

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2098>

EW0229

“To live”: An experimental brief therapy for patients who attempt suicide

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Background/introduction It is widely known that attempted suicide is the main risk factor for suicide and repeated suicide attempts. However, there is a lack of evidence for follow-up interventions/treatments reducing suicidal behavior in this population. The aim of the present study was to describe a novel-therapy as a potential treatment with effectiveness in reducing suicidal behavior. One of the main objectives of this project is to potentiate the benefits of the usual treatment in patients with history of suicidal attempt.

Description and method “To live” is a proposal of short psychotherapeutic intervention program for patients with recent suicide attempts. The participants were randomly allocated in two groups, one worked as our control group ($n=8$), which had the usual treatment (individual outpatient care), and the other group ($n=8$) underwent the usual treatment plus the experimental treatment. This treatment consists of a well structured program, in which participants receive eight group sessions followed by regular contact through telephonic calls over 12 months. In order to evaluate its impact and measure results, a set of structured interviews and clinical questionnaires have been applied in different times: time zero (before admission), time one (in the end of the intervention), time 2 (1 month after intervention), then at each every 3 months over a 12 month follow up period.

Results/conclusion By the time this study was conducted, the experimental program was being administered, therefore no results could be taken. However, preliminary findings suggest the effectiveness of the program in reducing suicidal behavior in a real-world clinical setting.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2099>

EW0230

The impact of emotional intelligence on the emotional state of nurses in public hospitals in Cyprus

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Introduction The term emotional intelligence (EI) has gained more and more popularity in the last two decades and has been studied in various workplace settings.

Objectives/aims The purpose of the present study was to estimate the EI in nursing personnel, to examine which factors are associated with EI and how EI correlates with their emotional state.

Methods A cross-sectional study was conducted from April to May 2016 in a representative sample of nursing personnel from seven public hospitals of Cyprus. A total of 585 nurses completed the Greek Emotional Intelligence Scale (GEIS), consisting of 52 items measuring four basic emotional skills and scored on a 5-point Likert scale (from low (52) to high (260) EI). Furthermore, the Depression, Anxiety, and Stress Scale (DASS 21) was applied. Statistical analyses were performed using the SPSS v.20.0.

Results Overall mean EI scores were 184.11 for males and 184.82 for females. Being married and having children as well as having leading position was associated with higher EI ($P=0.024$, $P=0.002$, $P=0.012$, respectively). The highest EI scores were identified between the middle aged nurses (36–50 years, $EI=191.5$, $P=0.000$) and nurses with more years of work (>12 years, $EI=189.59$, $P=0.000$). The overall EI scores have moderate negative correlation with the emotional state of the nurses ($P=0.000$).

Conclusions The present study reveals under-optimal EI scores and confirms the negative relationship with the emotional state of nurses. Based on the literature, the EI can be developed, thus suitable programs could substantially improve the emotional skills in nursing personnel.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2100>

EW0231

Help-seeking and psychological distress in university students: Findings from a cross-sectional online survey in the UK

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Introduction With most mental health disorders emerging in the later teenage years, university students are arguably an at-risk population with increased mental health support needs. This population is characterised by important, life-changing transitions (moving away from home, friends and family) and new potential stressors (including increased academic pressures and relational challenges). Research to examine determinants of mental health help-seeking behaviours in university students is needed to ensure emotional health needs are being met at this critical time.

Objectives To examine levels of psychological distress and mental health help-seeking behaviours in a sample of UK university students. By identifying factors associated with help seeking, we can better understand the mental health needs of this population and inform support provision.

Methods This study draws on data from the social and emotional well-being in university students (SoWise) study, an online survey which aimed to examine risk and resilience for social and emotional well-being in young people attending a UK university.

Results Whole sample analysis ($n=461$) showed help seeking was significantly associated with psychological distress, current life stressors and anxious attachment and not associated with perceived mental health stigma. Sub-group analysis ($n=171$) suggests being female and older significantly predicted help seeking in students with mild/moderate psychological distress.

