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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1796

### EV1467

# Sociodemographic and clinical profile in elderly suicide victims: 34 autopsy case studies

S. Ellouze <sup>1</sup>,\*, I. Baati <sup>1</sup>, W. Ben Amar <sup>2</sup>, D. Trigui <sup>1</sup>, W. Abbes <sup>1</sup>, S. Maatoug <sup>2</sup>, J. Masmoudi <sup>1</sup>

- <sup>1</sup> Hedi Chaker University Hospital, Psychiatry "A" Department, Sfax, Tunisia
- <sup>2</sup> Hedi Chaker University Hospital, Forensic Medicine Department, Sfax, Tunisia
- \* Corresponding author.

Introduction The elderly suicide is a major public health problem that is gaining more and more ground, given the aging population problem. This has rarely been the subject of forensic studies in Tunisia.

*Objectives* To identify the sociodemographic and clinical characteristics of elderly suicide victims over 60 years and to determine what factors might increase suicide risk in this population.

Methods We conducted a retrospective study on suicide victims aged 60 and over, autopsied in forensic medicine department of the Habib Bourguiba university hospital in Sfax (Tunisia), on a 10-year period (January 2006–December 2015).

Results We identified 34 cases with an average age of 66 years. The sex ratio was 2.77. Suicide victims were alone in 38.2% of cases. They were inactive professionally in 32.4% of cases. Almost half of them (44.1%) had a psychiatric history, 40% of depressed pace, 26.7% of bipolar disorder and 13.3% of schizophrenia.

Three main factors were identified as precipitating the passage to suicidal act: family conflicts (26.5%), financial difficulties (11.8%) and loss of autonomy (5.9%).

Suicide methods were hanging (50%), immolation and drug intoxication (11.8%), hit by train and poisoning (8.8%), jumping from height (5.9%) and drowning (2.9%). In 55.8% of cases, suicide took place at home.

Conclusion Elderly suicide seems to be a huge but largely preventable public health problem. Its prevention is essentially based on the identification of risk situations and the detection and treatment of depression: major suicide risk factor in this population.

Disclosure of interest The authors have not supplied their decla-

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1797

### EV1468

## Resilience and attempted suicide in depressed patients

E. Gattoni <sup>1,\*</sup>, C. Gramaglia <sup>1</sup>, D. Marangon <sup>2</sup>, A. Feggi <sup>2</sup>, C. Delicato <sup>1</sup>, S. Di Marco <sup>1</sup>, A. Venesia <sup>1</sup>, P. Zeppegno <sup>1</sup>

- <sup>1</sup> Università degli Studi del Piemonte Orientale, Traslational medicine, Novara, Italy
- <sup>2</sup> AOU "Maggiore della Carità", SC Psichiatria, Novara, Italy
- \* Corresponding author.

ration of competing interest.

Introduction Among the patients, 6.6% with past-year major depressive disorders attempt suicide in their life. Resilience (the ability to respond positively to adversity) and coping strategies (the ability to manage living stresses) may be protective factors against suicide ideation and behavior. A study conducted on 100 abstinent substance dependent patients suggested that suicide attempters had significantly lower resilience scale scores. Other authors demonstrated that intrinsic religiosity, resilience, quality of life were associated with previous suicide attempts in depressed patients [1,2].

*Aim* To examine the correlation among resilience, coping strategies and sociodemographic and clinical characteristics in depressed patients.

Methods From December 1st 2014 to December 31st 2015 we recruited inpatients and outpatients aged > 18 years with a diagnosis of depression (current or past). At baseline, patients were assessed with Montgomery Asberg Depression Rating Scale, Resilience Scale for Adult and Brief-COping with problems experienced; sociodemographic and clinical characteristics were gathered. Follow-up was conducted after 1 year in order to assess the possible presence of further depressive episodes and suicide attempts. Analysis was performed with SPSS.

Results and discussion Data collection are still ongoing; results and implications will be discussed. We expect to find higher attempted suicide rates in patients with lower resilience and less coping strategies.

