatric Symptoms among Adolescents in Humanitarian Contexts

\*Laura Anne Jobson<sup>1</sup>, Sayed Jafar Ahmadi<sup>2</sup>, Azi Berzengi<sup>3</sup> (1. Monash University (Australia), 2. Bard College (United States of America), 3. University of East Anglia (UK))

Keywords : trauma、adolescence、humanitarian

Humanitarian crises disproportionately impact adolescents, heightening their risk of developing psychiatric conditions such as posttraumatic stress disorder (PTSD), depression, and anxiety. Despite this significant burden, access to evidence-based mental health care remains limited—largely due to high costs, inadequate services, and scarce resources—with treatment gaps reaching up to 85% in low- and middle-income countries.

In response, we developed and evaluated MEmory Training for Recovery–Adolescent (METRA)—a low-intensity, low-cost intervention designed to reduce psychiatric distress. METRA can be delivered in group settings by local community health practitioners in humanitarian settings.

In this presentation, we share findings from three studies assessing the efficacy, acceptability, and feasibility of METRA. Study 1 and Study 2 evaluated METRA among adolescent girls and boys in Kabul, Afghanistan, while Study 3 included adolescents in Kirkuk, Iraq. Across all three studies, adolescents who received METRA showed significant reductions in psychiatric symptoms. METRA was also found to be cost-effective and feasible to implement in humanitarian contexts.

We will also reflect on key lessons learned from delivering mental health interventions and conducting research in complex humanitarian environments.

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## [P-8-03] Analysis of Patient Profile in the Psychiatric Emergency Department of a Public Specialized Hospital Over the Past Decade

\*JenChin Lee<sup>1,2</sup>, ChiaHsiang Chan<sup>3</sup> (1. Director, Emergent and Intensive Care Psychiatric Medicine, Taoyuan Psychiatric Center (Taiwan), 2. Attending Physician, General Psychiatric Department, Taoyuan Psychiatric Center (Taiwan), 3. Director, General Psychiatric Department, Taoyuan Psychiatric Center (Taiwan))

Keywords : psychiatric emergency、 public psychiatric hospital、 psychiatric policy

**Background:** Psychiatric emergency departments (ED) play a crucial role in addressing acute mental health crises. This study aims to analyze the demographic and clinical characteristics of psychiatric patients presenting to a specialized ED in a public psychiatric hospital over the past eight years.

**Methods:** Retrospective data from 24,248 psychiatric ED visits between 2015 to 2022 were analyzed. Variables included gender, age, diagnosis, observation time, transfer rate to inpatient wards, and outcomes.

**Results:** The annual visitings increased by 37.11%, from 2,724 in 2015 to 3,735 in 2022. The male-to-female ratio shifted from 1.15:1 to 0.95:1, with more female patients since 2020. Average age declined from 43.26 to 40.16, indicating a younger trend, particularly among females. Schizophrenia remained the most common diagnosis but declined to 15% by late 2022. ED-to-inpatient transfer rates dropped from over 50% to 42.73%. Observation beyond 48 hours decreased to <1.5%, and average stay reduced from over 28 to under 9 hours.

**Conclusions:** The psychiatric ED has become increasingly utilized by a younger and more diverse patient population. Systematic reforms have led to more efficient care delivery. These findings underscore the need for further research to guide policy and enhance psychiatric emergency services.

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## [P-8-04] Restricting Access: Recent Legislative Trends in the US on Opposing Gender-Affirming Care for Transgender Youth

\*Victoria Evelyn Lindegaard<sup>1</sup>, \*Christopher Justin Gideon<sup>1</sup> (1. Michigan State University (United States of America))

Keywords : transgender youth、 access to care、 LGBTQ+、 United States of America、 diversity

Gender-affirming care (GAC) for transgender and gender diverse individuals encompasses medical and non-medical interventions. Medical components include hormone therapy, puberty blockers, and rarely, surgical intervention. Gender diverse youth experience significantly higher rates of depression, anxiety, and suicidality compared to their cisgender peers, with national surveys (The Trevor Project & Youth Risk Behavior Survey) consistently showing elevated risk for psychiatric pathology even prior to accounting for access to care.

