

also known to contribute to cardio-vascular disease and reduced life expectancy. Department of Psychiatry in Aabenraa, Denmark participates in a nation-wide Danish project supporting efforts to reduce coercion and restraint. Our hypothesis is that reduction of coercion might lead to unwanted increase in doses of psychotropic medication.

**Objective** To document the use of psychotropic medication during the project period, in order to learn more about the impact of interventions to reduce coercion and restraint on psychopharmacological treatment.

**Aim** To compare type and doses of psychotropic prescriptions during the project period with the time before implementation.

**Methods** Cohort study of patients in risk of agitation and coercion admitted to the wards during first quarter of 2013 and 2016. Eligible patients were diagnosed as having organic mental disorders, substance abuse, psychotic disorders, mania, bipolar affective disease or personality disorders (ICD-10: F0x, F1x, F2x, F30-31, F60). Primary outcome is the exposure to antipsychotic medication measured as defined daily doses, and secondary outcomes are exposure to benzodiazepines, polypharmacy and compliance with guidelines on agitated patients.

**Results** Data collection is carried out during autumn of 2016, and the results will be presented at the congress.

**Conclusions** Results from this study will contribute to our understanding of the implications of the initiative to reduce restraint and coercion in psychiatry. The results will also sharpen our awareness of possible inexpedient practice.

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#### EV0631

### Psychological effects of working night shifts on mental health

A. Kchaou<sup>1</sup>, M. Hajjaji<sup>1</sup>, R. Masmoudi<sup>2</sup>, I. Sellami<sup>1</sup>, M.L. Masmoudi<sup>1</sup>, J. Masmoudi<sup>2,\*</sup>, K. Hammami Jmal<sup>1</sup>

<sup>1</sup> CHU Hedi Chaker Sfax, occupational medicine, SFAX, Tunisia

<sup>2</sup> CHU Hedi Chaker Sfax, psychiatry, SFAX, Tunisia

\* Corresponding author.

**Introduction** The medical and scientific communities are continually reporting that night work can increase the risk of certain disorders and have a negative impact on the overall well-being of employees.

**Objectives** This study wanted to examine the impact of night work on physical and psychological well-being of hospital staff.

**Methods** We carried out a cross-sectional study about a representative sample of hospital staff. We used validated self-reporting instruments: the Perceived Stress Scale (PSS) and the Subjective Well-being Scale (SWS). Data were analyzed using SPSS-20.

**Results** Our study concerned 519 hospital staffs. More than half were male (53%) and 83.1% had worked in the same position for more than two years. More than half of the participants (51.3%) considered themselves in very good health. Also 41.5% of participants had a well-being index reduced and 26% of personal had high perceived stress. Correlation analysis had shown that more than one guard at week was associated with high levels of perceived stress ( $P=0.004$ ) and well-being index reduced ( $P=0.000$ ). After adjusting for categories, more than one shift work at week was associated to well-being index reduced with odds ratios of 1.57 (confidence interval 95% [1.07 to 2.30]).

**Conclusion** There is a clear correlation between night work, perceived stress and subjective well-being of different categories of hospital staff. Shift work interferences on health and well-being are complex and multifaceted in their origins and time manifestations, dealing with several aspects of personal characteristics, and working and living conditions.

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

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#### EV0632

### A meta-analysis of cognitive training on memory functioning in normal elderly adults

S. Piryaei\*, M. Khademi Ashkzari

Alzahra university, educational psychology, Tehran, Iran

\* Corresponding author.

**Introduction** The major issues in cognitive literature related to memory and aging concentrate on the different methodological issues in research examining the effectiveness of memory training programs in improving memory performance of older adults along with the clinical implications of this kind of research.

**Objectives** The review will address how researchers differ within their collection of participants, the various aspects of memory intervention programs by a systematic review on recent researches.

**Aims** The present study aims to review the cognitive literature related to memory and aging through a meta-analysis in recent years.

**Method** Meta-analysis was conducted of researches on memory training interventions for cognitively normal/healthy older adults published in 1995–2014. Computerized databases (e.g PsychInfo) were searched using combinations of these key words in English: memory, mnemonic, rehabilitation, older adult, aging, elderly and impairment. All participants must be at least 55 years old at the time of training/intervention. Due to the fact and Studies must have used a non-pharmacological approach toward memory or memory problems. Between-study heterogeneity was quantified using  $\chi^2$  and I2 statistics. All analyses were performed utilizing the CMA2.

**Results** Effect sizes with 95% confidence intervals for each study indicated that the overall pre-post training gain was 0.37 SD (95% CI: 0.18, 0.47) and the mean retest effect among control groups was 0.11 SD (95% CI: -0.11, 0.16) and this difference was statistically significant ( $P < 0.001$ ).

**Conclusion** The key challenge of memory training studies is that they often don't train abilities that generalize to everyday functioning. These results have numerous clinical and practical implications.

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

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#### EV0633

### Mental health of management staff in the closed environment of construction

N. Kornetov\*, O. Pushpusheva

Siberian State Medical University, Psychiatry, Addiction and Psychotherapy, Tomsk, Russia

\* Corresponding author.

**Introduction** it is difficult to overestimate the role of social, cultural and environmental conditions in evaluation of psychological health in hard intellectual work.

**Objectives** Research of construction staff in far taiga conditions using PHQ и GAD-7.

**Aims** to investigate the correlation between major depressive disorder, anxiety and somatoform disorders and gender and marital status.

**Methods** we studied 119 people who live in concentrated social environment and in conditions of hard work and lack of relaxation. In order to study depression, anxiety, and somatoform disorders we used PHQ и GAD-7 rating scale.