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

References

- [1] Roy A, Sarchiapone M, Carli V. Low resilience in suicide attempters. Arch Suicide Res 2007;11(3):265–9.
- [2] Mosqueiro BP, da Rocha NS, Fleck MP. Intrinsic religiosity, resilience, quality of life, and suicide risk in depressed inpatients. J Affect Disord 2015;179:128–33.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1798

### EV1469

## Observational study of suicide attempts in a community mental health unit

M. Guerrero Jiménez\*, C.M. Carrillo de Albornoz Calahorro, J.M. Gota Garcés

Santa Ana Hospital, Mental Health Unit, Motril, Spain

\* Corresponding author.

Introduction Concurrent with the recent global economic crisis there is a rising concern about the effect of recession on suicide mortality rates.

Aim To record patients treated urgently in community mental health unit of Motril, Granada (Spain) by attempted suicide.

Methods Descriptive study recording patients treated urgently in Motril community mental health unit who have done any suicide gesture from February 2015 until December of that year.

 $\it Results~$  In total, 39 urgent assessments were recorded during the observational period.

The month of highest incidence was November, with 6 visits followed by August and October (5).

The most common method was voluntary drug intake. Origin:

-59% were remitted from the general hospital emergency department;

- critical care and emergency ambulatory devices: 1;
- primary care: 10;
- another specialist: 2;
- own initiative: 2.

Discharge diagnosis:

- 35.8% individuals did not meet criteria for any mental disorder, although some of them were classified with V or Z diagnosis according to ICD-10 for making a reactive gesture to a emotional crisis, couple breakups or economic problems;
- 11 of them meet criteria for various anxiety disorders, obsessive compulsive and adaptative crisis.

*Discussion* Knowing some peculiar characteristics in suicidal populations as well as the most prevalent pathologies, it could be adapted both the profile of nurse attendance and the type of resources needed to ensure effective patient care.

Conclusion Profile of patients attended for suicide attempt in an outpatient setting in a semi-rural coastal area is variated. It is worth

to mention that one-third of this population did not meet criteria for any mental disorder.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1799

#### EV1470

# Suicide sleep monitoring (SSleeM): A feasibility and acceptability study of a wearable sleep tracking monitoring device in suicide attempters

E. Guillodo<sup>1,\*</sup>, S. Berrouiguet<sup>1</sup>, M. Simonnet<sup>2</sup>, I. Conejero<sup>3</sup>, P. Courtet<sup>3</sup>, E. Baca Garcia<sup>4</sup>, R. Billot<sup>2</sup>, P. Lenca<sup>2</sup>, M. Walter<sup>1</sup>

- <sup>1</sup> Chru Brest, Psychiatry, Brest, France
- <sup>2</sup> Telecom Bretagne, Telecom, Brest, France
- <sup>3</sup> Chru Montpellier, Psychiatry, Montpellier, France
- <sup>4</sup> Fundacion Jimenez Diaz, Psychiatry, Madrid, Spain
- \* Corresponding author.

Introduction Sleep disturbances are associated with an increased risk of suicidal behavior. The evidence primarily stems from studies based on questionnaires about sleep quality. In recent years, the availability of wearable health technology has increased and offers an inexpensive, appealing, and accessible way to measure sleep. Our aim is to assess the feasibility and acceptability of wearable sleep tracking monitoring devices in a sample of suicide attempters. A prospective, open-label, 12-months study will be conducted in the emergency department (ED) and psychiatric unit (PU) of the university hospital of Brest, France. Inclusion criteria are male or female aged 18 or over, surviving a suicide attempt, discharged from ED or PU, and giving consent. The sleep tracker and a smartphone will be given to the patient after discharge. He or she will receive brief training on how to use the sleep tracker. Patient will be asked to monitor their sleep during the five days following the discharge. The feasibility will be explored by analyzing the data proceeding from the sleep tracker. The acceptability will be assessed during the five-days follow up visit, using a standardized questionnaire.

*Results* Preliminary results of this ongoing study show that feasibility and acceptance may be related to technical features of wearable devices.

