[2] _Chonnam National University Medical School, Department of Obstetrics and Gynecology, Gwang-ju, Republic of Korea_
∗ _Corresponding author._

Background This research aimed to identify the effects of depressive mood of female high school students on dysmenorrhea and sleep quality.

Methods This research was conducted for 2 months from September 2015 to October 2015. A total of 3 types of self-reported questionnaire were adopted for the research. Control group was separated by Zung Self-rating Depression Scale (ZSDS). Each group adopted a self-made questionnaire for research on menstruation and Pittsburgh Sleep Quality Index (PSQI) for research on sleep. Chi^2 test and AVOVA analysis through SPSS-21 were used as statistics methods.

Results Analysis was made on 72 female students who submitted clear answers to the questionnaire. There were 34 students from normal mood group and 38 from depressive mood group. Depressive group presented meaningful results on regularity, pain severity, and drug treatment history of menstruation. Particularly, depressive group had 51.4% among subjects having severe menstrual pain of grade 3 by VMS (verbal multidimensional scoring system), way higher than 27.6% among subjects in the normal group. PSQI for sleep showed a meaningful result that 20.8% of those in the normal group were diagnosed with sleep disorder compared to 86.8% for the depressive group. A meaningful difference was seen in sleep latency, sleep duration, sleep disturbance, use of sleep medication, daytime functional disturbance among 7 items of PSQI.

Conclusion This research showed that female high school students with depressive mood had high frequency and severity in dysmenorrhea and sleep quality disturbance.

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

EV1356

Women coping strategies to infertility stress can impact IVF outcome

B. Kitanovic[1,∗], L. Tulic[2]
[1] _"Zvezdara", PHC, Belgrade, Serbia_
[2] _Clinic of Obstetric and Gynecology Clinical Center of Serbia University of Belgrade, Invitro Fertilization Unit, Belgrade, Serbia_
∗ _Corresponding author._

Infertility is defined as a failure to achieve a pregnancy after a woman has attempted to get pregnant for more than 12 months. The impact of psychosocial factors on IVF outcome is a growing field of research. This is the first study estimating the impact of psychosocial stress and women coping on IVF outcome in Serbia. The aim of this pilot investigation was to assess the influence of psychological factors on the outcome of in vitro fertilization in Serbian women. Psychometric tests were administered at the first visit to 100 women undergoing IVF treatment at Clinic of Gynecology and Obstetrics, Clinical centre of Serbia, University of Belgrade, Serbia. We used questionnaire that covered key demographic and obstetric information and Serbian version of COMPI test, specially designed test measuring stress in infertility, as well as, Zung Depression Self-Rating Scale and Beck Anxiety Inventory. Results of pregnant and non-pregnant group were compared. In the cohort of Serbian women, it has been remarked that they predominantly use active confronting coping style. We found statistically significant differences ways of coping styles between pregnant and non-pregnant group. Women from the pregnant group had significantly lower scores of marital distress, and significantly higher use of meaning-based coping styles. It is found that the use of active avoidance coping correlates negatively with the level of depression and personal, marital and social distress. Clinicians should be aware that infertility is a stressor itself and that coping strategies can influence

IVF outcome. Therefore, psychosocial assessment should be a part of an IVF unit.

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

EV1357

Women coping strategies to infertility stress can impact IVF outcome

B. Kitanovic[1,∗], L. Tulic[2], I. Soldatovic[3]
[1] _PHC Zvezdara, Mental Health Unit, Belgrade, Serbia_
[2] _Institute for Gynecology and Obstetrics, Clinical Centre of Serbia University of Belgrade, IVF Unit, Belgrade, Serbia_
[3] _Institute for Statistics, Clinical Centre of Serbia, University of Belgrade, Belgrade, Serbia_
∗ _Corresponding author._

Infertility is defined as a failure to achieve a pregnancy after a woman has attempted to get pregnant for more than 12 months. The impact of psychosocial factors on IVF outcome is a growing field of research. This is the first study estimating the impact of psychosocial stress and women coping on IVF outcome in Serbia. In the cohort of Serbian women, it has been remarked that they predominantly use active confronting coping style. We found statistically significant differences ways of coping styles between pregnant and non-pregnant group. Women from the pregnant group had significantly lower scores of marital distress, and significantly higher use of meaning based coping styles. It is found that the use of active avoidance coping correlates negatively with the level of depression and personal, marital and social distress, and total fertility distress. Clinicians should be aware that infertility is a stressor itself and that coping strategies can influence IVF outcome. Therefore, psychosocial assessment should be a part of an IVF unit.

