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position (especially from the Laws and the Republic) regarding the matter of suicide and the nowadays reasons invoked by the patients requesting assisted suicide.

Methods: Looking at the patients from the United States of America which requested assisted suicide, by analyzing the available annual reports (at the time of writing this abstract, only 6 out of 9 states that have a legal status that permits assisted suicide are publishing annual reports regarding the patients and their assisted suicide requests), we compare them with Plato's attitude towards suicide.

Results: We observe that the most invoked reasons (concerns and underlying illnesses), by the patients wich request assisted suicide, are also the cases in which Plato permitted suicide.

Conclusions: This comparison and insight into Plato's philosophy does not resolve any particular issues of the medical praxis but is binging out the utility of a multidisciplinary, especially philosophical and ethical, approach to the practice of assisted suicide.

Keywords: Plato; philosophy; Assisted Suicide

EPP0931

Mental health and sexual health - two modern definitions and their impact on holistic care

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Introduction: Definitions of health in different branches of medicine are one of the key paradigms in medical sciences. Nowadays, there are two distinct definitions of sexual health and mental health. The definition of sexual health, as well as sexual rights, was proposed by the World Health Organization (WHO, 2006), and the definition of mental health was published in World Psychiatry (Galderisi et al, 2015).

Objectives: The analysis and comparison of these two definitions: mental health and sexual health are two main objectives of this study.

Methods: The analysis was carried out in three areas: logic, philosophical aspects (values) and the impact of other disciplines.

Results: The definition of sexual health reveals a eudaimonistic approach, whereas the definition of mental health is based on a holistic paradigm. Regarding the main principles in the definition of sexual heath, one can identify the following values: well-being, pleasure, safety, sexual rights – compared to harmony, empathy, coping skills, universal values in the definition of mental health. Sexual rights are a constitutive part of sexual health. There is no comparative element in the definition of mental health (e.g. the rights of mentally disabled persons).

Conclusions: These two definitions can have different effects on the prophylaxis and therapy of patients. It all depends on the specific context of care (sexology or psychiatry). Sometimes universal values matter and sometimes not. This is contradictory. Consistency is needed between definitions and practices.

Keywords: mental health; sexual health; philosophy of medicine

Posttraumatic stress disorder

EPP0932

On the role of social position on extreme stress appraisal: Implications for post-traumatic stress disorder

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Introduction: Recently, several studies have implicated the social context during a traumatic experience in susceptibility to, and severity of, post-traumatic stress disorder (PTSD). Although the precise mechanisms through which the social context affects the development of PTSD are unknown, it has been suggested that the neuropeptides oxytocin and β -endorphin may play a key role in this dynamic through their effects on both the locus coeruleus and the mesocortical and mesolimbic dopamine systems.

Objectives: This experiment aims to identify in how far a formal social position, endowed by a recognised authority, modulates the stress response in cadets at the Czech military academy during a highly stressful training exercise.

Methods: As part of survival training, 40 cadets partake in a simulation of an avalanche. Although the maximum duration of the experience (being buried under snow) is 15 minutes, most cadets do not last longer than a few minutes with a significant portion requesting termination after a matter of seconds. During the experience, participants are fitted with a heart-rate and heart-rate variability monitor and tested before and after for pain resilience (a common proxy measure for β -endorphin). Participants are randomly allocated to have their individual scores or the average of their collective scores (in small groups of 5) incorporated in their final evaluation of the exercise.

Results: Not all data has been collected yet.

Conclusions: We expect to see a difference in resilience (measured in duration) between the two groups which is mirrored in the afore mentioned biomarkers.

Keywords: post-traumatic stress disorder; Social context; betaendorphin; oxytocin

EPP0933

Narrative exposure therapy for refugees and asylum seekers with PTSD: A review of the literature

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Introduction: Refugees and asylum seekers have often been exposed to multiple or complex traumas and are known to have a high rate of trauma-related disorders. Different therapeutic

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approaches have been used to treat this group with varying success. Narrative Exposure Therapy (NET) is one promising intervention for refugees and asylum seekers that are suffering from post-traumatic stress-disorder (PTSD). NET is a treatment given individually or in small groups in typically 12 sessions or less. In NET, memories are reorganized through a process involving imaginary exposure to trauma.

Objectives: To review the literature on NET for refugees and asylum seekers suffering from PTSD.

