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EW0788

The medical model of rehabilitation treatment of drug addicts with psychiatric comorbidity: Efficacy evaluation

Z. Bereza

The Saint-Petersburg State Medical University n. a. Acad. I. P. Pavlov, Department of Psychiatry and Rehabilitation, Saint-Petersburg, Russia

Introduction The medical model assumes the professional psychotherapeutic assistance at all stages of the rehabilitation process and pharmacological treatment of comorbid mental disorders.

Aim Evaluation of the efficacy of the medical model rehabilitation based on the clinical, psychological, and social characteristics of patients at the all stages of the treatment.

Subjects Eighty-five drug-addicted patients with psychiatric comorbidity. The inclusion criteria were: age above 18 years, withdrawal status. The patients were examined four times:

- 1 – during the first weeks of treatment;
- 2 – after 45 days;
- 3 – after 6 months;
- 4 – after 12 months.

Results and conclusions The primary evaluation the highest scores noted in the sections: “family and social connections”, “health status”, “psychiatric status” and “legal aspects” received lower scores. In the second measurement, the results established a significant improvement on the scale of “health status”, “mental status”, “alcohol”, “drug use” compared with original values. Early retired patients the most high-end performance observed on the scale of “drug alcohol using”, “job/livelihood”, “health status”, “legal aspects”, the “psychiatric status”, “family and social connections” recorded lower scores. Indicators on the scale of “drug use”, “alcohol” in this group of patients was significantly higher than patients who remain on treatment, which may indicate a possible updating of the attraction to the drugs. The third measurement showed a significant improvement ASI according to the all scales as compared to the previous ones. In the course of the rehabilitation process revealed positive changes in clinical, psychological and social characteristics of patients.

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EW0789

Predictive biomarkers in clozapine-treated patients: Assessment of the evidences and suggestion for research methodology

F. Cerrato^{1,*}, L. Guizzaro², P. Scudellari¹, A.R. Atti¹, D. De Ronchi¹

¹ Psychiatry, Department of Biomedical and Neuromotor Sciences, Bologna, Italy

² Second University of Naples, Medical Statistic, Napoli, Italy

* Corresponding author.

Introduction Predictive biomarkers are tools that identify a sub-population of patients who are most likely to respond to a given therapy. In order to identify them a strict methodology is necessary (RCT's studies). In consideration of its cost in economic and medical terms, predictive biomarkers would be useful to distinguish clozapine-resistant patients before its administration.

Aims The evidence concerning genetic biomarkers was reviewed with the aim of assessing whether there is enough evidence to claim for predictive biomarkers useful in practice. Secondary aims were the assessment of the evidence concerning genetic prognostic biomarkers and predictors of side effects in clozapine-treated schizophrenic patients.

Methods One hundred and twenty-eight studies, searched on the Pubmed database or referenced in other studies, were included in this review. Sixty-five papers were related to clozapine efficacy and explored 167 genetic variants.

Results Fifty-four variants were supported as prognostic biomarkers, three were successfully replicated: rs6280, rs6314 and rs4680; 49 papers were related to clozapine weight gain and explored 216 different genetic variants. Forty-five of which were positively related to weight gain during clozapine treatment. Among these 45 variants, only two, Rs3813929 and Rs779039, were successfully replicated.

Fourteen studies explored 111 genetic variants potentially correlated to Clozapine-induced agranulocytosis. Thirty-four variants were found to be associated with agranulocytosis. Five variants had positive results, successfully replicated. In particular, HLA B38.

Conclusions To date there is no evidence to support a modification of clinical practice towards predictive medicine. The research could ideally progress with RCTs involving the prognostic factors found in association studies.

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EW0790

Loss of motivation and frustration for visitor surgeons in provincial health centers or psychiatric hospitals in Greece

I. Christodoulou^{1,*}, E. Pogonidou², C. Pogonidis², C. Charalambous³

¹ G. Papanikolaou General Hospital, B'surgical Department, Thessaloniki, Greece

² Democritus University of Thrace, Master Program in Health and Safety in the Workplace, Alexandroupolis, Greece

³ General Psychiatric Hospital, Internal Medicine Department, Thessaloniki, Greece

* Corresponding author.

Introduction The core workplace for a surgeon is the operating theatre. Secondary duties may include visits to small health centers for outpatient examinations and visitor work to psychiatric hospitals.

Objective The objective of our study is to highlight the mistakes of management that lead to half-empty provincial health centers and psychiatric hospitals.

Methods Presentation of the 2-year-experience of a surgeon visitor in provincial health centers and in a large psychiatric hospital in Greece.

Results The provincial health center of Lagada needs at least 4 surgeons to serve; too many patients to be examined or/and operated in 2–3 hours only. Subsequently problems arise, as simultaneously in the emergencies department a surgical eye for an abdominal pain or a bad looking leg is needed every 15 minutes. The health center of Koufalia needs 3 hours of driving per day for 3–8 surgical patients only. The psychiatric hospital offered work for 3 surgeons 5 days a week for a long period of time. During 2012–2014, only one surgeon visited the hospital once a week. The work needed to be done may kill the surgeon or force him to receive antidepressants in order to keep his functions alive.

