

EV0880

Relationship between the risk of relapse and via of administration of treatment antipsychotic

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Introduction The income hospital represents a rupture in the continuity of life of the patient. It would be advisable to determine those variables that help to reduce them. Some studies are running to a paper protector of the treatment injection in the relapses and number of hospitalizations.

Objectives Compare the risk of decompensation, measured in terms of income hospital or consultations to emergency, between patients to treatment injection versus oral.

Aims/methods He is a descriptive study which assesses the number of hospital admissions and consultations to emergency departments in the period of one year (between September 2015 and September 2016) of a sample of 28 patients registered as TMS and the results are compared with the type used for antipsicótico treatment via.

Results We start from a sample of 28 patients, of which 17 are still a treatment intramuscular and 11 have all your guideline prescribed in oral. Patients injection treatment group needed to be admitted to a psychiatric inpatient unit at least on one occasion in the past year, 7 patients and 11 patients to oral treatment, only 2 patients were admitted and other 2 came once to your referral hospital emergency department.

Conclusions Of the 17 patients to treatment with injectable ingestion or needed care urgently a 41.18%, facing the 36.36% of those patients to treatment by via oral. These results do not have a protective role of injectable treatment compared with decompensation measures according to need hospitalization or urgent attention.

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Academic burnout and personality traits in Korean medical students

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Objectives Personality was shown to play an important role for well being under academic stress. The purpose of the present study was to evaluate how temperament and character traits predict academic burnout in Korean medical students.

Methods One hundred and seventy-eight Korean medical students completed the Cloninger's temperament and character inventory (TCI) at the beginning of semester and Maslach burnout inventory-student survey (MBI-SS) was also measured around the final exam when academic stress and burnout is at the highest. The correlation between TCI and MBI-SS was examined and stepwise regression analysis was performed to measure how well personality traits predict academic burnout level.

Results The MBI-SS total burnout score was correlated positively with harm-avoidance ($r = 0.247, P < 0.05$) and negatively with self-

directedness ($r = -0.296, P < 0.001$) and Cooperativeness ($r = -0.169, P < 0.05$) scores. The regression analysis showed that the harm-avoidance ($\beta = 0.269, P < 0.001$) accounted for exhaustion score and the self-directedness explained the Total burnout score ($\beta = -0.296, P < 0.001$) and Inefficacy score ($\beta = -0.284, P < 0.001$). The Cynicism score was accounted for high Novelty-Seeking ($\beta = 0.150, P < 0.05$) and low Cooperativeness ($\beta = -0.182, P < 0.05$).

Conclusion This study showed that the Cloninger's temperament and character might explain the burnout level from the stressful medical education. The temperament of novelty-seeking and harm-avoidance could provide the susceptibility to the academic burnout and the character of self-directedness and cooperativeness might determine the resilience to the negative influence of academic stress.

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Community behavioral health care linkages for youth

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Introduction and objective behavioral health (BH) agencies have care linkages for youth including juvenile justice (JJ). However, there are few studies on youth care linkages. This study focuses on six sites with the objective of examining BH and JJ staff perceptions about information exchange on screening, assessment and treatment.

Methods We developed an index to quantify BH and JJ staff perceptions of information exchange on youth screening, assessment and treatment. After Informed Consent, staff rated past year interactions from agree to disagree on a 7-point Likert scale. Chi-squares and T-tests were used.

Results All 64 staff consented 17 (26.5%) BH staff and 47 (73.5%) JJ staff. Significant differences included BH staff were more likely to be licensed ($P < .001$) and had a masters degree or higher ($P = < .01$). Professional experience ranged from 9.8 to 15.8 years. However, there were no statistically significant differences. BH staff was somewhat higher from 5.7 for "shared assessment results" to 6.8 for "been easy to talk to" while JJ staff were from 5.1 for "shared screening results" to 6.1 for "treated youth with respect".

Conclusions This pilot study found high rates of staffs agreement including ease of talking and listening, sharing screenings and assessments information, and helping begin, continue, and complete treatment. This high agreement was not expected with confidentiality restrictions and traditions. Future studies should target care linkages including letters of agreement, case conferences, and guidelines.

