

are effective in early recognition of aircrew who may attempt or complete the murder-suicide and putting into practice these to optimize the use of limited resources, is therefore essential and necessary.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2261>

EV1277

Clinical morbidity at pregnancy: The role of previous suicidal attempts and repetition

M.J. Soares^{1,*}, S. Bos¹, A.T. Pereira¹, M. Marques¹, B. Maia², A. Macedo¹

¹ Faculty of Medicine, University of Coimbra, Department of Psychological Medicine, Coimbra, Portugal

² The Catholic University of Portugal, Braga Regional Centre, Faculty of Philosophy, Braga, Portugal

* Corresponding author.

Introduction Previous suicide attempts are a consistent risk factor for suicide. Repetition has been associated with higher future morbidity and suicidality.

Aim To examine the relationship between psychological variables at pregnancy and previous repetition of suicidal attempts, first attempts and absence of attempts.

Methods The sample comprise 568 third trimester pregnant women, mean aged 29.82 years (SD = 4.55; variance = 17–44). Previous suicidal behaviors were assessed with diagnostic interview for genetic studies, depression with PDSS and BDI-II, and affect with POMS. Current suicidal thoughts were assessed with PDSS dimension: hopelessness and helplessness by summing the scores of the POMS items hopeless/gloomy; and lonely/helpless, respectively.

Results Repeaters (R; *n* = 11, 1.9%) scored higher than non-repeaters (NR; *n* = 20, 3.5%) in most of the clinical variables, but only significantly in sleeping/eating disturbances (PDSS).

R and NR when compared to women who never attempted suicide (NA; *n* = 535, 94.5%) both revealed significant higher levels of depressive/hostility affect (POMS), BDI-II total score, suicide ideation, guilt/shame (PDSS) and anxiety/insecurity or anxiety/somatic (PSDD or BDI-II).

In comparison with NA, R also revealed significant higher levels of negative affect (POMS), PDSS total score, loss of self, mental confusion (PDSS), cognitive and affective symptoms, fatigue (BDI-II), hopelessness and helplessness. NR also differs from NA in their higher emotional lability (PDSS).

Conclusion Women with previous suicide attempts are at elevated risk for high depressive symptoms, negative affect and suicide ideation at pregnancy. Compared to never attempters, repeaters revealed high morbidity than first attempters. The intervention in pregnancy must carefully assess previous history of suicide attempts.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2262>

EV1280

Suicide risk assessment and prevention interventions in military veterans

A. Teo

VA Portland Health Care System, HSR&D, Portland, USA

Introduction Concerns over suicide among military veterans has been as issue of major public and policy concern, particularly by the Veterans Health Administration (VHA), which is the largest integrated health care system in the United States.

Objectives and aims The reasons for suicide risk and means to reduce risk in this population have been under active investigation and implementation. The aim of this presentation is to review recent trends in suicide risk assessment and suicide prevention interventions within the VHA in the United States.

Methods A literature review consisting of an electronic database search of PubMed, “gray literature” search, and manual search for articles related to suicide in military personnel and veterans was conducted.

Results In recent years, annual VHA rates of completed suicide have ranged from approximately 34 to 40 suicides per 100,000 person-years, rates significantly higher than the general US population. Risk assessment methods examined in military veteran populations have primarily included self-report instruments, scales, and checklists. Recently, “big data” approaches to analysis of electronic medical records have shown promise in stratifying veterans into high- and low-risk groups. VHA suicide prevention initiatives have included extensive staff hiring, development of research centers and data-sharing agreements focused on suicide, a national telephone crisis line, routine suicide risk assessment and screening, and suicide safety plans.

Conclusions Military veterans in the US receiving care in the VHA have a variety of risk factors for suicide and continue to be at elevated risk despite implementation of numerous suicide prevention initiatives.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2265>

EV1281

A new evidence-based neuropsychological model of suicidal propensity and suicide based in depression

L.-H. Thorell

Linköping University, Linköping, Sweden

Introduction Objectively validated models of the depressed suicide are lacking. Early observations that electrodermal hyporeactivity was strongly related to suicide in depression required an untraditional statistical approach that was applied on materials from published materials with between themselves totally confirming results.

Objectives A plausible explanation model of the relationship had to be developed.

Aims The aims were to investigate the nature of electrodermal hyporeactivity and its possible causes and connections to other suicide relevant factors and to formulate a coherent model of the depressed suicide.

Methods Published materials with in- and outpatients (in total > 900 patients) comprising follow-up of suicide and tests of habituation of the electrodermal response were analysed. Symptomatology, gender, age and other variables were considered and so were knowledge and theories from other scientists.

Results The apparent loss of or considerably reduced specific electrodermal orienting (curiosity) responses in future depressed suicide victims showed clear relationships to and clear independence of considered important suicidal factors.

Conclusions Loss of specific orienting responses indicates loss of hippocampal CA3 plasticity. CA3 areas are early and centrally positioned in the information processing of neocortical sensory input supporting the hypothesis of a particular neuropsychological dysfunction disabling normal cognitive and emotional curiosity reactions to everyday events. It is proposed that this dysfunction may make the depressed person ready to leave the everyday life and fearless of imminent pain – a loss of two important barriers against suicide.

It seems righteous to propose this basically objectively validated model as a plausible explanation of the depressed suicide.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2266>

EV1283

Predictors of suicidal behaviour persistence and recurrence

I. Untu^{1,*}, N. Cartas², M. Mutică³, B.A. Ciubară⁴, A. Ciubară¹, C. Roxana¹

¹ UMF Iasi, Psychiatry, Iasi, Romania

² Socola, Institute of Psychiatry, Iasi, Romania

³ UMF Craiva, Psychiatry, Iasi, Romania

⁴ UMF Iasi, Iasi, Romania

* Corresponding author.