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

EV1358

Examining the person X situation interactions of internalized traits, state body affect and upward comparison behaviour

A. Rogers[1], V. Lewis[2], I. Krug[3,∗], M. Fuller-Tyszkiewicz[4]
[1] _Deakin University, Psychology, Melbourne, Australia_
[2] _University of Canberra, Psychology, Canberra, Australia_
[3] _University of Melbourne, Psychology, Melbourne, Australia_
[4] _Deakin University, Deakin University, Melbourne, Australia_
∗ _Corresponding author._

Objective Although the influence of trait internalization and state body satisfaction on appearance comparisons has been well documented, their interactive influence on comparison behaviours is unknown. Therefore, the present study thus tested a person X situation model in which both mood state and trait internalization interacted to predict engagement in upward comparisons.

Method One hundred and forty-eight women aged 18 to 40 completed baseline measures of trait internalization, and then completed via iPhone app an experience sampling phase in which they reported momentary experiences of mood and comparison behaviours at up to 6 random times daily for 7 days.

Results Multilevel analyses revealed that although upward comparisons were more likely for individuals who internalized the thin ideal ($t = 3.27$, $P < .001$), this effect was minimized in instances when a participant was satisfied with her appearance ($t = -1.90$, $P = .031$). Further exploratory analyses showed that state body satisfaction was a stronger predictor than trait internalization of comparison behaviours ($R^2 = .14$ vs. $R^2 = .11$) when the time lag between state

body satisfaction and comparison event was less than 2 hours, but this pattern reversed as the time lag between state level predictor and outcome increased beyond 2 hours ($R^2 = .09$ vs. $R^2 = .12$).

Conclusions Present findings suggest that bolstering one's body satisfaction in the moment may be as clinically important as reducing a client's interest in the thin ideal for alleviating occurrence of unhealthy body comparisons.

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EV1359

Post-partum psychosis

F. Leite [1,*], O. Campos [2], H. Salgado [3], P. Carvalho [3]
[1] Matosinhos, Portugal
[2] Hospital de Magalhães Lemos, Departamento de Psiquiatria, Matosinhos, Portugal
[3] Hospital de Magalhães Lemos, Departamento de Psiquiatria, Porto, Portugal
* Corresponding author.

Introduction Postpartum psychosis (or puerperal psychosis) is a term that covers a group of mental illnesses with the sudden onset of psychotic symptoms following childbirth. A typical example occurs when after childbirth, a woman becomes irritable, has extreme mood swings and hallucinations with the possibility of needing psychiatric hospitalization. Often, out of fear of stigma or misunderstanding, women hide their condition.

Aims and objectives To review the evidence regarding prophylactic treatment and acute management of postpartum psychosis and affective disorders in the puerperium.

Methods Online search/review of the literature has been carried out, using Medline/Pubmed, concerning "postpartum psychosis", "postpartum", "mental disorders", "mania" and "depression".

Results Postpartum psychosis is a rare and severe psychiatric condition requiring rapid restoration of health in view of significant risks to both mother and the infant. The known risk factors and negative consequences of postpartum psychosis point to the importance of preventive and acute treatment measures. The majority of patients who develop psychosis immediately following childbirth suffer from bipolar disorder.

Conclusions Understanding the relationship between postpartum psychosis and affective disorders has implications for perinatal and long-term treatment. The rapid and accurate diagnosis of post-partum psychosis is essential to expedite appropriate treatment.

