

**Aims** To determine whether the choice of anesthetic drugs in the case of switching influences the effect on the Hamilton depression rating scale.

**Methods** We collected data of patients who received ECT for therapy resistant depression over the past five years. Choice of anesthetics, eventually switch and the score on the HDRS before and after ECT were included. The data was statistical analyzed.

**Results** 50 patients received ECT during past 5 years. ECT gives an improvement on the HDRS in all cases, whether there was a switch or not. Switching from methohexital to etomidate when shock duration is less than 21 seconds gives a significant difference in improvement on the HDRS (BI 1.288 to 13.538) compared to patients who did not switch.

**Conclusions** There are no significant differences on HDRS effect between the different anesthetics. Switching from methohexital to etomidate gives a significant improvement on HDRS compared with no switch.

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

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#### EW0648

### Intrinsic functional connectivity of cortico-basal ganglia-thalamo-cortical circuitry underlying psychomotor retardation in major depressive disorder

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**Introduction** Psychomotor retardation (PMR) in depression is analogous to the hypokinesia in Parkinson's disease, which is associated with the unbalanced direct and indirect pathways of cortico-basal ganglia-thalamo-cortical (CBTC) circuitry. This study hypothesized PMR in major depressive disorder (MDD) should be associated with the hyperactivity of CBTC indirect pathways.

**Objectives** To substantiate the hypothesis that the PMR symptom of MDD might attribute to the hyperactivity of the cortico-basal ganglia-thalamo-cortical indirect pathway which could inhibit psychomotor performance.

**Methods** We investigated the intrinsic striato-subthalamic nucleus (STN)-thalamic functional connectivity (FC), three pivotal hubs of the indirect pathway, in 30 MDD patients with PMR (PMR group) and well matched 30 patients without PMR (NPMR group) at baseline, and 11 patients of each group at follow-up who remitted after antidepressant treatment.

**Results** The results showed increased STN-striatum FC of PMR group at baseline and no more discrepancy at follow-up, and significant correlation between PMR severity and thalamo-STN FC.

**Conclusions** Our findings suggested the increased STN-striatum FC should be considered as a state biomarker to distinguish MDD patients with PMR from patients without PMR at acute period, and thalamo-STN FC could be identified as the predictor of the PMR severity for MDD patients.

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

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## e-Poster Walk: Ethics and psychiatry/Philosophy and psychiatry/Others-Part 1

#### EW0649

### Is an isolation room harmful to patients with schizophrenia?: A biochemical study of salivary amylase

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**Introduction** Some patients with acute phase schizophrenia are too agitated to receive treatment in a normal hospital room. They must be isolated for the treatment. Although the stay in an isolation room seems harmful to patients, no study detailing the stress response to isolation with objective measures has been conducted.

**Method** Nine patients with schizophrenia or schizoaffective disorder were recruited (mean age = 52 years, male = 3, schizophrenic = 7). At the time of evaluation, they were staying in an isolation room. To evaluate stress response to the environment, the level of salivary amylase was tested when the patients were either in the isolation room (T1) or out of the isolation room (T2). T2 was defined as one hour after the room's door was opened. The data were analyzed by the Wilcoxon rank-sum test.

**Result** There is a significant difference between the median (range) levels of salivary amylase at T1 and T2 (19 [2–146] vs 44 [9–178], respectively,  $P = 0.021$ ).

**Discussion** The data demonstrate that the stress response at T2 was stronger than that at T1, which suggests that the isolation room environment is less stressful to the patient compared to being outside the room. An environment that has many potential stimuli, such as the presence of other patients and a television in the lobby, may be harmful to patients with acute phase schizophrenia. Therefore, although the isolation room is apparently harmful, it could, in fact, have a positive effect on patients.

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#### EW0650

### Outcomes of involuntary hospital admission. Satisfaction with treatment and the effect of involuntary admissions on patients

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**Introduction** Involuntary hospitalization in those presumed to be mentally ill has been a common practice. Although some patients are hospitalized for aggression, two-thirds of the patients are hospitalized because of the threat they pose to themselves. Although these patients require risk assessment and evaluation for possible presence of mental illness, the question is how much these patients will benefit from involuntary admission and what the long-term outcome would be.

**Method** All patients admitted involuntarily to the psychiatric ward in Kingston, Canada, and psychiatrists involved in their care were interviewed to see whether they think the involuntary admission was helpful. All patients were asked to fill-out MacArthur AES to assess their satisfaction with hospitalization.

**Results** Although psychiatrists frequently reported that the admission was justified, only 29 out of 81 patients reported being