Introduction Suicidal behaviour represents a global public health issues; personal suicidal history is the most common predictor of the persistence and recurrence of suicidal ideation and behaviour in general.

Objective This paper proposes to elaborate a synthesis of the scientific literature, concerning the main predictive factors of the persistence and recurrence of suicidal behaviour, considering that the current diagnostic criteria available fail to make a distinction and to specify clearly the differences between all psychiatric disorders without self-harming behaviour and the same nosological entity accompanied by suicidal behaviour.

Materials and methods I conducted a literature review, by analyzing the data concerning the predictors of the persistence and recurrence of self-harming behaviour, obtained from articles published between January 2013 and January 2015. I browsed the PubMed website, by keywords such as suicide, suicidal risk, suicide predictor, persistent suicidal ideation, and suicidal behaviour recurrence.

Results The scientific literature underscores that that entrapment and defeat are two elements often neglected; however, they should be a priority criterion, alongside traditional predictive factors, such as the following: gender, age, history of suicide attempts, socio-familial status, etc. All of these factors must be considered within the complex endeavour of assessing suicidal risk. However, there is still only scarce validated data concerning the mechanism that leads to entrapment and the one that determines its relation with self-harming behaviour.

Conclusions This paper proposes to synthesize the current data concerning suicide predictors, in order to obtain new research assumptions. The final purpose is to develop proper preventive and therapeutic approaches.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2268>

EV1284

Risk factors for attempted suicide: A prospective study on psychiatric consultations in the emergency room

A. Venesia^{1,*}, I. Coppola¹, C. Gramaglia¹, D. Marangon¹, S. Di Marco¹, C. Delicato¹, E. Gattoni¹, G.C. Avanzi¹, L. Castello¹, F. Bert², M.R. Gualano², R. Siliquini², E. Torre¹, P. Zeppegno¹

¹ Università del Piemonte Orientale, Translational Medicine, Novara, Italy

² Università degli Studi di Torino, Public Health and Paediatric Sciences, Torino, Italy

* Corresponding author.

Introduction Studies conducted on Italian samples suggested that 70% of self-harms referred to the emergency room (ER) were suicide

attempts. Suicide attempts are associated with societal, relationship and individual risk factors, which vary with age and gender, occur in combination, and may change over time. We conducted a previous study on a sample of psychiatric consultations in ER from 2008 to 2011. We observed that female gender, a permanent job and being in the warmer months of the year were risk factors for suicide attempts.

Aim To update knowledge about risk factors for attempted suicide analyzing a larger sample of ER psychiatric consultations.

Methods Determinants of emergency room visits for psychiatric reasons were studied prospectively in a period of 8 years, from 2008 to 2015 at the “Maggiore della Carità” Hospital in Novara. The psychiatric assessment of patients was performed by experienced psychiatrists with a clinical interview. For each patient, a data sheet was filled in order to gather demographic and clinical features. Comparison of qualitative data was performed by means of the Chi² test while differences between groups for continuous variables were assessed through a *t*-test. Statistical significance was set at $P \leq 0.05$. A multivariate analysis was performed using logistic regression in order to assess the potential predictors of attempted suicide. Results are expressed as odds ratio (OR) with 95% confidence intervals (95% CI).

Conclusions We have collected data from more than 500 psychiatric consultations for attempted suicide. Data collection and statistical analyses are still ongoing. Implications will be discussed.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.2269>

EV1285

Are suicidal thoughts in adolescents dependent on substance abuse?

M. Wypiór^{1,*}, A. Sobieraj², A. Salomon-Perzyński², W. Dyrda², K. Krzyżowska², A. Matusiak², K. Paluch², M. Seweryn², M. Janas-Kozik²

¹ Katowice, Poland

² Medical University of Silesia, Clinical Ward of Psychiatry and Psychotherapy of Developmental Age, Paediatric, Clinic Jan Pawel, Sosnowiec, Poland

* Corresponding author.

Substance abuse is common issue in youth and may influence youth's suicide thoughts or actions. It can lead to social isolation, low self-esteem, loss of work or school, estrangement from family and friends – all these may create a core of stresses that may lead to suicidal tendencies.

Analysis addictive factors correlating with occurrence of suicidal thoughts and behaviours among adolescents at the age of 18–20. Study was based on authorial, previously validated questionnaire, included 16 questions about suicidal thoughts. Questionnaires were filled by adolescents (age 18–20) of 21 Secondary Schools in Katowice.

From the group of 965 adolescents, 28.8% had suicidal thoughts. From all respondents: 31.3% smoked, 92.7% drunk alcohol, 16.0% used legal highs and 30.9% – drugs; 35.8% of smoking adolescents had suicidal thoughts. In group of non-smoked adolescents – 25.6%. There was statistical significant difference ($P=0.0012$) between these groups. Among adolescents who drunk alcohol, 28.8% had suicidal thoughts. In the group of non –drinking alcohol adolescents – 27.9%. There was no statistical significant differences ($P=0.88233$) between these groups. There were 43.7% adolescents with suicidal thoughts who used legal highs. In the group of non-users of legal highs, 26.0% adolescents had suicidal thoughts.

Adolescents that are using examined stimulants are in the group risk of suicidal thoughts and autodestructive behaviours. Results show the need of psychiatric and psychotherapeutic support that is aiming to prevent suicides and autodestructive behaviours in this group. Screening questionnaires that are assessing the problem of