Discussion A better understanding of the bidirectional mechanism between sleep disturbances and suicide behavior will allow the design of tailored interventions to prevent suicide attempts. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1800

### EV1471

## Suicide prevention program in the argentine federal penitentiary service

G.N. Jemar <sup>1,\*</sup>, D. Barros <sup>2</sup>, C. Cisneros <sup>2</sup>, M. Salech <sup>3</sup>, V. Gizzi <sup>2</sup>

<sup>1</sup> Hospital Jose Tiburcio Borda, Guardia Medica, Ciudad Autonoma De Buenos Aire, Argentina

- <sup>2</sup> Servicio Penitenciario Federal Argentino, Salud Mental, Ciudad Autónoma De Buenos Aires, Argentina
- <sup>3</sup> Servicio Penitenciario Federal Argentino, Servicio Penitenciario Federal Argentino, Ciudad Autónoma De Buenos Aires, Argentina \* Corresponding author.

Suicide configures failure in the mental health care of persons deprived of their liberty in terms of detection of risk factors, prevention, specific planning in terms of addressing thoughts of death or autolytic planning, trends, impulses and moods. The factors that unite in this catastrophe are multiple and depend not only on mental health care, but also on the circumstances that led to the deprivation of liberty, the family and the care of social continence

and the intimate relationship of the person with its existence. Also, security personnel who take care of people in confinement contexts have a preponderant role in suicide preference. Structuring the personality distorted, immature or insufficient, circumstances that lead to vulnerability and threaten the preservation of life in the context of constant stress and loneliness. The transdisciplinary work experience provides us with constant review and dynamic concepts and practices to predict, diagnose and prevent risky behaviors prone to the symptoms of self-injury or self-harm of patients. In this sense, we propose interdisciplinary interviews of entry, registry for the detection of risk factors, specific treatment in patients at risk. The transdisciplinary confluence is a tool to be implemented to quantify the results and propose to reduce the incidence of suicide in people in a confinement context.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1801

### EV1472

### Road traffic accidents and suicide rates in Europe

S. Kandrychyn<sup>1,\*</sup>, Y. Razvodovsky<sup>2</sup>

- <sup>1</sup> Republican Clinical Medical Centre, Cardiology, Minsk, Belarus
- $^2$  Grodno State Medical University, Pathological Physiology, Grodno, Belarus
- \* Corresponding author.

Introduction Road traffic death and suicide may have some similarity in their psychological correlates; furthermore, road traffic should be considered as a suicide method.

Aims The present study aims to explore the relationship between road traffic deaths and suicides in Europe.

Methods Rates of road traffic accident deaths and suicides and gross national income (GNI) per capita for 40 European nations were obtained from the world health organization official database. The total sample was divided on 22 eastern European nations and 18 western European nations.

Results Mortality rate from road traffic accidents in groups of all European nations is associated positively with suicides (Pearson r = 0.45, two-tailed P < 0.01) and negatively with GNI (r = -0.64, P < 0.0001). At the same time suicide rates does not reveal a significant correlation with GNI. In the groups of eastern European nations road traffic deaths is associated positively with suicides (r = 0.57, P < 0.01) and relationship with GNI is not significant. As a contrast, in the groups of western European nations road traffic deaths is associated negatively with GNI (r = -0.69, P < 0.01) and shows any significant relationship with suicides. Although in this group, suicides show some positive correlation with GNP (r = 0.45, P < 0.05).

Conclusions The present data indicate, therefore, that mode of ecological association between three studied indices is various in the different group of European nations what suggests the multifactorial complexity of violent death etiological mechanisms. At the same time, the data allow to suggest that socioeconomic factors are more essential in prevention of road traffic mortality than suicides. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1802

### EV1473

## Bridgend "Bebo Internet Suicide Cult" and ritual violence in Wales

R. Kurz

Cubiks, IPT, Guildford, United Kingdom

Introduction In a small South Wales town 17 teenagers seemingly committed suicide through hanging in 2008 triggering national