

EW0460

Adult attention-deficit hyperactivity disorder (ADHD) in parents of ADHD children

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Objective ADHD is one of the most common mental disorders of childhood and adolescence, and characterized by inattention, hyperactivity, and impulsivity symptomatology. The objective of this study is to find out the difference between ADHD prevalence in parents of children with or without ADHD.

Method A total of 132 parents of 90 ADHD children; aged between 6 and 12, and 67 parents of 45 non-ADHD children were recruited in the study. Control parents were matched to ADHD children parents according to age, gender and educational status.

Results Rate of childhood ADHD were significantly higher among parents of ADHD children compared to the parents of control group ($P=0.039$). Rate of adult ADHD ($P=0.076$) was not significantly but higher among parents of ADHD children compared to the parents of control group.

Conclusion In our study, we found the prevalence of childhood ADHD in parents of children with ADHD, similar to those reported by published studies but the prevalence of adult ADHD is lower than most of the previous studies. There may be several reasons for us to find a relatively low rate of adult ADHD. Firstly, in our study only parents of ADHD children are investigated, but in the previous studies not only parents but also siblings of ADHD children are investigated. Secondly, in the previous studies adult ADHD is diagnosed according to DSM-III; not DSM-IV. Under the highlight of our findings, assessing adult ADHD in patients with having a child with ADHD is important for treatment and prognosis.

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

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EW0461

Effectiveness of psychoanalysis and long-term psychodynamic psychotherapy 10 years after start of treatmentO. Lindfors^{1,*}, P. Knekt¹, J. Lehtonen², E. Virtala¹¹ National Institute for Health and Welfare, Health Department, Helsinki, Finland² National Institute for Health and Welfare & University of Eastern Finland, Health Department, Helsinki, Finland

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Introduction The evidence of potentially greater long-term benefits of psychoanalysis (PA) in comparison to long-term psychodynamic psychotherapy (LPP) is scarce.

Aims This study aimed to compare the effectiveness of PA and LPP on different aspects of functioning and wellbeing during a 10-year follow-up from the beginning of the treatments.

Methods Altogether 169 patients were included in the study: 41 patients self-selected for PA and 128 patients assigned to LPP in the Helsinki Psychotherapy Study. The eligible patients were 20–45 years of age and had a long-standing anxiety or mood disorder causing work dysfunction. Potential confounding factors were assessed at baseline and acknowledged in analyzing outcomes in personality (LPO, IIP-64, DSQ, SASB) and social functioning (SAS-SR, SOC, Perceived competence, LSS), psychiatric diagnoses (DSM-IV), symptoms (SCL-90, HDRS, HARS), work ability (SAS-work, WAI, PPF, GAF, work status), and remission, including the use of additional psychiatric treatment, measured 5 to 14 times during the 10-year follow-up.

Results From the 5-year to the 7-year follow-up personality and social functioning improved significantly more in the PA than in the LPP group. In the domain of psychiatric symptoms and work ability practically no differences were found beyond the 5-year follow-up and at the final 10-year measurement, when psychiatric and work status was relatively good in both treatment groups.

Conclusions PA may give additional benefits especially when personality-related long-term aims are essential and less intensive treatments are not considered to be sufficient.

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EW0462

Association between ADHD and psychopathology among prison inmates

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Introduction Several studies showed that among people with ADHD, the prevalence of psychiatric co-morbidities is the rule, both in general population and in perpetrators.

Objectives To analyze the relationship between ADHD and other psychiatric symptoms among prison inmates from a high security male prison in Portugal.

Methods A total of 101 subjects aged 18–65, with at least 4 years of formal education, were interviewed for socio-demographic data and completed the ASRS-v1.1 (Adult ADHD Self-Report Scale) and the BSI (Brief Symptom Inventory). Subjects were divided into ADHD positive or negative according to their score on ASRS-v1.1, and then compared regarding BSI scores using Student's t-test.

Results Seventeen subjects scored positive for ADHD. They significantly differed from the non-ADHD group in the total BSI score ($t=-4.27, P<0.001$). When looking into the different subscales of BSI, the groups differed in the subscales of obsessions/compulsions ($t=-4.05, P<0.001$), interpersonal sensibility ($t=-3.47, P 0.001$), hostility ($t=-6.71, P<0.001$), paranoia ($t=-3.17, P 0.002$) and psychotism ($t=-3.20, P 0.002$), with the ADHD group scoring higher in all the mentioned subscales. No significant differences were found between the groups in the subscales regarding anxiety, depression or somatization.

