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Poster 23

[P-23-011

Co-Designing a Pharmacist-Led Wellness and Wellbeing Service for Long-Term Condition Patients with Subthreshold Depression and Anxiety

*Patrick Cabasag¹, Frederick Sundram², Amy Hai Yan Chan¹, Kebede Beyene³, Holly Wilson¹, Jeff Harrison¹ (1. School of Pharmacy, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 2. Department of Psychological Medicine, Faculty of Medical and Health Sciences, The University of Auckland, Auckland (New Zealand), 3. Department of Pharmaceutical and Administrative Sciences, University of Health Sciences and Pharmacy in St Louis, St Louis, MO (United States of America))

[P-23-02]

Diagnostic Distribution of Antidepressant Users: Findings from the REAP-AD3 Study

*Huang-Li Lin¹, Yueh-Pin Lin², Tian-Mei Si³, Roy Abraham Kalliyalil⁴, Andi J Tanra⁵, Amir Hossein Jalali Nadoushan⁶, Toshiya Inada⁷, Seon-Cheol Park^{8,9}, Kok Yoon Chee¹⁰, Afzal Javed¹¹, Kang Sim¹², Kuan-Lun Huang¹³, Pornjira Pariwatcharakul¹⁴, Norman Sartorius¹⁵, Mian-Yoon Chong¹⁶, Naotaka Shinfuku¹⁷, Takahiro A. Kato¹⁸, *Shih-Ku Lin^{1,2} (1. Department of Psychiatry, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan (Taiwan), 2. Taipei City Hospital and Psychiatric Center, Taipei, Taiwan (Taiwan), 3. Institute of Mental Health, Peking University, Beijing, China (China), 4. Pushpagiri Institute of Medical Sciences and Research Centre, Thiruvalla, Kerala, India (India), 5. Department of Psychiatry, Faculty of Medicine, Hasanuddin University, Makassar 90245, Indonesia (Indonesia), 6. Psychiatry Department, Mental Health Research Center, Iran University of Medical Sciences, Tehran, Iran (Iran), 7. Department of Psychiatry, Nagoya University Graduate School of Medicine, Aichi, Nagoya, Japan (Japan), 8. Department of Psychiatry, Hanyang University College of Medicine, Seoul, Republic of Korea (Korea), 9. Department of Psychiatry, Hanyang University Guri Hospital, Guri, Republic of Korea (Korea), 10. Department of Psychiatry & Mental Health, Tunku Abdul Rahman Institute of Neurosciences, Kuala Lumpur Hospital, Kuala Lumpur, Malaysia (Malaysia), 11. Pakistan Psychiatric Research Centre, Fountain House, Lahore, Pakistan (Pakistan), 12. Institute of Mental Health, Buangkok Green Medical Park, Singapore (Singapore), 13. Tsaotun Psychiatric Center, Ministry of Health and Welfare, Nantou, Taiwan (Taiwan), 14. Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand (Thailand), 15. Association for the Improvement of Mental Health Programs, Geneva, Switzerland (Switzerland), 16. Regency Specialist Hospital, Johor, Malaysia (Malaysia), 17. School of Human Sciences, Seinan Gakuin University, Fukuoka, Japan (Japan), 18. Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan (Japan))

[P-23-03]

Identification and Association of Sociodemographic Profile and Clinical Characteristics of Overseas Filipino Workers (OFW) referred by the Overseas Workers Welfare Administration (OWWA) in the Outpatient Section of National Center for Mental Health from January 2020 to December 2022

*Francisco IV Gabriel Bolinao¹, Robert Roy Mapa¹ (1. National Center for Mental Health (Philippines))

[P-23-04]

Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines

*Ryan Lazatin¹ (1. National Center for Mental Health (Philippines))

[P-23-05]

Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines "Grant Contest2"

*Ryan Lazatin¹ (1. National Center for Mental Health (Philippines))

[P-23-06]

Negotiating Normalcy and Patienthood: A Dialectical View of Mental Illness Narratives among Indian Women with Psychiatric Diagnoses

*Annie Baxi Baxi¹ (1. Ashoka University (India))

■ Sat. Sep 27, 2025 10:00 AM - 11:00 AM JST | Sat. Sep 27, 2025 1:00 AM - 2:00 AM UTC **■** Poster Session (Foyer 2)

Poster 23

[P-23-01] Co-Designing a Pharmacist-Led Wellness and Wellbeing Service for Long-Term Condition Patients with Subthreshold Depression and Anxiety

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Keywords: depression、anxiety、chronic disease、community pharmacy services、primary care

Subthreshold depression and anxiety are prevalent conditions that cause distress and significantly impact the quality of life of individuals. If left untreated, up to 35% of individuals may develop clinically diagnosed mental health conditions. Subthreshold conditions are often linked with long-term conditions (LTCs). Community pharmacists, who already have an established rapport and regular contact with LTC patients, are in a unique position to address these conditions.

