

questionnaire was distributed to collect psychiatry trainees' demographic and educational characteristics.

Results In Portugal, the majority of trainees have a Portuguese citizenship. Almost 2/3 did not have a short-mobility experience, and the majority never migrated to another country. Less than half consider staying in Portugal in the next years, and nearly 4/5 have considered leaving the country. Working conditions ranked first as the priority condition to be improved in psychiatry in Portugal, followed by financial conditions. In fact, an attractive job for psychiatry trainees in Portugal must have as the most important feature a pleasant work environment.

Conclusions An alarming percentage of psychiatry trainees from Portugal intend to migrate. Impact on future career, financial conditions of doctors, job opportunities and better working conditions were some of the motivating factors behind the migration.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2409>

EV1425

Internalization of stigma and self-esteem as it affects the capacity for intimacy among patients with schizophrenia, comparison between Jews and Arabs

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In addition to the physical and psychological signs and symptoms of their disorder, people who have schizophrenia also experience severe repercussions associated with social isolation [1]. Internalization of social stigma was found to be a statistically significant core factor that affects self-esteem and the ability to create intimacy among Jewish patients with schizophrenia. Significantly more Muslim patients were married in comparison to Jewish patients. There was statistically significantly less internalization of stigma of mental illness among hospitalized patients than among individuals with schizophrenia who live in the community [2]. The current study examines the relationship between internalization of stigma, self-esteem, and the ability of people diagnosed with schizophrenia to form intimate attachments with loved ones, in Arab patients compare to the existing sample of 24 patients from the Jewish sector. Data is gathered for 27 Muslim patients with schizophrenia who live in the community, ages 18–60, men and women from the following four questionnaires: Demographics Questionnaire, Self-Esteem Scale, Internalized Stigma of Mental Illness Scale and the Intimacy Attitude Scale-Revised. The study received the approval of the Ethics Committee. There was statistically significantly less internalization of stigma of mental illness, high self-esteem and high capacity for intimacy among Jewish patients than among Muslim patients. Knowledge of how these variables affect the capacity for intimacy provides a therapeutic window for advanced nursing interventions that will eventually provide support and guidance cultural adapted, for people with schizophrenia in creating intimate relationships.

References not available.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2410>

EV1426

Psychiatric symptoms in Huntington's disease the importance of reliable information – A case report

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Introduction Huntington's Disease is an autosomal dominant neurodegenerative disease characterized by motor, psychiatric and cognitive symptoms. Irritability, affective disorders, apathy and psychosis are among the most frequent psychiatric symptoms and can predate the pre-clinical period.

Objective The authors' goal is to understand the complexity of Huntington's disease clinical presentation. Additionally, we present an illustrative clinical case.

Aims To convey the importance of collecting reliable information in order to make a proper diagnosis.

Methods A PubMed database review was performed using "Psychiatry", "Psychiatric", "Symptoms" and "Huntington's Disease" as keywords; retrieved papers were selected according to their relevance. The patient clinical record was reviewed.

Results The authors report a case of a 39-year-old woman, who was referred in 2014, to a psychiatrist because of depressive mood and suicidal ideation with two suicidal attempts in the past 5 years. However, she did not disclose her family history of Huntington's disease neither to her GP nor her psychiatrist. She never complied with the treatment plan and was admitted, in November, into a psychiatric unit because of subtle motor changes and apathy, which had resulted in personal neglect. The diagnosis could only be made after a family interview was held and the family medical history was revealed.

Conclusions Corroborative history from caregivers is of extreme importance in psychiatry. Early detection of symptoms can help mitigate the disease social impact. In our patient's case, by the time of proper diagnosis, she was estranged from her family and had endured distressing psychiatric symptoms without adequate treatment.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2411>

EV1427

Placebo and placebo effect, variability of the clinical response according to the therapists' behavior

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Introduction From a historical perspective, the first data related to the placebo effect on "mental health" date to the 1950s decade, when evidence was first shown of the important percentage of people with a psychiatric pathology that benefited from the consumption of placebos. It is believed that the responses to placebos and nocebos are influenced by the content and the way of informing the patient, which influences in the quality of life and therapy adherence. Among the factors that influence the magnitude of the placebo effect, we find variables related to the patient, with the placebo itself and the therapist.

Objectives To determine the relationship between the clinical response of a placebo and the behavior and information on the placebo contributed by the health worker.