Recent years have seen an exponential increase in the introduction of bills in state legislature to ban GAC for transgender youth. In 2018, two such bills were introduced; this rose to 185 by 2023. As of June 2025, 27 states had enacted laws limiting youth access to GAC, with 24 states imposing professional or legal penalties on clinicians providing GAC. On June 18, 2025, the US Supreme Court upheld Tennessee's ban on GAC for minors (*United States v. Skrametti*), ruling it did not violate the 14th Amendment's Equal Protection Clause. This decision has allowed 25 state bans on GAC to remain in effect. Approximately 40% of trans youth (ages 13-17 years) live in a state which has enacted laws limiting GAC access, representing a substantial population of at-risk youth who face legal and structural barriers to evidence-based care.

Major medical organizations have issued statements in support of GAC and opposing such bans, including the American Psychiatric Association, American Medical Association, World Professional Association for Transgender Health, and the Pediatric Endocrine Society. The consensus reflects that such legislative prohibitions contradict the prevailing evidence base and raises serious concerns regarding worsening psychiatric morbidity among gender diverse youth. We present a narrative review of recent American legislation affecting access to GAC for already at-risk youth, with a focus on its relevance to psychiatric practice and the ethical challenges physicians may face in evolving regulatory environments.

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## [P-8-05] How Zhongyong Thinking Influences Job Satisfaction among Psychiatric Healthcare Workers: The Mediating Role of Work Engagement

\*Bowen Xue<sup>1,2</sup>, Hong Luo<sup>1,2</sup> (1. Affiliated Mental Health Center & Hangzhou Seventh People's Hospital, Zhejiang University School of Medicine (China), 2. Research Center for Mental Health and Humanities, Zhejiang University School of Medicine (China))

Keywords : Zhongyong thinking、Healthcare workers、Work engagement、Job satisfaction

**Background:**

Zhongyong thinking, a culturally embedded cognitive style rooted in Confucian philosophy, emphasizes balance, harmony, and situational adaptability. While prior research has linked Zhongyong thinking to individual well-being, its role in shaping psychiatric healthcare workers' occupational experiences remains underexplored. This study aimed to investigate the relationship between Zhongyong thinking and job satisfaction among psychiatric healthcare workers and to examine the mediating role of work engagement.

**Methods:**

A cross-sectional survey was conducted via convenience sampling from August 2024-March 2025 in a tertiary psychiatric hospital in Hangzhou, Zhejiang Province, China. A total of 564 psychiatric healthcare workers completed a demographic questionnaire, the Zhongyong Thinking Style Scale, the Utrecht Work Engagement Scale, and a job satisfaction scale. The data were analyzed via multiple linear regression and structural equation modeling (AMOS).

**Results:**

Correlation analysis revealed that Zhongyong thinking was positively associated with both work engagement and job satisfaction. Work engagement was also positively correlated with job satisfaction. Hierarchical regression analysis revealed that Zhongyong thinking significantly predicted job satisfaction ( $\beta = 0.343$ ,  $p < 0.001$ ); this effect remained significant after work engagement was included ( $\beta = 0.300$ ,  $p < 0.001$ ), which also demonstrated an independent contribution ( $\beta = 0.139$ ,  $p = 0.001$ ). Structural equation modeling confirmed that work engagement partially mediated the relationship, with satisfactory model fit indices ( $\chi^2/df = 2.461$ , CFI = 0.993, TLI = 0.989, IFI = 0.993, NFI = 0.989, RMSEA = 0.051).

**Conclusion:**

This study highlights the critical role of Zhongyong thinking in promoting work engagement and job satisfaction among psychiatric healthcare workers. The findings underscore the influence of culturally embedded cognitive traits on occupational well-being and suggest that fostering Zhongyong thinking may serve as an effective strategy to enhance psychological fulfillment at work in mental health care settings.

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## [P-8-06] Training Tomorrow's Culturally-Informed Child Psychiatrists: The University of New Mexico Approach

\*Tomoko Hamma<sup>1</sup> (1. University of New Mexico School of Medicine, Department of Psychiatry and Behavioral Sciences, Division of Child and Adolescent Psychiatry (United States of America))

Keywords : culture and mental health、 child and adolescent psychiatry fellowship、 education

New Mexico (NM), located in the southwestern United States and bordering Mexico, is known for its cultural richness, diverse history, and striking landscapes. As one of the few minority-majority states, nearly half of its population identifies as Latino, followed by 37% White, 11% Native American, 2.8% African American, 2.0% Asian, and 0.2% Native Hawaiian or Pacific Islander (Census.gov). Additionally, 9% of residents are foreign-born, and 32% speak a language other than English at home—primarily Spanish and Navajo. NM is also one of the most rural states in the nation.

