

Alzheimer's dementia (AD) and has a progressive course that leads to inevitable deterioration in functioning. Still, FTD is not a unique entity in ICD- 10 classification.

**Objectives** To investigate the diagnostic and treatment difficulties in FTD.

**Aims** To show very rapid and progressive deterioration in people with early onset FTD.

**Methods** We will present a series of cases showing progressive cognitive deterioration and prominent personality changes in patients with FTD hospitalised at University Psychiatric Hospital Vrapce since 2013 to 2015. Collected data included anamnestic and heteroanamnestic information, blood tests and neuroimaging.

**Results** Our findings showed a significance of early onset FTD, with subtle, atypical symptoms at the beginning, and galloping deterioration during the course of illness.

**Conclusions** Presented patients with FTD showed rapid and progressive nature of disease with infaust prognosis. Even though early onset patients make 20% of overall number of patients with FTD, we consider that it is necessary to separate them from late onset patients in future classification systems.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1125>

#### EV0796

### Characteristics of elder mistreatment's perpetrators in Tunisian community-dwelling elders

B. Saguem\*, S. Bouhlel, B. Ben Hadj Ali

CHU Farhat Hached, Psychiatry, Sousse, Tunisia

\* Corresponding author.

**Introduction** While research is illuminating characteristics of elderly that are associated with mistreatment, far less research has investigated characteristics of the perpetrator that are involved in elder mistreatment cases.

**Aim** To address the characteristics of elder mistreatment's perpetrators in a population of community-dwelling elders.

**Methods** A cross-sectional study was conducted, including 80 subjects aged 65 years and older, with sufficient cognitive ability to complete the interview. Elderly were asked about several characteristics of mistreatment's perpetrators. Indicators of Abuse Screen (IOA) was used to evaluate abuse.

**Results** Findings show that 13.8% of the participants suffered from elder mistreatment, with a mean IOA's score of 8.35. According to subtypes, 10% reported psychological, 2.5% physical and 1.3% financial abuse. Abuse was recurrent and the victim's reactions were passive in all cases.

Perpetrators were family members in all cases, with being a partner in 63.6%, a child in 18.2%, a sibling in 9.1% and a stepdaughter in 9.1% of cases. They were men in 72.7% of cases and their mean-age was 64.09 years. Financial difficulties and psychological problems were reported in 54.5% and 36.4% of perpetrators, respectively. Perpetrators were most likely living with the victims ( $P=0.009$ ). Partners were the perpetrators of half of the psychological abuse, and the totality of the physical and financial abuse. Abusive marital relationships were significantly associated with the perpetrator ( $P=0.04$ ).

**Conclusion** Our findings suggest that the cause of elder abuse is rarely unique, and that this phenomenon is consequent to many pre-existing underlying problems affecting both elderly and perpetrators.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1126>

#### EV0797

### A comparative study of elder mistreatment between community-dwelling elders and those residing in long-term care facilities

B. Saguem\*, B. Saoussen, B.H.A. Béchir

CHU Farhat Hached, Psychiatry, Sousse, Tunisia

\* Corresponding author.

**Introduction** Elderly who live in settings other than their own homes or those of relatives have received little attention from researchers in Tunisia.

**Aims** To compare sociodemographic and clinical factors associated with elder abuse between community-dwelling elders and those residing in nursing home.

**Methods** A comparative study was conducted, including 50 subjects aged 65 years and older living in the community and 20 age- and sex-matched subjects living in a nursing home. Cognitive status, depressive symptoms and autonomy were assessed using mini-mental state examination (MMSE), geriatric depression scale (GDS) and activities of daily living scale (ADL). Elder abuse was evaluated with Indicators of Abuse Screen (IOA).

**Results** Elder abuse was more prevalent in elderly residing in nursing home ( $P=0.009$ ) with a prevalence of 35% and 8% and a mean IOA score of 12.75 and 7.74. Psychological, physical, financial abuse and neglect were reported by elderly residing in nursing home. Those living in community reported exclusively psychological abuse. The victim's reactions were passive in all cases.

Elders living in nursing home were more single or divorced (0.000) and financially independent (0.003). They had lower scores of MMSE (0.002) and ADL (0.014), and higher scores of GDS (0.022). A binary logistic regression confirmed that elder abuse was significantly more prevalent in nursing home after eliminating these confounding variables: age, gender, MMSE, GDS and ADL scores ( $P=0.018$ ).

**Conclusion** Our results confirm that elderly who live in long-term care facilities are at particular risk for abuse and neglect.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1127>

#### EV0798

### Medical Staff's Social representation on elderly with psychiatric disorder: Impacts about the life project

S. Salime<sup>1,\*</sup>, C. Clesse<sup>2</sup>, C. Prudent<sup>3</sup>, I. Dumand<sup>2</sup>, M. Batt<sup>3</sup>

<sup>1</sup> *Espoir 54, Meurthe et Moselle, Nancy, France*

<sup>2</sup> *Psychiatric Hospital of Jury-les-Metz, Moselle, Jury, France*

<sup>3</sup> *University of Lorraine, Nancy 2, Meurthe et Moselle, Nancy, France*

\* Corresponding author.

Today, the questioning about the life project of elderly with mental disorders seems not to be a priority of research and politics. Many studies shows that social representation of this specific population are mostly negative. They impact the place of these subjects on their social and community integration into the society. The purpose of our research work is to identify the nature of health professional's social representation involved in the accompaniment of these subjects. In that case, the authors aim to identify it impact on their life project. Consequently, the authors interviewed 715 professionals (doctors, psychologists and nurses) with the free association method of Abric. A prototypical and categorical analysis was conducted with the help of IRAMUTEQ software. Then a factorial analysis was performed in order to identify which factors could be possibly linked with some dimensions of the social representation we isolated (age, sex, profession and study level). Results shows that social representation of health professionals