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The reality of domestic violence in the US

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According to the United States department of justice, domestic violence is defined as “a pattern of abusive behaviours in any relationship that are used by one partner to gain or maintain power and control over another intimate partner”. It involves a pattern of coercive behaviour in intimate relationships whereby the behaviour is controlled through humiliation, intimidation, fear, and often intentional physical, emotional or sexual injury. Domestic violence crosses all ethnic, socioeconomic and age groups, and is also prevalent in same sex relationships.

Over six million children are severely assaulted by family members every year in the United States; a man beats a woman every twelve seconds; women who leave their batterer are at 75% greater risk of being killed by their batterer than those who stay; and one third of police time is spending on answering domestic violence calls.

In domestic violence situations the intervention is frequently in crisis, where the victims “fight” for survival, and it is necessary to give proper answers according to the victim’s needs. The professionals that work directly with domestic violence assume that there is a strong bond connecting the domestic violence with mental health. In the United States 90% of domestic violence survivors report extreme emotional distress; 47.5% report having been diagnosed with post-traumatic stress disorder; 14.7% report anxiety; 20% depression. Mental illnesses are frequently observed in domestic violence survivors.

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Psychiatric picture of encephalitis: Stigmatisation of psychiatric patient

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Background Psychiatric symptoms/disorders in brain diseases are not specific and may have the same clinical presentations as functional psychiatric disorders, so they can compromise early diagnosing of disease.

Objective This paper’s objective is to show (negative) influence of stigma in a diagnostic process of patients with predominantly psychiatric symptoms in their clinical pictures.

Materials and methods The subject is a 46 year-old female patient with no history of psychiatric disease. Her symptoms includes: confusion, disorientation, perseveration, visual and auditory hallucination, lack of motivation, inability to understand questions, developed following a 10-day long period of febricity. During the outpatient care, she has been examined by a neurologist, a specialist of urgent and internal medicine, and a psychiatrist. As the CT scan made in that stage was interpreted as normal, the patient was hospitalised in a psychiatric hospital. She was treated both with typical and atypical antipsychotics but no therapeutic effects have been reached. Thinking of organic etiology, advanced diagnostics have been made (MR, LP). MR scan showed lesion that is a characteristic for herpetic meningitis, which is also confirmed with positive serological tests.

Conclusion In patients with a sudden onset of psychiatric symptoms, patients with unexpected changes in mental status or suddenly developed headaches, as in the therapy-resistant psychiatric disorders, it is important to keep in mind the possibility of the coexistence of brain disease. Removing the stigma from psychiatric patients is important in order to be able to give every patient the chance of getting the correct diagnose on time.

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EV0885

Women’s personal and political identities in selected Middle East countries

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Introduction Women’s personal and political identities are significant in defining their roles and eventual contribution to society in contemporary society both in the private and public spheres.

Objectives This research study focuses on the effect of Islam on women’s personal and political identities.

Aims This research aims to highlight the existing ideology relating to women’s treatment in regards their identities and public roles, and hence to contribute to women’s emancipation.

Methods This study utilizes quantitative and qualitative methods in analysing women in eight Muslim-majority countries, namely, Iran, Turkey, Egypt, Saudi Arabia, Jordan, Yemen, Cyprus and Kuwait, in the Middle East. For the quantitative data, statistical dataset was culled from Inter-university consortium for political and social research of the university of Michigan.

Results The overall results show that historical constructions of gender spheres are still palpable in the Islamic landscape. Woman’s question is identified as a complex personal and social problem, and cannot be rejected as a valid search for gender sameness or equality. This study also shows the interpolation of Islam with other factors such as patriarchy, modernization, and state formations. Some Muslim scholars argue that Quran’s fundamental mooring is geared towards equality between men and women, and women’s enhanced status, and it is patriarchy that has confined women to the domestic sphere.

Conclusion Gender is embedded within culture, and structures of power in families, communities, and states, which have gender in itself, as an organizing principle.

Keywords Women’s identities; Middle East; Patriarchy; Gender; Culture

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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The investigation of nurses’ burnout levels in the context of emotional habitus

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Introduction The concept of Bourdieu’s habitus effects nurses’ approach to patients. Habitus is the site of nurses’ internalizations of the rules in the field of care work, where nurses acquire emotional habitus that corresponds to ethical values and feeling rules of care work. If nurses do not manage their emotions in accordance with the moral disposition, social suffering will be occur. Determining social suffering helps to understand how a tension between the field of care work and emotional habitus can violate nurses’ well-being and cause burnout.

Objectives To determine the emotional habitus of nurses’ with the high level of burnout.