

development of intimate relationships that may help patients leaving an unhelpful isolation condition.

Increase the awareness of different sexual and affection aspects: physiological, anatomic and reproductive, relational and communicative, emotional, social and cultural, playful and pleasant ones. The 18 meetings interventions were done using a psychoeducational model; an active leading group manner (role plays and simulations) was used in order to ease the exchange of views between patients and the group leader.

We did a first round of meetings with ten patients who participated actively; we also submitted to them a questionnaire – before and after the intervention – in which we collected knowledge and opinions about different themes (contraceptives, risk awareness, affective relationships etc.).

From a qualitative analysis of the results we saw a knowledge-improvement about the dealt themes, and also, in some cases, we identified a modification in some problematic behaviours. The sample it's still too small for statistical analysis.

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EV1122

Emotional management training in residential mental health services

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A core element for the treatment of psychiatric patients in mental health services is the Psychosocial Rehabilitation. In this work we mainly refer to a training whose targets are fundamental components of the Emotional Intelligence (EI), which is, according to the original Salovey and Mayer's definition (1990), "a set of skills hypothesized to contribute to the accurate appraisal and expression of emotion in oneself and in others, the effective regulation of emotion in self and others, and the use of feelings to motivate, plan, and achieve in one's life".

The purpose of this study is to evaluate the efficacy of Emotional Management Training and to compare our emotional management assessment to standardized emotional intelligence assessment instruments.

Twenty adult inpatients (from 18 to 55 years of age) were enrolled: ten subjects were assigned to a one year lasting emotional management training (clinical target group) and ten subjects were assigned to a clinical control group; furthermore twenty subjects were selected and assigned to a non-clinical control group. Outcome measures were: emotional management assessment, Schutte Emotional Intelligence Scale (SEIS) and Toronto Alexithymia Scale (TAS-20).

Emotional management assessment outcomes confirm the efficacy of emotional management training. Preliminary results also confirm the effectiveness of the assessment compared to standardized emotional intelligence scales.

Emotional management training improves psychiatric patient competence in terms of: emotions definition and acknowledgement, self-emotion identification, self-emotion sharing, management of stressing situation and intense emotions.

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

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Research methodology

EV1124

Does clinical change always means the same? Comparison of different perspectives

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Introduction In psychiatric practice, the assessment of change from pre- to post-treatment is a key approach for monitoring treatment effects and for the prediction of treatment outcomes. The Health of the Nation Outcome Scales (HoNOS) as a clinician-rated measure and the Brief Symptom Inventory (BSI) as a self-report measure are tools (that are) often incorporated in outcome monitoring. Their usefulness, however, has been questioned by two important issues: their psychometric properties and their lack of concordance.

Aims and objectives The aim of the study is to evaluate the responsiveness of HoNOS and BSI as well as their interactions to predict clinical meaningful change according to the Global Clinical Impression (CGI) as quasi-gold standard for treatment outcome.

Methods A consecutive sample of patients admitted to a Swiss psychiatric hospital for either alcohol use disorders, schizophrenic psychoses, mood disorders, anxiety and somatoform disorders, or personality disorders was assessed with Brief Symptom Inventory (BSI) at admission and discharge. The HoNOS and the CGI were rated by the responsible clinicians at admission and discharge. Ordinal logistic regressions will be conducted using the CGI categories as ordered categorical outcome. HoNOS and BSI scores as well as their interaction terms will be used as independent variables.

Results and conclusion Complete data of admission and discharge is available from approximately 600 cases. Graphical presentations will illustrate the resulting associations.

Keywords Clinical Global Impression; Health of the Nation Outcome Scales; Brief Symptom Inventory; Outcome monitoring; Ordinal regression

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

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Descriptive study of the treatment of delusional disorder. Survey study DELIRANDA

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Introduction We currently lack clinical guidelines for the treatment of Delusional Disorder (DD) F-22, the low prevalence of the disease coupled with no awareness of illness and poor adherence to prescribed treatment make it difficult to study. The limited evidence available for the treatment is based mainly on clinical series. *Objectives* This study evaluates the knowledge and preferences in the treatment of the DD, in order to improve clinical practice and gain information of the DD to conduct clinical studies of effectiveness of the different treatments.

Material and methods A self-administered survey was conducted on a sample of 80 psychiatrists proceeding on a wide array of mental health care services. Participants provided socio-