The aim of this research is to design a pharmacist-led service for LTC patients experiencing subthreshold depression and anxiety.

A co-design approach was taken to service design, involving community pharmacists, key stakeholders – including policymakers and health professionals – and consumers. The barriers and facilitators to implementation were identified through qualitative interviews and mapped using the Consolidated Framework for Implementation Research (CFIR) domains. The service was iteratively refined through feedback from the advisory group and interview participants.

The service model uses the Patient Health Questionnaire - 9 (PHQ-9) and Generalised Anxiety Disorder 7-item scale (GAD-7) to screen participants for subthreshold depression and anxiety. Depending on how participants screen in these questionnaires, participants will be managed appropriately. The main intervention component is Focused Acceptance and Commitment Therapy (FACT), with self-help cognitive behavioural therapy (CBT) resources and referral as the other management options.

There is potential for community pharmacies to play a key role in addressing subthreshold depression and anxiety in LTC patients. Future research would need to investigate the feasibility of the proposed service. If shown to be feasible, subsequent studies should evaluate the effectiveness and cost-effectiveness of the service.

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Poster 23

[P-23-02] Diagnostic Distribution of Antidepressant Users: Findings from the REAP-AD3 Study

*Huang-Li Lin¹, Yueh-Pin Lin², Tian-Mei Si³, Roy Abraham Kalliyalil⁴, Andi J Tanra⁵, Amir Hossein Jalali Nadoushan⁶, Toshiya Inada⁷, Seon-Cheol Park^{8,9}, Kok Yoon Chee¹⁰, Afzal Javed¹¹, Kang Sim¹², Kuan-Lun Huang¹³, Pornjira Pariwatcharakul¹⁴, Norman Sartorius¹⁵, Mian-Yoon Chong¹⁶, Naotaka Shinfuku¹⁷, Takahiro A. Kato¹⁸, *Shih-Ku Lin^{1,2} (1. Department of Psychiatry, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan (Taiwan), 2. Taipei City Hospital and Psychiatric Center, Taipei, Taiwan (Taiwan), 3. Institute of Mental Health, Peking University, Beijing, China (China), 4. Pushpagiri Institute of Medical Sciences and Research Centre, Thiruvalla, Kerala, India (India), 5. Department of Psychiatry, Faculty of Medicine, Hasanuddin University, Makassar 90245, Indonesia (Indonesia), 6. Psychiatry Department, Mental Health Research Center, Iran University of Medical Sciences, Tehran, Iran (Iran), 7. Department of Psychiatry, Nagoya University Graduate School of Medicine, Aichi, Nagoya, Japan (Japan), 8. Department of Psychiatry, Hanyang University College of Medicine, Seoul, Republic of Korea (Korea), 9. Department of Psychiatry, Hanyang University Guri Hospital, Guri, Republic of Korea (Korea), 10. Department of Psychiatry & Mental Health, Tunku Abdul Rahman Institute of Neurosciences, Kuala Lumpur Hospital, Kuala Lumpur, Malaysia (Malaysia), 11. Pakistan Psychiatric Research Centre, Fountain House, Lahore, Pakistan (Pakistan), 12. Institute of Mental Health, Buangkok Green Medical Park, Singapore (Singapore), 13. Tsaotun Psychiatric Center, Ministry of Health and Welfare, Nantou, Taiwan (Taiwan), 14. Faculty of Medicine Siriraj Hospital, Mahidol University, Bangkok, Thailand (Thailand), 15. Association for the Improvement of Mental Health Programs, Geneva, Switzerland (Switzerland), 16. Regency Specialist Hospital, Johor, Malaysia (Malaysia), 17. School of Human Sciences, Seinan Gakuin University, Fukuoka, Japan (Japan), 18. Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University, Fukuoka, Japan (Japan))

Keywords: Antidepressants use、diagnostic distribution、training background

Background: Antidepressants are a category of psychotropic medications primarily indicated for major depression and anxiety-related disorders. In this study, we report the diagnostic distribution of patients receiving antidepressant treatment from the third survey of "The Research on East Asia Psychotropic Prescription Patterns for Antidepressants (REAP-AD).

