

psychotropic drugs treatment, the patient was admitted to an institution for rare diseases patients. Since then he has experienced a calm and functional life, with trained professionals who can offer the non-pharmacological approaches he needs.

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EV0289

A psychiatric liaison team at the university medical services: A pilot experience

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Introduction University students represent a specific population with concerns, burdens and worries that differ from other age and occupation groups. Students' experiences are often exciting and empowering, yet facing multiple stressors that may trigger various forms of psychopathology. Our psychiatry department created a specific liaison service for university students in order to provide an easy and quick access to this medical speciality, included at the Multidisciplinary University Medical Services.

Aims To characterize a sample of college student users of our Psychiatry Liaison Unit regarding socio-demographic and clinic variables.

Methods Socio-demographic and clinic characterization was undertaken in all students observed during sixteen months (1st April 2015–30th July 2016).

Results Fifty-three outpatients were observed: 35 females (66%) and 18 males (34%), aged between 18 and 39 years old (average: 23.94; median: 23). The majority was Portuguese and lived originally in urban areas. A total of 75.3% were displaced and 60% lived with colleagues while 84.9% attended an undergraduate degree, and 38% studied at faculty of Science and Technology. Clinically, 79.2% were referenced by the University Medical Services, and adjustment disorders (ICD-10 F43.2) were the most frequent diagnosis. Relatively to suicidal behaviors and self-harm, 5.7% did self-cutting, 49.1% took an antidepressant combined with another psychotropic drugs, and 81.1% maintained cognitive-behavioral interventions.

Conclusions The typical university students' psychiatry outpatient was of female gender, in an undergraduate degree, displaced and living without their family. The most frequent diagnosis was adjustment disorder, and about a quarter were successfully discharged. Multidisciplinary University Medical Services located near to students can easily refer patients to Psychiatry Liaison Units, allowing diagnosis and intervention at early stages of mental disease.

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EV0290

Somatogenic depression on cardiovascular disease patients

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In research, based on the systematic approach of evaluating results of complex clinical-psychopathological, psychodiagnostic investigation myocardial infarction and cerebral stroke patients the clinical structure features, regularities in the formation, development and course of somatogenic depression and associated disorders on these patients was determined. At patients with cardiac infarction in acute period the pain syndrome is the main one, leads to severe psycho-emotional disorders. Against the background of cognitive function preservation phobic, anxiety and depressive symptoms prevail, their intensity depends on the severity of pain. Subsequently, the primary psycho-emotional constituent element disappeared and anxiety-depressive disorders developed along with hypo and anozognostical type of personal condition perception. At cerebral stroke, patient's disorders of level of consciousness were primary with cognitive and asthenic disturbances with subsequent formation of psycho-emotional disorders, anxiety and depressive disorders with hypochondrical elements on the basis of persistent cognitive impairments.

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EV0291

System of early medical and psychological support among patients with acute physical conditions

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Basing on a systematic approach to assessing the results of a comprehensive clinical, clinical and psychological psychodiagnostic investigation of 605 patients with acute physical condition, had been established clinical model of phenomenology and pathogenetic mechanisms of formation of mental sphere disturbances. Basing on the clinical data had been identified clinical variants of mental disorders development depending on the degree of severity: somatogenically, due to asthenic syndrome nosogenic reactions of psychological maladjustment, nosogenic neurotic disorders. Had been determined pathogenetic mechanisms of mental disorders, taking into account the stratification of various parts, highlighted psychophysiological level, emotional functioning, motivation, personal performance. Design and implementation of integrative and differentiated system of early medical and psychological support of patients with acute physical condition based on the principles of phasing, consistency and comprehensiveness, its effectiveness had been evaluated from the standpoint of evidence-based medicine.

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EV0292

Multiphasic personality inventory on pneumo- or hemo-thorax: Retrospective cross-sectional analysis of military candidate in Korea

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Objectives The aim of this study was to identify association between pneumo- or hemo-thorax and psychological distress using the Military Personality Inventory (MPI).

Methods A retrospective cross-sectional study was conducted with 19-yr-old examinees who were admitted to the Military Manpower Administration in Korea from February 2009 to January 2010. A total number of 1955 young men were enrolled in this study. The normal volunteer group ($n=1561$) comprise individuals who did not have pneumo- or hemo-thorax. The pneumo- or hemo-thorax group ($n=394$) included individuals with pneumo- or hemo-thorax. This group was divided into two subgroups, group A (treated with conservative care or chest tube insertion, $n=341$) and group B (treated with wedge resection, $n=53$).