Methods: The data bases PubMed, Medline, PsycInfo and Web of Science were searched using a selection of search terms, including 'Narrative therapy', 'refugees' and 'stress disorders, post-traumatic'. The identified relevant articles were qualitatively assessed and effect sizes were compared. Methodological quality was assessed according to the GRADE-criteria.

Results: Thirteen studies were assessed with a total study population of 745. Nine of the included studies were RCTs. Overall, the studies found medium to very high effects of NET. The quality of the studies varied from very low to high. More studies of NET for refugees and asylum seekers are needed, and in particular studies reporting long-term outcomes.

Conclusions: The review suggests that NET shows promise as a method for the treatment of PTSD in refugees and asylum seekers. However, the review is based on relatively few studies and more studies of long-term outcomes are particularly needed.

Keywords: Refugee; Asylum seeker; Narrative Exposure Therapy; ptsd

EPP0934

No distance is too far between friends: Associations of comfortable interpersonal distance with PTSD and anxiety symptoms in traumatized individuals

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Introduction: Previous research indicates that traumatized individuals with post-traumatic stress disorder (PTSD) symptoms may show alterations in interpersonal distance regulation that are not evident in traumatized individuals without PTSD symptoms. However, the underlying mechanisms of these alterations are yet to be investigated. Moreover, it is not clear whether altered interpersonal distance regulation is correlated with trauma-related psychopathology.

Objectives: The current study investigated behavioral and neurophysiological markers of interpersonal distance regulation as predictors of PTSD and anxiety in traumatized firefighters.

Methods: Twenty-four active-duty firefighters (M = 30.58, SD = 3.62) completed an experimental task that measures comfortable interpersonal distance. During the task, event-related potentials were recorded to assess attentional processing as reflected in the P1 and N1 components. Trauma-related psychopathology was assessed using the Clinician-Administered PTSD Scale and the state version of the State-Trait Anxiety Inventory.

Results: Participants who did not choose a closer distance towards friends as compared to strangers experienced greater anxiety post-

trauma. On a neurophysiological level, participants who showed attentional avoidance towards strangers reported more PTSD symptoms. By contrast, participants who showed hypervigilant attention towards strangers reported greater anxiety.

Conclusions: The results demonstrate associations between interpersonal distance regulation and psychopathology after trauma, shedding light on the underlying processes of interpersonal distance regulation in anxiety and PTSD. Future studies should re-investigate these associations in a larger sample and explore potential implications for the prevention and treatment of trauma-related psychopathology.

Keywords: ptsd; Anxiety; ERP; Interpersonal distance

EPP0935

PTSD in jewish holocaust survivors' as a risk factor in the development of mental health conditions in their offspring

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Introduction: Transgenerational transmission of trauma (TTT) describes the residual 'presence of the past' through generations. This phenomenon has an established evidence base with Holocaust survivors (HS) and their offspring, who are hypothesised to be at a greater risk of psychiatric conditions. This advanced literature review explores the relationship between Post Traumatic Stress Disorder (PTSD) in survivors and mental health conditions (MHC) in survivor's offspring.

Objectives: The objective is to review the literature, looking for evidence of TTT and exploring the mechanisms of action of such phenomenon.

Methods: An advanced search was performed in three databases; Medline, Ovid PsycInfo and the Yehuda Schwarzbaum Online library using the following search terms; (Post Traumatic Stress Disorder OR PTSD) AND (Holocaust OR Shoah) AND (Offspring OR Children)'. 190 articles were identified and a following 163 were excluded. 26 studies were reviewed.

Results: Parental PTSD is circumstantially influential in parenting and attachment quality. Unfavourable attachments in offspring are associated with psychiatric conditions. Furthermore, poor health behaviour can be transmitted; for example, poor diet is an independent risk factor for depression. Psychopathology may pass intergenerationally; parental PTSD increases the risk of developing PTSD in response to one's trauma. Parental PTSD can also result in impaired cortisol function and epigenetic changes.

Conclusions: PTSD in HS is an important risk factor for development of MHC in offspring. However, this does not mean all offspring develop MHC. The variability in offspring proneness to psychiatric conditions may reflect specific vulnerabilities. Further research is pertinent for an understanding of TTT. The poster will discuss clinical value.

Keywords: Holocaust; post-traumatic stress disorder; mental health; Offspring