**Results** we noted that distribution of depression according to gender has statistically significant differences. In the men group the number of depressive individuals is 5 (11.1%;  $P < 0.01$ ). In the women group the number is 28 (37.8%;  $P < 0.01$ ). Also it was stated, that marital status does not influence the distribution of depressive symptomatology level ( $P > 0.05$ ). Distribution of anxiety symptoms significantly differs by gender. In the group of men anxiety observed in 1 patients (2.2%;  $P < 0.05$ ), whilst in the group of women – in 13 patients (17.6%;  $P < 0.05$ ). Gender proved to be irrelevant in the occurrence of somatoform disorders ( $P > 0.05$ ); it is also not dependent on marital status ( $P > 0.05$ ).

**Conclusion** Staff employed into hard working social environment experience a range of negative psychological effects such as depressed mood, fatigue, and insomnia. Lack of leisure and lack of time for walking cause dissatisfaction with life, which contributes to the development of depression, anxiety and somatoform disorders.

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

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#### EV0634

### Aspects of recovery and resilience—factors enabling an independent and fulfilling life

J. Krieger<sup>1,\*</sup>, V. Rößner-Ruff<sup>2</sup>, D. Hoins<sup>2</sup>, I.T. Graef-Calliess<sup>2</sup>

<sup>1</sup> *Klinikum Warendorff, Forschung und Entwicklung, Sehnde, OT, Ilten, Germany*

<sup>2</sup> *Klinikum Warendorff GmbH, Forschung und Entwicklung, Sehnde, OT, Ilten, Germany*

\* Corresponding author

**Introduction** The concept “recovery” takes the position that individuals with severe chronic psychiatric disorders can recover and establish a certain degree of mental stability that can enable an independent and fulfilling life. To sustain recovery different variables and interdependent factors are needed, f.e. psychological resilience and empowerment. Actually, there are few studies focusing on the interdependency of recovery and resilience in patients with severe chronic psychiatric disorders, especially with an emphasis on overall psychiatric diagnosis and a longitudinal section.

**Objective** The study examines residential patients with severe chronic psychiatric disorders who lived in a long-term care institution for psychiatric rehabilitation (SGB XII) in Lower Saxony and who were able to move out and live by themselves in 2016. Persons with mental retardation and patients who have spent more than 30 years in a long-term care institution will be excluded.

**Methods** Randomised controlled trial based on a mixed-methods-design and a longitudinal course (5 follow-ups within 24 months after the first interview).

**Aims** Investigate factors for independent living on different levels (like micro, meso, macro) with focus on recovery and resilience by patients with severe chronic psychiatric disorders.

**Results** First results of a pilot study and focus groups will be presented.

**Conclusion** Results of investigation should be used in different subject areas like identification of factors enabling independent living and creation of effective therapy interventions for patients with severe chronic psychiatric disorders who have lived in a long-term care institution.

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

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#### EV0635

### The effects of a brief educational programme added to community mental health treatment to improve patient activation and attendance: A randomized controlled trial

M. Lara-Cabrera<sup>1,\*</sup>, M.B. Nasset<sup>2</sup>

<sup>1</sup> *St Olavs University Hospital, Department of Psychiatry, Tiller CMHC, Trondheim, Norway*

<sup>2</sup> *Faculty of Medicine, Norwegian University of Science and Technology, Department of Neuroscience, Trondheim, Norway*

\* Corresponding author.

**Introduction** Though interest grows in improving patient activation in general medical health services, there is little evidence from randomised controlled trials in mental health settings of how to achieve this.

**Objective** We aimed to evaluate the effects of a brief pre-treatment peer-co-led educational intervention added to mental health treatment. The intervention was developed and carried out in cooperation with user representatives, peer educators and health professionals, and aimed at activating and preparing patients to participate in own treatment.

**Aims** To assess the 4 months and 12 months effects on patient activation measure-13 (PAM-13) and attendance.

**Methods** Patients from two community mental health centres were randomised to a control group (CG,  $n = 26$ ) receiving treatment as usual, or an intervention group (IG,  $n = 26$ ), consisting of four-hour group pre-treatment educational seminar (peer-support and encouragement to adopt an active role) followed by treatment as usual.

**Results** At 4 months follow-up only the IG improved significant on PAM-13. Preliminary results at 12 months on PAM-13 and attendance will be presented.

**Conclusion** Brief pre-treatment education improves patient activation at 4 months and could potentially have an effect on attendance at 12 months follow-up.

**Practice implications** Pre-treatment education co-led in cooperation with user representatives, peer educators and health professionals is a rational and easy way to activate and engage outpatients in their own health care process.

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#### EV0636

### Health education in caring for an individual with psychic suffering: An experience report

E.M.B. Lira<sup>1,\*</sup>, A.O. Silva<sup>2</sup>, L.J.M. Santos<sup>2</sup>, Y.L. Vasconcellos<sup>2</sup>, E.E.L. Paiva<sup>2</sup>, G.K.G.D. Bittencourt<sup>2</sup>, F.P. Silva<sup>2</sup>, T.J.S. Teófilo<sup>3</sup>, S.C. Vasconcelos<sup>2</sup>

<sup>1</sup> *Procupe Hospital, surgical ward, Recife, Brazil*

<sup>2</sup> *Federal University of Paraíba UFPB, Nursing, João Pessoa, Brazil*

<sup>3</sup> *Universitary Hospital, Nursing, João Pessoa, Brazil*

\* Corresponding author.

**Introduction** Integral nursing for an individual with a mental disorder requires care, management and educational skills to improve the quality of life of the patient.

**Objectives** Describes a health education experience in caring for an individual with psychic suffering.

**Methods** Activities were developed at a psychosocial care center in the city of João Pessoa, Brazil, with students in the third year of nursing school. Three sessions were held on the topic “self-efficacy in the use of psychoactive drugs”. Related factors, such as motiva-