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

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EV1360

Pregnant patients admitted to an inpatient psychiatric unit: An 18-months' experience

A. Ozdemir [1,*], D. Bulanik [1], C. Aksoy-Poyraz [2], E. Cirakoglu [1], S. Enginkaya [1], N.B. Tomruk [1]
[1] Bakırkoy Mazhar Osman Research and Training Hospital for Psychiatry, Neurology A, Psychiatry, Istanbul, Turkey
[2] Cerrahpasa Faculty of Medicine, Istanbul University, Psychiatry Department, Istanbul, Turkey
* Corresponding author.

Objective Our aim was to describe demographic data of pregnant patients admitted to an inpatient psychiatric unit and analyze treatment preferences for acutely ill pregnant patients.

Methods A prospective chart review was carried out to identify pregnant patients who admitted to the inpatient unit during the period April 2014–September 2015. Details regarding their sociodemographic, clinical, and treatment data were obtained from these records for the study.

Results The total number of pregnant patients, admitted to our psychiatry inpatient clinic during the survey period was 15. The mean age of the patients was 30.33 (with a range of 21–38 years). Two thirds of the patients were hospitalized in the 1st trimester. Bipolar disorder (46.6%) was the most common diagnosis, followed by psychotic disorder (33%), and unipolar severe depression (20%). Eleven patients (67%) out of 15 had a psychiatric illness before getting pregnant. It was found that premenstrual syndrome was reported by 60% of patients. Haloperidol was the most frequently used psychotropic drug for the treatment of psychotic disorders and bipolar manic episodes.

Conclusion The information regarding the course of bipolar disorder in pregnancy is controversial. While some studies support the opinion that pregnancy appeared to have a protective effect against an increase in symptoms, others stress that the risk for relapse in the pregnancy period is high. It is noteworthy that the majority of our patients are bipolar patients in the 1st trimester. The abrupt cease of mood stabilizer use may lead to recurrence in bipolar disorder.

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EV1361

The role of mindfulness in lifetime history of depression: A study in Portuguese pregnant women

J. Azevedo [1,*], E. Bento [1], S. Xavier [1], M. Marques [1,2], V. Freitas [1], M.J. Soares [1], A.M. Pinto [1,3], M. Bajouco [1,2], A. Macedo [1,2], A.T. Pereira [1]
[1] Faculty of Medicine, University of Coimbra, Psychological Medicine, Coimbra, Portugal
[2] Coimbra Hospital and University Centre, Psychiatry, Coimbra, Portugal
[3] Faculty of Psychology and Educational Sciences, CINEICC, Coimbra, Portugal
* Corresponding author.

Introduction Despite the empirical support for the effects of mindfulness based interventions for recurrent depression (Velden et al., 2015), the literature on the relation between Mindfulness and Lifetime History of Depression/LTHD are scarce.

Objective To compare Mindfulness levels between women with vs. without LTHD and to analyze if mindfulness dimensions are significant predictors of LTHD.

Methods One hundred and twenty-seven pregnant women (mean age: 32.56 ± 4.785 years) in their second trimester of pregnancy (17.34 ± 4.790 weeks of gestation) completed: Facets of Mindfulness Questionnaire-10 (FMQ10; Azevedo et at. 2015) assessing the dimensions non-judgement of inner experience/NJ, ACt with awareness/AA and observe and describe/OD; a new self-report questionnaire developed to evaluate the presence of LTHD, with several "Yes/No" questions, based on DSM-5 criteria for depression.

Results Ninety-seven (23.0%) women had LTHD. Bisserial Spearmen correlations between LTHD and FMQ scores were significant, negative and moderate ($> .30$, $P < .01$); only OD did not significantly correlated with LTHD. Independent sample *T*-test revealed that women with vs. without LTHD had significantly higher levels of total FMQ-10, NJ and AA (all $P < .001$). Logistic regression analysis showed that the model containing FMQ-10 explained 12.7–18.8% of the LTHD variance and correctly classified 77.9%; the OR was of 1.19 (95% CI .801–.886; Wald = 44.504; $P < .001$). The model composed by NJ and AA explained 15.5–23% and correctly classified 76.5%. NJ OR was of 1.23 (CI .734–.884; Wald = 20.806; $P < .001$) and AA OR was of 1.41 (CI .708–.903; Wald = 13.004; $P < .001$).