Conclusions Younger males with mild/moderate psychological distress are less likely to seek mental health support and repre-

sent an “invisible” at risk group. Results also suggest that global anti-stigma campaigns in universities may not prove effective in encouraging help seeking.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2101>

e-Poster walk: Schizophrenia and other psychotic disorders—part 1

EW0232

Formal thought disorder in schizophrenia and bipolar disorder: A systematic review and meta-analysis

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Historically, formal thought disorder has been considered as one of the distinctive symptoms of schizophrenia. However, research in last few decades suggested that there is a considerable clinical and neurobiological overlap between schizophrenia and bipolar disorder (BP). We conducted a meta-analysis of studies comparing positive (PTD) and negative formal thought disorder (NTD) in schizophrenia and BP. We included 19 studies comparing 715 schizophrenia and 474 BP patients. In the acute inpatient samples, there was no significant difference in the severity of PTD ($d = -0.07$, $CI = -0.22-0.09$) between schizophrenia and BP. In stable patients, schizophrenia was associated with increased PTD compared to BP ($d = 1.02$, $CI = 0.35-1.70$). NTD was significantly more severe ($d = 0.80$, $CI = 0.52-0.1.08$) in schizophrenia compared to BP. Our findings suggest that PTD is a shared feature of both schizophrenia and BP but persistent PTD or NTD can distinguish subgroups of schizophrenia from BP and schizophrenia patients with better clinical outcomes.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2102>

EW0233

The split version of Global Assessment of Functioning scale – application and utility in remitted psychotic patients

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Introduction Current knowledge about the advantages of using split version of GAF scale – having separate Symptom (GAF-S) and Functioning (GAF-F) subscales is insufficient and has number of gaps. Present study analyzed the manner in which young adult remitted psychotic patients with different functional levels vary in their symptom severity and how GAF-F reflects presence/absence of well-known psychosis risk factors.

Methods Sample comprised 37 remitted psychotic patients (56.8% male, 29.4 ± 6.1 years), categorized based on GAF-F scores into groups: ‘Moderate remission’ (GAF-F 41–60, $n = 19$) and ‘Good remission’ (GAF-F > 61, $n = 18$). Participants were assessed using the GAF-S, WAIS-R, Nottingham Onset Schedule, Premorbid Adjustment and Brief Core Schema scales, childhood trauma and bullying questionnaires. Mann–Whitney and Student’s *t*-tests were used to assess between-group differences.

Results Groups did not differ in age, sex and education. When compared to ‘Good remission’ group, ‘Moderate remission’ group exhibited earlier illness’ onset ($P = 0.01$), greater symptom severity ($P = 0.00$), negative self-evaluation ($P = 0.02$), more childhood physical abuse ($P = 0.01$) and bullying ($P = 0.01$). Moreover, trend-like significances ($P = 0.08$) were observed for poorer adolescence adjustment and negative evaluation of others. There were no between-group differences regarding IQ and duration of untreated/treated illness.

Conclusions GAF scale is in the continual use since early 1990, however, evidence of further development of the instrument itself is sparse. Present research is demonstrating that GAF-F scores reflect diverse factors related to psychosis risk, the illness’ course and quality of remission. Moreover, the results contribute to surmount some of the gaps in knowledge about the split version of GAF scale.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.2103>

EW0234

C-reactive protein and parathyroid hormone in acute severe psychotic disorders (schizophrenia, bipolar disorder and methamphetamine-induced psychotic disorder)

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Introduction and objectives Schizophrenia accompanies with elevated C-reactive protein (CRP) and vitamin D deficiency. However, there are scarce documentations regarding bipolar disorder and methamphetamine-induced psychotic disorder.

Aim To compare serum levels of vitamin D, parathyroid hormone (PTH), calcium, phosphorus and CRP levels in psychotic disorder patients and control group.

Methods A case-control study was conducted on four groups: acute phase of schizophrenia, acute manic episode of bipolar disorder, methamphetamine-induced psychotic disorder and healthy control subjects. Sample size was 45 in each group. Weekly duration of sun exposure, monthly vitamin D intake and serum levels of vitamin D, calcium, phosphorus, PTH and CRP were assessed. Brief Psychiatric Rating Scale (BPRS) was used to evaluate psychotic symptoms.

Results Duration of sun exposure and monthly vitamin D intake were comparable among groups. Serum levels of vitamin D, calcium and phosphorus were not statistically different between groups ($P = 0.463$, $P = 0.086$ and $P = 0.339$, respectively). Serum levels of PTH were significantly higher in control group ($P < 0.001$). CRP levels were significantly lower in control subjects ($P < 0.001$). The levels of serum vitamin D and CRP did not show statistically significant difference among three groups of patients.

Conclusion Acute psychotic disorders seem to be associated with higher CRP and lower PTH levels. Clinical importance of the findings