Results We compared each of three groups (Control group, Group A, Group B) using the analysis of covariant (ANCOVA). The somatization subscale score of the neurosis category was significantly higher for group A ($P<0.001$) and showed higher tendency for Group B than the control group ($P=0.073$). The other categories (validity scale; anxiety, depression, and personality disorder subscales for neurosis scale; and psychopath scale) showed no significant difference in the MPI among Group A, Group B and Control group.

Conclusion Conservative care or chest tube insertion group had higher somatization symptoms than control group. Wedge resection group had higher somatization tendency than control group. Individuals with pneumo- or hemo-thorax history may be concerned about their body shape or their general condition. Therefore, supportive intervention and psychiatric education may be needed for them to relieve somatic distress.

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EV0293

The development of a brief 5-minute mindful breathing therapy for the reduction of distress in palliative cancer patients

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Introduction Although psychological distress is highly prevalent, palliative cancer patients are mostly too lethargic to undergo many sessions of the conventional psychotherapy.

Objectives The study aims to develop a brief, quick and easy to administer psychological intervention for rapid reduction of distress in palliative care patients.

Methods In phase I, an expert panel of multidisciplinary team was formed. The theory of mindfulness-based intervention was simplified into a 5-minute mindful breathing technique that can be learnt and practiced by palliative care patients.

In phase II, the efficacy of 5-minute mindful breathing was investigated in a pilot test that comprised of nine palliative cancer patients and eleven care takers.

In Phase III, the efficacy of 5-minute mindful breathing was further examined in a non-blinded, randomized controlled trial (RCT) that included 60 cancer patients under palliative care. Apart from perceived distress, physiological measures were assessed.

Results The effect of 5-minute mindful breathing in rapidly reducing distress among palliative care patients was confirmed in both the pilot test (Tan et al., 2015) and RCT (Ng et al., 2016). The finding was further supported by the significant physiological changes associated with distress reduction such as decreased breathing rate, blood pressure, pulse rate, galvanic skin and

increased skin surface temperature (Ng et al., 2016) with the 5-minute mindful breathing.

Conclusion The 5-minute mindful breathing is a quick and easy to administer intervention that is useful for reducing acute suffering or distress in palliative care patients.

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EV0294

When seizures are non-epileptic

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Introduction Non-epileptic seizures (NES) are a diverse group of disorders, whose paroxysmal events can be mistaken for epilepsy, although they are caused by a mental or psychogenic process rather than a neurological cause.

Objectives/methods We present a case of a 45-year-old female patient with history of generalized seizures prior to Meningioma resection in August 2015, referred to the Liaison Psychiatry outpatient follow up clinic at the Royal London Hospital after has gone several times to emergency department complaining about flush and hot sensation that proceeded to corners of mouth turning down, teeth chattering, shaking of left arm and torso at first and then legs. During the episodes, she was awake with no consciousness loss. Her mood was low, with clinical evidence of depression and she had very high levels of health anxiety.

Discussion A diagnosis of non-epileptic attacks was made in the sequence of those episodes. A holistic and multidisciplinary approach was made, including pharmacotherapy, cognitive-behavioral therapy and domiciliary support. The clinical response was good regarding both mood, anxiety levels and NES.

Conclusions Approximately 25% of patients who have a previous diagnosis of epilepsy and are not responding to drug therapy are found to be misdiagnosed and it is common that epileptic patients have both epileptic and non-epileptic seizures. Although distinguishing epileptic and non-epileptic seizures is not easy, there are some clinical clues that the physicians should look for, like age of onset, time of the day that episodes occur and presence or absence of postictal confusion.

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EV0295

Prevalence of depressive symptoms among inpatients at the university hospital of Sergipe, Brazil

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Introduction Depressive Symptoms (DS) generate a public and economic health problem, with decreasing productivity, labour market withdrawal and increased demand for health services. Studies show that in hospitalized patients, DS rates are higher than in the general population, in medical practice, however, they are under diagnosed or under-treated. Consultation Liaison Psychiatry (LP) can prevent aggravation of the psychic symptoms by early identification of them and by integration of psychiatry with the other medical specialties.

Objectives To estimate the prevalence of DS and associated factors in inpatients and the frequency of consultation LP.