Method: A cross-sectional survey of antidepressant prescription patterns was conducted from 2022 to 2023 in 11 countries in Asia, including China, India, Indonesia, Iran, Japan, Korea, Malaysia, Pakistan, Singapore, Taiwan, and Thailand. Demographics, clinical questionnaires, and prescribing medication information were collected through a unified data form using a web-based key-in system with a convenience sampling method. **Results:** A total of 4,587 patients were enrolled. The most common diagnosis was Major Depression (F32, F33, 57.7%), followed by Anxiety-Related Disorders (F40, F41, 12.1%), Schizophrenia (F20, 5.5%), Bipolar Disorder (F31, 5.1%), Dysthymic Disorder (F34, 4.1%), Substance Use Disorder (F1x, 2.5%), Obsessive-Compulsive Disorder (F42, 2.4%), ©PRCP&WACP Joint congress 2025 Tokyo

Adjustment Disorders (F43, 2.2%), Organic Mental Disorder (F0x, 2.2%), Schizoaffective Disorder (F25, 1.3%), and Others (5.0%). The individual diagnostic rates varied significantly among countries. Selective Serotonin Reuptake Inhibitors are the most commonly used antidepressants overall.

Conclusion: Antidepressants are widely utilized for symptomatic treatment beyond major depression and anxiety-related disorders. The variation in diagnostic distribution may be attributed to several factors: the diverse training backgrounds of psychiatrists, the availability and cost of medications, patient characteristics, and the local healthcare reimbursement systems in each country. Future research should explore the clinical outcomes of such diverse usage to better inform healthcare practices and policies.

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Poster 23

[P-23-03] Identification and Association of Sociodemographic Profile and Clinical Characteristics of Overseas Filipino Workers (OFW) referred by the Overseas Workers Welfare Administration (OWWA) in the Outpatient Section of National Center for Mental Health from January 2020 to December 2022

*Francisco IV Gabriel Bolinao¹, Robert Roy Mapa¹ (1. National Center for Mental Health (Philippines))

Keywords: OFWs、OWWA、Sociodemographic profile、Clinical characteristics、Mental health

Introduction: The mental health of Overseas Filipino Workers (OFWs), one of the highest recipient of migrant worker remittances in the world, represents a critical area of concern, warranting in-depth investigation due to the unique stressors and challenges inherent in their work and living conditions abroad.

Objective: This study aims to identify risk factors and determinants for mental disorders among OFWs, given their significant contribution to the Philippine economy and their vulnerability to mental health issues.

Methods: A retrospective, descriptive, quantitative study was conducted to identify and measure an association of the sociodemographic profile and clinical characteristics of 70 OFWs referred by the OWWA to the adult outpatient section of the National Center Mental Health (NCMH) from January 2020 to December 2022 using the Chi Square Test (p < 0.005).

Results: Majority of the OFWs referred to the center belong to the working age group, females, Roman Catholics, from the National Capital Region, reached secondary education, and worked as domestic helpers in Middle Eastern countries. Most had a diagnosis belonging to schizophrenia spectrum disorders and bipolar affective disorders. The findings revealed that civil status of OFWs exhibited an association to medical illnesses, while those from certain countries faced greater risks for both physical and mental health concerns, likely due to varying labor conditions and occupational hazards. Additionally, the strong association between religion and psychiatric diagnoses suggests that cultural and spiritual factors influence the perception and expression of mental health conditions, potentially impacting help-seeking behaviors.

Conclusion: The predominance of severe psychiatric illnesses, such as schizophrenia spectrum disorders and bipolar affective disorder with psychotic symptoms, underscores the urgent need for targeted mental health interventions for repatriated OFWs. Programs, policies and monitoring systems for repatriated OFWs should be strengthened and focused on the specific sociodemographic profile and clinical characteristics identified.