Conclusions In line with previous work, our study showed a higher prevalence of psychopathology in prison inmates with ADHD, then in non-ADHD subjects. However, while higher prevalence of depressive and anxiety symptoms in ADHD subjects is mentioned in other studies, we found no differences between the two groups concerning those subscales. The subscales that significantly differed, point to higher prevalence of dysfunctional relationships and a higher tendency for violent behaviour in the ADHD group.

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EW0463

Factors underlying distressful and recurrent hallucinations, perceptual distortions, dissociations and impulses associated with playing video games

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Introduction Failures in cognitive and behavioural inhibition are the core of mental disorders, but they are also part of everyday life. Research on Game Transfer Phenomena (GTP) has shown that images, sounds and thoughts from the game manifest, and involuntary actions toward game-related cues are performed, after playing. GTP is generally not associated with psychopathology, substance use, distress or dysfunction but a small number of gamers reported severe GTP (i.e. different types and frequently).

Aim Understand the underlying factors (e.g. medical conditions, drugs, problematic/gaming addiction) associated with experiencing several episodes of particular GTP (e.g. hallucinations).

Methods A total of 1,782 participants who experienced GTP “many times” or “all the time” was extracted from a larger sample recruited via an online survey. The 20 GTP-related items were categorized into: (i) hallucinations, (ii) distorted perceptions, (iii) dissociations, and (iv) urges/impulses.

Results Pearson’s Chi² test showed that: (i) 18–22-year-olds were more prone to experience several episodes of GTP and females were more susceptible to hallucinations; (ii) all four categories were associated with mental disorders and distress/dysfunction; (iii) drugs were associated with almost all categories with the exception of distorted perceptions; (iv) visual disorders were associated with hallucinations and dissociations; and (v) problematic/gaming addiction was associated with all categories except urges/impulses.

Conclusions The findings suggest that individuals with mental disorders are more prone to experience several episodes of GTP, which can lead to distress/dysfunction. Substance use appears relevant but not for all manifestations of recurrent GTP. The relation between gaming disorder and GTP requires further investigation.

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

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EW0464

Shame feeling in the parents of children with diabetes mellitus

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Introduction Chronic diseases such as childhood diabetes mellitus constitute a challenge for both the affected children and their families. Childhood diabetes mellitus is characterized by complex therapeutic management and has a profound physical and psychological impact on the whole family and a number of losses for the parents.

Aim and objectives To recognize and quantify the factors affecting shame feelings for parents of children with diabetes mellitus.

Method A cross-sectional design was performed. A sample of 316 parents (110 men–206 women, mean age 40.6 years, SD=6.0 ranged 17–57) participated to the present study. The questionnaire included: (a) social-demographic characteristics, (b) The Other As Shamer Scale (OAS), (c) The Experience of Shame Scale (ESS). SPSS for Windows 20.0 was used for the statistical analysis.

Results Age and the place of residence of the parents, the duration and the severity of disease were identified as significant multivariate factors on internal and external shame.

Conclusion Feeling of shame consist a significant psychological burden of the parents with children suffering from diabetes mellitus. Screening for psychological distress in parents of children is indicated, and preventive interventions are needed, targeted according to the increased needs as suggested in the research results.

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

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EW0465

The experience of shame in patients with chronic obstructive pulmonary disease (COPD)

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Introduction It is reported in global literature that Chronic Obstructive Pulmonary Disease (COPD) may cause a wide range of psychological effects, some of them not fully explored. The aim of this study is to investigate if patients with COPD experience intense feelings of shame.

Objectives To find differences in shame experience between males and females, and if there is a correlation of shame with other socio-economic factors.

Method Using the “Experience of Shame Scale” questionnaire (ESS) in 191 patients with COPD (104 men and 87 women) treated in Primary Health Care services in Greece.

Results Statistical analysis showed relatively low scores (M 39.5 sd 14.9) for the experience of shame in COPD patients. There is no statistically significant difference of shame for marital status, education level or disease stage. Statistically significant difference shown between males and females (bodily shame *P*: 0.001, total shame *P*: 0.031), and between smokers and those who quit smoking. (characterological shame: *P*: 0.007 behavioral shame *P*: 0.030, total shame *P*: 0.009). Also statistically significant difference appears for bodily shame among Body Mass Index (BMI) groups (*P*: 0.009) and economic status of the patients (*P*: 0.008).

Conclusions Patients with COPD seem to have not heavy burden with experience of shame. Any associations of shame with some patient groups are rather expected for cultural and social reasons.

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EW0466

Deficits in mentalization predict suicide risk among psychiatric inpatients

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