Methodology Systemic review of the articles published in Medline-PubMed from 2005 to the present.

Results Being kind, friendly, interested, nice, emphatic, and considerate as well as having a positive attitude toward the patient and the treatment as well as the expectations of the therapist are variables that are associated to a beneficial effect in a placebo situation as well as in active treatment.

Conclusion The patient's expectations, a product of selective processing of the information that she/he receives about the effect of a placebo or active treatment, and the behavior of the health worker in clinical practice, produces variability in the symptomatic response through its influence on the magnitude of the placebo effect. In the bibliography reviewed, there is a marked lack of attention dedicated to clinical studies in the addressing of this phenomenon.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2412>

EV1428

Group therapy based on mindfulness in a mental health center

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Introduction Mindfulness is defined as the ability of paying attention to the present moment with intentionality, moment to moment without making judgments of value.

Objectives To describe the effectiveness of group therapy performed in our mental health center according to the results in the SOFI scale of patients. This scale is designed to assess different qualities, which evolve through training in meditation practice based on mindfulness.

Methods Group therapy consisted of 12 weekly sessions of an hour and a half. A total of 11 patients, 7 of which having completed therapy. The questionnaires were answered in the first and final session of therapy.

Results The questionnaire items were divided before and after treatment, into four categories with the following results: positive (friendly, happy, acceptance, compassion) to himself: 1.86 (0.54)/2.75 (0.78) and to others 3.57 (0.86)/3.89 (0.54); negative (hate, angry, cruel, bad) to himself: 2.92 (0.54)/2 (0.23); and to others: 2.28 (0.41)/1.96 (0.36)

Conclusions In keeping with similar studies, the scale shows effectiveness of therapy in all sets of items, highlighting the variation of the aspects related to himself.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2413>

EV1429

“Incomprehensibility” as an approach to the contemporary understanding-explanation dichotomy

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Background Traditionally, “understanding” is related to the comprehension of the particular and of individualities as historical unique; “explanation” is conversely related to the sciences of general laws, preferential expressed mathematically. Within the “Methodenstreit”, first method is related to an idiographic second to a nomothetic approach. This dichotomy was transferred by Jaspers into psychiatry.

Objective How the understanding-explanation dichotomy could be dialectically kept, but also surmounted in contemporary psychiatry and psychosomatics in the light of a broader concept of “comprehensibility” as dialectically opposed to “incomprehensibility”.

Method Possible steps in development of the understanding-explanation dichotomy are rebuilt historically from Neo-Kantian and hermeneutic approaches onwards. Starting from reflections on analytic action theory as well as from a critique of Cartesian dualism of substance and from the assumption of incomprehensibility, we try to state an integrative conceptual network.

Results Ways of comprehensibility and incomprehensibility as well as understanding and not understanding are explored by crossing epistemological and ontological perspectives. Four implicit categories of understanding and a dialectically built conceptual network of dimensional dualities are stated.

Discussion The methods of “understanding” and “explanation” maintain in contemporary psychiatry a heuristic importance, but not in a segregative manner. This epistemological dichotomy might be integrated in a network of superordinate dualities.

Keywords Duality; Epistemology; Understanding; Explanation; Ontology; Incomprehensibility

Disclosure of interest The author has not supplied his/her declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2414>

EV1430

Suicide attempts associated with sexual violence: Women – Ecuador

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Objective Determine the incidence of suicide attempts in women exposed to sexual violence in Ecuador.

Materials We applied a transversal descriptive study accomplished by the National Institute of Statistics and Census (INEC). The INEC recruited Ecuadorian women from 15-years-old and ahead, the surveys were focused on this population. Eighteen thousand and eight hundred (18,800) rural and urban housings were selected all over the country, 24 provinces. Date of the survey: November 16–December 15 of 2011. The sample included 737 women of several marital status (single, married and separated woman) who reported had been victims of sexual violence.

Results The average age of the sample was 28-years-old. The standard deviation was 21 years, ages: 15–25 years old: 14.265 (21.6%), 25–35-years-old: 9.324 (14.1%), 35–45-years-old: 8.132 (12.3%), 45–55-years-old: 6.283 (9.5%), 55–65-years-old: 4.302 (6.5%) and > 65 years old: 23.745 (35.9%). The incidence of women who had attempted suicide due to sexual violence was 73.95% (545 of 737 women surveyed). According to the marital status, the inci-