Conclusions Not a hint of scientific motivation for two years is a strong reason for a surgeon to avoid the duty to provincial health centers and psychiatric hospitals which is obligatory according to

our national health system Laws until two years are completed for newly appointed surgeons. Managers might encourage surgeons if some balancing convenience was offered.

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EW0791

A grounded theory of service providers' perceptions of a recovery-oriented transformation of a mental health service

G. Eikmeier^{1,*}, T. Junghans², T. Kruse², A. Lacroix¹

¹ Klinikum Bremerhaven, Psychiatry, Bremerhaven, Germany

² Klinikum Bremerhaven, Management Board, Bremerhaven, Germany

* Corresponding author.

Recovery-oriented mental health service programs are often rather based on ideological or political considerations than on empirical evidence.

At Klinikum Bremerhaven Reinkenheide, we have included peer support workers in our teams in order to improve the quality of our treatment program and the recovery attitudes of the staff members. To control and evaluate this process an independent investigator conducted 13 (T1: February 2012), respectively 15 (T2: September 2013) interviews with different stakeholders of the change process. The interviews were transcribed and analysed for the categories level of information, confidence, participation and profession/working conditions/team structure.

The main result of T1 was that nursing staff fostered the projected transformation while physicians and psychologists focused on risk management and worried about losing their role. As implication of the T1 results, we offer a continuous in-house-training to improve interprofessional teamwork and social psychiatric expertise. At T2 all interviewed participants judged the involvement of the peer support workers positively. Many of the interviewees expressed though that from their point of view their participation had decreased and/or, the reorganisation was already terminated. As implication of T2, we now try to improve our internal communication and cooperation and strengthen the involvement of all stakeholder groups.

Besides the employment of peer support workers, it is essential in a recovery-oriented transformation of mental health services:

- to train staff members continuously and;
- to involve all stakeholder groups continuously in the change management.

A third survey is projected for 2017 to implement further requirements for a successful change process.

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EW0792

Personal experiences of recovery facilitated by participation in an individual placement and support intervention

I. Gammelgaard^{1,*}, E. Stenager², L.F. Epløv³, K.S. Petersen⁴

¹ Institute of Clinical Research, University of Southern Denmark, Psychiatric Research Unit, Odense C, Denmark

² Institute of Regional Health Services, University of Southern Denmark, Research Unit of Mental Health, Aabenraa, Denmark

³ Research unit of Psychiatric Center Copenhagen, Research unit of Psychiatric Center Copenhagen, Hellerup, Denmark

⁴ Faculty of Health Sciences, University of Aalborg, Department of Health Science and Technology, Aalborg, Denmark

* Corresponding author.

Introduction Individual placement and support (IPS) is an evidence-based intervention where IPS consultants support people with severe mental illness in achieving competitive employment. IPS is a recovery-oriented intervention, but vast evidence regarding its ability to influence recovery-oriented outcomes challenges this position.

Aim To investigate how an IPS-intervention influences the personal recovery process in people with severe mental illness.

Method A qualitative phenomenological study including interview of 12 participants in an IPS-intervention. Analysis was made using a four-step phenomenological analysis method.

Results IPS contributed to personal recovery in a number of ways: The IPS consultants' ability to create an equal, acknowledging and safe relationship where participants' needs were taken into consideration in the search and support for job or education was found valuable. In combination with employment, the role of the IPS consultant contributed to normalization and stabilisation of participants' daily lives, changed their behaviours and beliefs about maintaining new achievements, personal goals and dreams.

Conclusion Individual placement and support provides opportunities to gain personal goals and contributes to stabilisation and normalization of participants' daily lives. This study supports the notion that the individual placement and support positively influences personal recovery in people with severe mental illness.

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EW0793

Healthy lifestyles programme in an acute psychiatric inpatient unit

I. Ganhaio^{1,*}, M. Trigo², A. Paixao³, J. Cardoso²

¹ Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Psiquiatria Geral e Transcultural, Qta do Anjo, Portugal

² Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Psiquiatria Geral e Transcultural, Lisbon, Portugal

³ Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Alcoolologia e Novas Dependências, Lisbon, Portugal

* Corresponding author.

Introduction Mental health issues and illnesses are associated with poor self-care and unhealthy lifestyles that contribute to morbidity, mortality and overall decrease in quality of life when compared to the general population. Healthy lifestyle promotion is infrequently considered a priority in mental healthcare services, especially in acute psychiatric inpatient units.

Objectives To present a healthy lifestyles promotion programme implemented in an acute psychiatric inpatient unit.

Aims To reflect on how to design an adequate programme for patients with complex needs.

Methods In a general psychiatric inpatient unit, a team of two psychologists and one psychiatrist, ventured to introduce weekly activities that included drawing, colouring, painting, crafts and games, that provided a context for patients and the team to sit down together or to gradually "drift" together and make possible conversations focusing on tobacco smoking, caffeine consumption, weight control, physical activity and health promoting activities.

Results Instead of individual or group psychoeducation talk interventions, play and art strategies, in closer proximity with the patients, made it far easier to engage difficult patients and made psychoeducation possible and fun.

Conclusions Patients with severe mental illness are frequently reluctant to engage in activities targeting healthy lifestyles, especially in acute psychiatric inpatient units, when insight and motivation for change may be low due to illness and consequences