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Poster 23

[P-23-04] Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines

*Ryan Lazatin¹ (1. National Center for Mental Health (Philippines))
Keywords: Movement disorders、extrapyramidal symptoms、psychiatry、neuropsychiatry、psychotropic side effects

OBJECTIVES: To describe the most common movement disorders seen among service users, along with their demographic characteristics, at the Neurology Out-Patient Section of the National Center for Mental Health: METHODOLOGY: A retrospective descriptive chart review was conducted on service users with movement disorder diagnoses seen from September 2019 to September 2023. Data on sociodemographic attributes, clinical presentations, comorbidities, medications, and diagnoses were extracted using a standardized collection form. Descriptive statistics including frequencies, percentages, means, and standard deviations were computed using Stata 17 BE; RESULTS: A total of 112 service users were included. The mean age was 43.9 years (SD = 19.64); the majority were male (61.1%) and unemployed (81.25%). Tremor (49.11%) was the most common initial clinical impression, while Parkinson's disease (36.61%) was the most frequent neurologic diagnosis. Psychiatric comorbidities were present in 57.14% of cases, most commonly schizophrenia (21.43%) and bipolar affective disorder (14.29%). Secondgeneration antipsychotics were prescribed in 42.86% of service users, with corresponding diagnoses of drug-induced tremors, parkinsonism, and dystonia; and CONCLUSION: This baselining study provides initial evidence on the burden and characteristics of movement disorders in a national mental health setting. The findings emphasize the need for integrated neuropsychiatric care and highlight the influence of psychiatric medications on movement disorders. Future studies should explore associations using analytical methods and extend data collection across multiple centers.

■ Sat. Sep 27, 2025 10:00 AM - 11:00 AM JST | Sat. Sep 27, 2025 1:00 AM - 2:00 AM UTC **■** Poster Session (Foyer 2)

Poster 23

[P-23-05] Descriptive Study of Service Users with Movement Disorder Seen at the Neurology Out-Patient Section of the National Center for Mental Health, Philippines "Grant Contest2"

*Ryan Lazatin¹ (1. National Center for Mental Health (Philippines))
Keywords: Movement disorders, extrapyramidal symptoms, psychiatry, neuropsychiatry, psychotropic side effects

OBJECTIVES: To describe the most common movement disorders seen among service users, along with their demographic characteristics, at the Neurology Out-Patient Section of the National Center for Mental Health: METHODOLOGY: A retrospective descriptive chart review was conducted on service users with movement disorder diagnoses seen from September 2019 to September 2023. Data on sociodemographic attributes, clinical presentations, comorbidities, medications, and diagnoses were extracted using a standardized collection form. Descriptive statistics including frequencies, percentages, means, and standard deviations were computed using Stata 17 BE; RESULTS: A total of 112 service users were included. The mean age was 43.9 years (SD = 19.64); the majority were male (61.1%) and unemployed (81.25%). Tremor (49.11%) was the most common initial clinical impression, while Parkinson's disease (36.61%) was the most frequent neurologic diagnosis. Psychiatric comorbidities were present in 57.14% of cases, most commonly schizophrenia (21.43%) and bipolar affective disorder (14.29%). Secondgeneration antipsychotics were prescribed in 42.86% of service users, with corresponding diagnoses of drug-induced tremors, parkinsonism, and dystonia; and CONCLUSION: This baselining study provides initial evidence on the burden and characteristics of movement disorders in a national mental health setting. The findings emphasize the need for integrated neuropsychiatric care and highlight the influence of psychiatric medications on movement disorders. Future studies should explore associations using analytical methods and extend data collection across multiple centers.

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Poster 23

[P-23-06] Negotiating Normalcy and Patienthood: A Dialectical View of Mental Illness Narratives among Indian Women with Psychiatric Diagnoses

*Annie Baxi Baxi¹ (1. Ashoka University (India))

Keywords: Psychiatric Narratives, Women and Health, Relational Distress

This paper explores how discourses of normalcy and patienthood shape illness narratives of Indian women psychiatric patients. Drawing on in-depth interviews and focus group discussions with ten women receiving inpatient psychiatric care in New Delhi, a discursive thematic analysis was conducted to understand how meanings of illness are constructed and embodied. A key finding is the dialectical movement in their narratives between the role of a "patient" and that of a "normal," relationally functional woman, illuminating the tensions between biomedical framings of illness and lived cultural realities.. Rather than treating constructs like self-sacrifice, domesticity, caregiving or emotionality as predisposing factors to illness, the paper examines how these notions are integral to participant's sense of their distress, maintain relational identities, and reassert a sense of moral worth. The analysis highlights the dialectical tension between illness and normalcy, where the desire to return to socially valued roles coexists with an embodied experience of incapacity. This study contributes to the growing literature on cultural idioms of distress and offers critical implications for feminist, community-based, and culturally competent mental health care.