important in maintaining healthy habits and lifestyle in line with what is taught in a nursing degree.

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EV0924

Integrated identification of new substantional gadget addiction: With selfie-mania phenomenon model

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Introduction   Modern selfie-infatuation extent went far beyond fashion and subculture causing distinct tendency to non-chemical addiction state transformation requiring evidential scientific identification.

Aims and objectives   To develop clinical-psychological and classification basis for new type of gadget addiction (selfie-mania), prevention and approaches to mental correction and rehabilitation.

Method   Selfie attitude testing of 157 respondents-students, and internet resources topical data analysis were done.

Results   Behaviour models were rubricated, design and content, causes, clinical-psychological description, selfie-phenomenon prevalence were clarified. It allows to state selfie-addiction specific key symptoms, conforming to ICD-10 diagnostic criteria for addiction states:

– psychological and emotional supercomfort feeling during realizing selfie-interventions (substantional analogue of euphoria phenomenon caused by psychoactive substances in narcology);

– desire for permanent updating and layouting in social networks selfie-portraits, selfie-positions (impulse control disorder analogue);

– selfie-modifying need causing adrenaline extreme and life threat (analogues: compulsive craving, megadoses, overdosages, amnesias);

– obsessive craving to increase daily number of selfie-shots (tolerance syndrome analogue);

– constant foreshortening change of selfie-interventions (analogue: experimentation with different psychoactive substances, searching behaviour);

– selfie-destruction psychopathological consequences (neurotism, mental and behavioural disorders, group pattern of behavioural selfie-deviations);

– formation of associated comorbid chemical and other substantional addiction forms;

– selfie-deprivation syndrome (analogue: alcohol or drug withdrawal syndrome);

– interdisciplinary range of problems (professional sphere of study for sociologists, psychologists, neurologists, psychiatrists, narcologists, psychotherapists, sexopathologists, lawyers).

Conclusions   Selfie-addiction problem recognition is necessary on the level of inclusion to ICD, that will allow to develop scientific, legal and clinical base for integrated prevention, rehabilitation and treatment.

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

EV0925

Selfie as a method of perception of the virtual environment

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Nowadays selfie is one of the significant communication methods in the conditions of the developing internet space.

Goal   The study of psychological mechanisms motivating perception of internet space via selfie.

Objectives   The identification of:

– The personal-social necessity in selfie, as a method of the virtual world perception;

– The factors of personal-social necessity of the virtual communication via selfie;

– The personal features, which contribute to self-presentation in virtual space via selfie.

Research methods   One hundred and thirty-four respondents aging between 16–28 (1st group: 68 respondents fond of selfie (50.8%), 2nd group: 66 respondents not fond of selfie (49.2%)) were studied using standardized scales of anxiety (Spilberger-Hanin), depression (Zung), ego-defense mechanisms (EGMs)-(Plutchik-Kellerman-Konte), and life quality (WHO, 1991).

Results   Desire of high evaluation dominates in 47.8% of respondents ($r = 0.3$; $P < 0.01$). Fifty point seven percent of the 1st group and 13.4% in 2nd group have heightened anxiety ($r = 0.3$; $P < 0.01$). Forty-three point two percent in 1st group and 23.9% in 2nd group don't have depression.

Subdepressive level dominates in 19,4% of 2nd group ($r = 0.36$; $P < 0.01$), against 11.9% of 1st group.

In 1st group dominate: denial (17.9%), projection (16.4%), regression (7.5%); in 2nd group: denial (17.9%), intellectualization (13.4%), projection (7.5%) ($P < 0.05$). Forty-four point eight percent in 1st group and 40.3% in 2nd group have a high level of EGM stress ($P < 0.05$). Forty-six point eight percent in 1st group have high level of subjective life quality, 0% had low one; in 2nd group: 26.9% have high level, 13.4% low one.

Conclusions   Personal-social necessity of virtual space perception via selfie reflects the severity of narcissistic tendencies. Selfie in conditions of illusory reality increases the subjective level of life quality. Isolation of narcissistic personality from communication through selfie suggests subjective decrease of life quality. Effects of the selfie should be considered in the development of rational methods of use of internet-technologies and in the psycho-correction of people with low life quality.

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EV0926

Cross-national trainee collaboration-The EFPT research experience in psychiatry

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