Conclusions The CESQ Portuguese version demonstrated good validity and reliability, replicating research using the original version and adding to the documentation of its psychometric properties.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1576

EV1247

Help-seeking behavior among patients and their relatives presenting to psychiatric unit in southern Sri Lanka

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Background Early recognition of the signs and symptoms of psychiatric illnesses is important as the delay would predict worse prognosis.

Aims To study the help-seeking behavior and sociodemographic factors of psychiatric patients presenting to Psychiatric Unit Teaching Hospital, Karapitiya.

Methods A descriptive cross sectional study. Sample drawn from patients presenting for the first time to Psychiatric Unit Teaching Hospital, Karapitiya. An interviewer administered questionnaire was used to collect data.

Results Age ranged from 13 to 76 years (n=50). Males 34 (68%). Duration from onset of symptoms to first presentation ranged from 2 days to nine years, mean 2 years. Twenty-five (50%) had symptoms for more than one year. Sixteen (32%) stated to have attributed illness to supernatural courses as the reason to delay seeking medical help. None gave difficulty in accessing a psychiatric unit as reason for the delay. Twenty-six (52%) referred by nonpsychiatric medical professionals. Regarding alternative treatment engaged in prior to presentation to a psychiatric unit, eighteen (36%) tried to dispose of evil spirits with the help of yakaduru or kattadi, seven (14%) sought help from indigenous medical practitioners and twenty (40%) engaged in religious rituals. Thirteen (26%) sought nonpsychiatric medical treatment.

Conclusions A substantial number of patients suffering from psychiatric disorders present to psychiatric units delayed. As the majority were referred by nonpsychiatric medical professionals, alerting them regarding importance of early identification of psychiatric illnesses could help in reducing the delay.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1577

EV1248

Associations between cognition in parents with schizophrenia or bipolar disorder and their 7-year old high-risk offspring

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Introduction Neurocognitive and social cognitive impairments are central characteristics of schizophrenia and, to a lesser extent, of bipolar disorder. Birth cohorts and familial high risk studies have described cognitive impairments in subjects before onset of diagnosis as well as in children with increased genetic risk for development of the disorders.

Objectives To our knowledge, this is the first study to investigate the correlations between neurocogntion and social cognition in parents and offspring simultaneously and with the same methodology. We will divide the parents into subgroups (cognitive impairment and good cognitive functioning) and use these subgroups to describe correlations with their offspring. Identifying associations between parents and offspring can add important clues to risk factors for schizophrenia and bipolar disorder and, on the long-term, help the development of more effective and potentially preventive treatments.

Methods This study is part of the Danish high risk and resilience study–VIA7. The VIA7 cohort consists of 522 children age 7 with zero, 1 or 2 parents diagnosed with schizophrenia or bipolar disorder and both of their biological parents. We assessed neurocognition and social cognition with a comprehensive test battery including: intelligence (RIST), executive functions (WAIS-IV, D-KEFS, CANTAB), verbal memory (TOMAL2), attention, emotion recognition, decision making and response control (CANTAB), theory of mind (animated triangles) and social perception (TASIT). Parental subgroups were based on the 95% CI of the controls (cognitive impairment < 95% CI and good cognitive functioning > 95% CI). Results Data analysis is ongoing and results will be presented at the conference.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1578

EV1249

Gynecological consultations during the period of untreated psychosis

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Background Twenty-one percent of women with first episode of psychosis in the south Granada between 2008 and 2014 went to hospital emergency during the duration of untreated psychosis (DUP) aiming a gynecological consultation caused by psychotic symptoms. Only one in five was referred to mental health services. Aims To improve difficulties detecting cases during the prodromal phase, we aim to analyze the patient's profile and reasons for consultation and study whether there are variables that facilitate referral to specialist intervention.

Methods A retrospective clinical-cases review of medical histories was made searching for sociodemographic variables, drug consumption, emergency services consultations and psychotic prodromal outcomes.

Results They were single women between 18–32 years. Sixty percent reported cannabis consumption. All of them live with family. Eighty percent were studying or unemployed. Three types of emergency consultations were reported with a similar incidences: order the emergency-contraception-pill, a pregnancy test or "a scan to check virginity/a nonconsensual relationship". During the initial exploration, about 40% were under the influence of drugs.