

Table 2 Anova de un factor.

		Suma de cuadrados	gl	Media cuadrática	F	Sig.
VAS-Estado General	Inter-grupos	30,732	1	30,732	11,130	.001
	Intra-grupos	1057,566	383	2,761		
	Total	1088,299	384			
VAS-Tristeza	Inter-grupos	56,243	1	56,243	12,401	.000
	Intra-grupos	1768,803	390	4,535		
	Total	1825,045	391			
VAS-Ansiedad	Inter-grupos	54,240	1	54,240	10,990	.001
	Intra-grupos	1924,856	390	4,936		
	Total	1979,096	391			
VAS-Irritabilidad	Inter-grupos	75,259	1	75,259	16,349	.000
	Intra-grupos	1799,877	391	4,603		
	Total	1875,136	392			
VAS-Suspiciacia	Inter-grupos	54,046	1	54,046	13,210	.000
	Intra-grupos	1575,197	385	4,091		
	Total	1629,243	386			
WURS-Total	Inter-grupos	73861,396	1	73861,396	99,158	.000
	Intra-grupos	291250,457	391	744,886		
	Total	365111,852	392			
WURS-Conduc_Animo y Relaciones	Inter-grupos	52876,903	1	52876,903	107,177	.000
	Intra-grupos	193398,227	392	493,363		
	Total	246275,129	393			
WURS-Problemas médicos	Inter-grupos	.000	1	.000	.000	.996
	Intra-grupos	5538,020	394	14,056		
	Total	5538,020	395			
WURS-Escolar y académico	Inter-grupos	1853,124	1	1853,124	33,557	.000
	Intra-grupos	21647,434	392	55,223		
	Total	23500,558	393			
WURS-25	Inter-grupos	27981,082	1	27981,082	97,259	.000
	Intra-grupos	113064,979	393	287,697		
	Total	141046,061	394			
Lista Exploratoria Sintomas_Actual	Inter-grupos	12167,433	1	12167,433	145,597	.000
	Intra-grupos	33594,951	402	83,570		
	Total	45762,384	403			
ListaExpSint_Life	Inter-grupos	3602,132	1	3602,132	123,442	.000
	Intra-grupos	11672,316	400	29,181		
	Total	15274,448	401			
BDI-21 Items	Inter-grupos	6709,604	1	6709,604	81,068	.000
	Intra-grupos	31864,463	385	82,765		
	Total	38574,067	386			

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EV391

**ADHD “Symptomatic contamination” in dual pathology (II): Specific analysis of the “Sym.Con” sample**

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**Introduction** The general data of this sample were presented in “ADHD symptomatic contamination in a Dual Pathology (I): General Analysis of the Sym.Con Sample”. We evaluated the presence of symptomatic contamination by ADHD in a SUD group compared with a group of non-consumers adults (parents of children treated in a CAP unit).

**Objective and aims** Describe more specifically the peculiarities of the sample Sym.Con according to the type of substance consumption (Alcohol [n = 65], Cocaine [n = 48], Cannabis [n = 49] assessing the presence of ADHD symptomatic contamination.

**Methods** We use different Visual Analogical Scales plus the WURS, BDI, and Exploratory Lists of symptoms of ADHD.

**Results** As can be seen in Tables 1 and 2, the subgroup of Alcohol has a poorer “scalar” status with worse general state, more sadness and anxiety, being the subgroup of cocaine the most “suspicious”. The presence of ADHD-symptomatic contamination is more noticeable in the Cannabis subgroup.

**Conclusions** ADHD symptomatic contamination in our Sym.Con sample is frequent, being the cannabis subgroup the more

contaminated one. More studies that corroborate the results obtained in this sample are required.

Table 1 Informe.

Subgrupo de Patógeno	VAS-Estado General	VAS-Tristeza	VAS-Ansiedad	VAS-Irritabilidad	VAS-Suspiciacia	WURS-Total	WURS-25	Lista Exploratoria Sintomas_Actual	ListaExpSint_Life	BDI-21 Items
Cocaina	Media	4,83	5,84	4,98	5,40	4,96	96,94	45,72	23,98	12,67
	N	41	41	44	44	41	47	47	48	48
	Desv. Stp.	2,907	2,793	3,115	2,721	2,601	26,646	17,465	12,311	6,366
Alcohol	Media	4,58	6,22	6,26	6,29	5,99	98,93	44,50	24,45	12,50
	N	65	65	65	65	59	61	64	64	65
	Desv. Stp.	2,091	2,382	2,812	2,777	2,506	28,481	17,241	10,305	6,154
THC	Media	4,88	5,18	6,24	6,41	6,16	105,35	51,43	22,37	12,84
	N	49	49	49	49	49	49	49	49	49
	Desv. Stp.	2,279	2,530	3,578	2,715	2,763	28,222	18,868	8,885	5,157
Total	Media	4,74	5,57	5,90	6,08	5,63	93,12	46,90	21,89	12,45
	N	155	158	158	158	155	157	161	161	162
	Desv. Stp.	2,224	2,588	2,798	2,758	2,634	28,392	17,868	10,620	6,817

Table 2 Anova de un factor.

