

clinical services across Italy. A part of the sample was also assessed for psychopathology through the use of DASH-II, PDD-MRS and clinically diagnosed in accordance to DSM-IV-TR and DSM-5 criteria.

Results SPAID internal consistency, inter-rater reliability and concordance with DASH-II and PDD-MRS resulted to be good. Around 40% of the sample was assessed to have a cluster of psychopathological symptoms that could be consistent with a psychiatric diagnosis. Autism, impulse control disorder and personality disorder resulted to be the most frequent over threshold scores.

Conclusions The SPAID-G seems to be a valid and cost-effective screening tool for the psychiatric assessment within the Italian population with ID.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.289>

0068

Traumatic experiences affect negative emotion processing in bipolar disorder

G. Sepede^{1,2,*}, F. Gambi¹, D. De Berardis³, G. Di Iorio⁴, M.-G. Perrucci¹, F. Ferretti¹, R. Santacroce¹, G.-L. Romani¹, M. Di Giannantonio¹

¹ University "G. d'Annunzio", Department of Neuroscience – Imaging and Clinical Sciences, Chieti, Italy

² University "A. Moro", Department of Basic Medical Sciences – Neurosciences and Sense Organs, Bari, Italy

³ National Health Trust, Department of Mental Health, Teramo, Italy

⁴ National Health Trust, Department of Mental Health, Chieti, Italy

* Corresponding author.

Introduction Patients affected by bipolar disorder type I (BD-I) show a significant emotional impairment during both acute and euthymic phases of the illness, but the influence of negative life experiences is not yet fully understood.

Objectives Aim of the present study was to investigate the role of previous traumatic events on negative emotion processing in euthymic BD-I patients.

Methods Eighteen euthymic BD-I patients, 7 reporting past traumatic events (T-BD-I), but free of post-traumatic stress disorder (PTSD) symptoms at the moment of the evaluation and 11 never exposed to traumas (NT-BD-I), were compared to 24 not traumatized controls (NC). All participants performed a IAPS-based emotional task: they were required to identify vegetable items (targets) among neutral or negative pictures. Accuracy (percentage of correct responses) and mean reaction times (RT) were recorded.

Results T-BD-I performed similarly to NC and significantly better than NT-BD-I in terms of accuracy (Fig. 1). No significant between-group effects were observed for mean RT.

Conclusions A previous history of traumatic events, without current PTSD symptoms, may significantly impact the negative emotion processing in euthymic BD-I. Interestingly, traumatized patients showed a better accuracy when processing both neutral and negative images, thus suggesting that paying more attention to external stimuli may be a successful compensatory mechanism to cope with potential environmental threats.

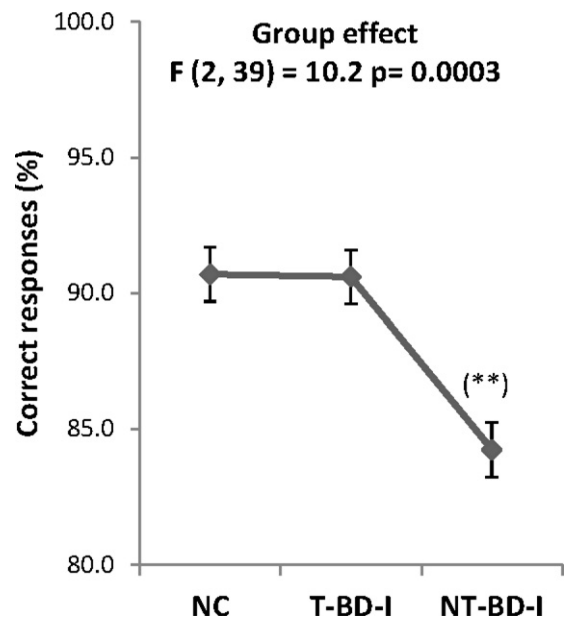


Fig. 1

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.290>

0069

A simple composite dynamic digital tool to communicate complex physical and mental health needs and measure outcomes: The Cornwall health radar

R. Shankar*, C. Quick, J. Dawson, P. Annal
Cornwall Foundation NHS Trust, ID neuropsychiatry, Truro, United Kingdom

* Corresponding author.

Introduction Clinician-patient communication is a major factor in influencing outcomes of healthcare. Complexity increases if an individual has multiple health needs requiring support of different clinicians or agencies.

Aim To develop and evidence a simple dynamic computerised tool to capture and communicate outcomes of intervention or alteration in clinical need in patients with multiple chronic health needs.

Method A MS Excel algorithm was designed for swift capture of clinical information discussed in an appointment using pre-designed set of evidenced based domains. An instant personalized single screen visual is produced to facilitate information sharing and decision-making. The display is responsive to compare changes across time. A prototype was conceptually tested in an epilepsy clinic for people with Intellectual disability (ID) due to the unique challenges posed in this population.

Results Evidence across 300 patients with ID and epilepsy showed the tool works by enhancing reflective communication, compliance and therapeutic relationship. Medication and appointment compliance was 95% and patient satisfaction over 90%.

Conclusion To discuss all influencing health factors in a consultation is a communication challenge esp. if the patient has multiple health needs. A picture equals 1000 words and helps address the cognitive complexity of verbal information. The radar offers an evidenced based common framework to host care plans of different health conditions. It provides individualised easy view person centred care plans to allow patients to gain insight on how the dif-