Despite its nickname, the "Land of Enchantment," New Mexico faces serious social and health challenges. It has one of the highest child poverty rates in the U.S., particularly among Native American communities. The state consistently ranks at or near the bottom in education, experiences high rates of substance use and alcohol-related deaths and leads the nation in violent and property crime. Recent increases in migration, coupled with current political tensions, have raised concerns about border safety, migrant deaths, family separation, and human rights in detention centers.

These complex issues contribute to widespread mental health challenges in NM, including elevated rates of mental illness, suicide (a leading cause of death among teens), and drug overdose deaths—all intensified by a shortage of mental health care providers. Childhood adversity, historical trauma, and poverty are significant contributing factors.

Given this context, New Mexico offers a unique and impactful setting for psychiatric training. The Child and Adolescent Psychiatry Fellowship at the University of New Mexico School of Medicine provides diverse clinical experiences that deepen trainees' understanding of cultural psychiatry. This poster highlights our transdisciplinary educational approach and the experiences of our fellows.

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## [P-8-07] Quantifying Speech Slowing through Prosodic Analysis of Episodic Memory Recall in Alzheimer's Disease

\*Miju Kang<sup>1</sup>, Sungmin Kim<sup>1</sup>, Suji Jung<sup>2</sup>, Jiwon Chun<sup>2,3</sup>, Dajin Kim<sup>4</sup> (1. Department of Medical Sciences, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea), 2. Department of Medical Informatics, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea), 3. The Catholic Medical Center Institute for Basic Medical Science, The Catholic Medical Center of The Catholic University of Korea, Republic of Korea (Korea), 4. Department of Psychiatry, Seoul St. Mary's Hospital, The Catholic University of Korea College of Medicine, Seoul, Republic of Korea (Korea))

Keywords : Alzheimer's disease, Episodic memory recall, Prosodic features, Spontaneous storytelling

**Background:** While previous dementia detection studies primarily used picture description tasks, these structured tasks differ significantly from spontaneous speech patterns, potentially limiting their applicability to real-world conversational settings. This study analyzed prosodic features from a Korean speech dataset (AI-Hub) comprising multiple tasks, focusing on spontaneous storytelling from healthy controls (HC) and Alzheimer's disease (AD) patients with validated clinical scores.

**Methods:** From a comprehensive dataset of 1,002 participants, HC (n=30) and AD (n=29) were randomly selected for this exploratory study. Audio files were transcribed using OpenAI-Whisper model to obtain speech-to-text conversion and timestamps. Speech data were collected using a custom-developed application across 11 hospitals, with clinical information validated by primary clinicians and specialist physicians. We analyzed the "storytelling" task, where participants recalled yesterday's events for one minute, as it most closely resembles spontaneous speech. Prosodic features extracted included speech rate, phonation percentage, articulation rate, and syllable duration. Descriptive statistics were computed to assess speech dysfunction patterns between groups.

**Results:** Cognitive assessments confirmed group differences: MMSE scores (HC:  $28.2 \pm 2.1$  vs AD:  $21.2 \pm 4.0$ ) and CDR scores (HC:  $0.05 \pm 0.15$  vs AD:  $0.8 \pm 0.5$ ). AD patients showed significant impairments across all prosodic measures. Speech rate decreased by 27% (HC:  $2.75 \pm 0.80$  vs AD:  $2.01 \pm 0.98$  syllables/sec), articulation rate declined by 21% (HC:  $2.95 \pm 0.77$  vs AD:  $2.33 \pm 0.95$  syllables/sec), and phonation percentage was reduced (HC:  $92.6 \pm 6.4\%$  vs AD:  $85.8 \pm 16.7\%$ ) with increased variability. Syllable duration was prolonged by 44% in AD (HC:  $362.5 \pm 97.4$ ms vs AD:  $522.9 \pm 275.5$ ms). Language production was significantly diminished, with syllable count and word count reduced by 30% and 26%, respectively.

**Conclusion:** Prosodic analysis demonstrates significant speech deficits in AD patients, suggesting that speech features represent promising objective biomarkers for dementia diagnosis and monitoring in naturalistic settings.