

## EV0668

**Suicidal ideation among international medical students studying medicine in Romania**A.D. Buzoianu<sup>1,\*</sup>, C.A. Popescu<sup>2</sup><sup>1</sup> UMF CLUJ NAPOCA IULIU HATIEGANU, Department of Pharmacology- Toxicology and Clinical Pharmacology, Cluj-Napoca, Romania<sup>2</sup> University of Medicine and Pharmacy “Iuliu Hatieganu”, Department of Abilities-Human Sciences, Cluj-Napoca, Romania

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**Background** The burden of mental health impairment in medical students is an important research subjects. Evidence shows that medical students have a higher prevalence of symptoms of depression and anxiety than the general population. A number of studies regarding suicidal ideation among medical students have been carried out, but this topic has largely been ignored in regard to international medical students coming from Western European countries studying medicine in Eastern European countries. Suicidal ideation is the early symptom of suicidal actions. The students are the most vulnerable and easily influenced by cases of suicide, especially in a closed group with little connections with the general population like the international students.

**Objectives** Following 2 suicides in our university, we aim to measure the prevalence of suicidal ideations in international students.

**Methods** Overall, 150 medical students from the French section studying at the University of Medicine and Pharmacy “Iuliu Hatieganu”, Romania, were evaluated for symptoms of depression using BDI and for suicide ideation using Beck HS.

**Results** Suicidal ideation was present in 28.57% of the French international medical students. Depression and the lack of social support had a significant relationship with suicidal ideation.

**Conclusions** Suicide is a serious issue that has to be dealt with immediately. It is important to assist medical students who are considering the possibility of committing suicide, so that they overcome their difficulties. There is a need to identify the prevalence of suicidal ideation among medical students and for student counselling.

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## EV0669

**Homelessness and immigrants: In front of the border between Spain and France**F. Calvo<sup>1,â^</sup>, C. Giralt<sup>2</sup>, C. Xavier<sup>3</sup><sup>1</sup> FPCEE Blanquerna, Universitat Ramon Llull, Cas Girona, Barcelona, Spain<sup>2</sup> Institut DâL(tm)Assistencia Sanitaria, Cas Girona, Girona, Spain<sup>3</sup> FPCEE Blanquerna, Universitat Ramon Llull, Psychology, Barcelona, Spain

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**Introduction** In 2006, prior to the worldwide economic crisis which especially affected Western countries, Southern Spain was one of the illegal immigrant gateways from Africa into Europe. The aim of this study is to establish the rate of homeless immigrants in a cohort of 2006 and carry out a follow up until 2015 in order to explore the chronicity associated to the territory.

**Methods** Sample: 949 persons experiencing homelessness in Girona, according to official records. Procedure: prospective longitudinal study of the total population of homeless people in Girona. In 2006, a list was made of all the homeless people detected by both specialised and nonspecialised teams, which have been followed until the present day. Instruments: data bases of different official teams. Statistical analysis: measures of central tendency and dis-

persion and contingency tables were used for the comparison of qualitative variables.

**Results** Overall, 64.8% of the population of Girona are immigrants ( $n=614$ ), principally from the Maghreb, ( $\chi^2=36.9$ ,  $df=4$ ,  $P<.001$ ) and 333 (36.3%) are autochthonous. The percentage of homeless immigrants in relation to the total immigrant population was 4.4%. Comparing the homeless autochthonous population with the total of the autochthonous population, homelessness among autochthonous population was 0.4%.

**Conclusions** The results suggest that homelessness was more incidental in the immigrant group than in the autochthonous group. The percentage of immigrants who still live in homeless conditions suggests that immigration is a risk factor in the chronicity of the problem.

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## EV0670

**Migrants and psychosomatic symptoms: An evaluation in an emergency centre**M. Perito<sup>1,\*</sup>, R.M. Calia<sup>2</sup>, G. Carpentieri<sup>1</sup>, S. De Guglielmo<sup>1</sup>, G. Del Buono<sup>3</sup>, V. Fasano<sup>1</sup>, N. Fiorentino<sup>4</sup>, R. Napolitano<sup>1</sup>, M. Forgione<sup>2</sup>, D. Scotti<sup>2</sup>, B. Solomita<sup>2</sup>, F. Franza<sup>4</sup><sup>1</sup> Neamente Neuroscience Association, Neuroscience, Avellino, Italy<sup>2</sup> You Think Association, Psychology, Avellino, Italy<sup>3</sup> University of Salerno, Psychiatry, Salerno, Italy<sup>4</sup> Neuropsychiatric Centre “Villa dei Pini”, Psychiatry, Avellino, Italy

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**Introduction** In recent years, there has been an increase in migration in Europe. Particularly, Italy has been one of the most important landing place. Currently, migrants in the province of Avellino, South Italy city, amount to about 1400, housed in 40 facilities in 23 municipalities. Psychological interest on migration and its impact on lifestyle patterns has increased in recent years.

**Objectives** There are few studies that evaluated the frequent psychosomatic symptoms in these populations. Despite the trauma experienced, they are not able to give a name to the suffered and somatized pain.

**Aim** Assessment of somatic symptoms reported by the immigrant cohort after a three-month observation period.

**Methods** We included 50 migrants (21.3 mean years) hosted in emergency centre in Avellino, Italy. All guests have conducted psychological clinical interviews. At baseline, were administered following scales: the patient health questionnaire (PHQ-9); Illness Behaviour Inventory (IBI); Symptoms checklist-90-Revised (SCL-90-R) scale. Same data was collected after three months.

**Results** The migrant group was a heterogeneous group. Overall data on IBI and PHQ-9 scale indicate a statistically significant variation baseline vs deadline Data of IBI scale is statistically significant [T-Score: 3,921;  $P: 003$ ]; also with PHQ-9 [T0 vs. T1: T-Score: 3,986;  $P: .003$ ]. Similar results have been found with SCL-90-R.

**Conclusions** In their vocabulary, terms such as anxiety, sadness, fear exist hardly. They tend to minimize the psychological pain, not because I do not feel, but because move it on the body. They have difficulty to talk about emotions, not just a matter of culture and language, but also because they are ashamed.

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