		Suma de cuadrados	gl	Media cuadrática	F	Sig.
VAS-Estado General	Inter-grupos	2,805	2	1,403	,281	,755
	Intra-grupos	758,930	152	4,993		
	Total	761,736	154			
VAS-Tristeza	Inter-grupos	46,915	2	23,458	3,615	,029
	Intra-grupos	1005,733	155	6,489		
	Total	1052,649	157			
VAS-Ansiedad	Inter-grupos	51,603	2	25,802	3,416	,035
	Intra-grupos	1170,907	155	7,554		
	Total	1222,510	157			
VAS-Irritabilidad	Inter-grupos	28,552	2	14,276	1,898	,153
	Intra-grupos	1165,563	155	7,520		
	Total	1194,115	157			
VAS-Suspiciacia	Inter-grupos	29,388	2	14,694	2,150	,120
	Intra-grupos	1038,951	152	6,835		
	Total	1068,339	154			
WURS-Total	Inter-grupos	5066,828	2	2533,414	3,255	,041
	Intra-grupos	118289,843	152	778,223		
	Total	123356,671	154			
WURS-25	Inter-grupos	1521,146	2	760,573	2,393	,095
	Intra-grupos	48954,421	154	317,886		
	Total	50475,567	156			
Lista Exploratoria Sintomas_Actual	Inter-grupos	20,911	2	10,455	,095	,909
	Intra-grupos	17351,077	158	109,817		
	Total	17371,988	160			
ListaExpSint_Life	Inter-grupos	22,540	2	11,270	,319	,727
	Intra-grupos	5579,361	158	35,312		
	Total	5601,901	160			
BDI-21 Items	Inter-grupos	784,402	2	382,201	3,758	,025
	Intra-grupos	16172,222	159	101,712		
	Total	16956,623	161			

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EV392

**Comorbidity between delusional disorder and depression. Results from the DelirAnda case register**

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**Introduction** Comorbidity between two or more mental disorders is highly frequent. Depression is one of the diseases that more often accompanies other conditions.

**Objectives** The objective of this study is to establish the prevalence of depression in patients with delusional disorder and describe the treatment used in these cases.

**Aims** The aim is to provide useful information regarding this frequent, often disregarded, comorbidity.

**Methods** Our results proceed from the Andalusian delusional disorder case register. We reviewed 1927 clinical histories of patients diagnosed of delusional disorder. Upon having verified the diagnosis, following DSM-V criteria, we recollected several data, including

sociodemographic factors, depression comorbidity and antidepressive treatment.

**Results** One thousand four hundred and fifty-two patients matched DSM-V delusional disorder criteria. 49,8% of our sample were women. Average following period was 9 years and 1 month, with an average of 0,84 hospitalizations. The prevalence of depression in patients with delusional disorders was 31,9%. 67,5% of them received some kind of antidepressive treatment. The antidepressive drugs most frequently used were selective serotonin reuptake inhibitors.

**Conclusions** Depression is a highly prevalent condition among patients with delusional disorder. Most of them are on antidepressive treatment, the most employed of which is based on selective serotonin reuptake inhibitors. Comorbid depression can have an important impact on the course of delusional disorder. A correct diagnosis and treatment should be made to help improve the prognosis and life quality of these patients.

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

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### EV393

#### Anxiety disorders and substance abuse

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**Introduction** Patients with anxiety disorders are more vulnerable to develop other comorbid conditions. In particular, large epidemiological studies show a strong association between different anxiety disorders and substance use disorders.

**Objectives** To show the prevalence of major anxiety disorders and the consumption of different substances. As well as the particular characteristics of this dual diagnosis and treatments that have proven more effective.

**Methods** Exhaustive review of all the material published on this topic in the recent years.

**Conclusions** Nearly 24% of patients with anxiety disorder suffer from a comorbid substance disorder use in their lifetime (17.9% diagnosis of alcohol abuse or dependence diagnosis and 11.9% of abuse or dependence on other drugs). Dual patients show a number of distinctive features, such as more frequency in males, family history of alcohol or other substances abuse and behavioral problems, early parental loss among others.

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

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### EV394

#### Dual diagnosis (Depression and addictions): Special considerations

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**Introduction** Dual diagnosis is a growing problem in Western society, despite which there are no large studies examining this issue, nor specific protocols to address them.

**Objectives** To raise awareness of the importance of dual diagnosis both its prevalence and special features that presents need a different performance plan from them separately.

**Methods** Comprehensive literature review of all published in the last 2 years, as well as the specific features.

**Conclusion** Dual diagnosis has very specific characteristics that we must know in order to develop therapeutic strategies adapted to the present conditions.

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

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### EV395

#### Health-related quality of life in patients with moderate-severe psoriasis: Preliminary results on the role of psychopathology and coping strategies in a cohort of patients

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Psoriasis is a multisystem inflammatory disease associated to several comorbidities with a significant impact on interpersonal and social life. Depression, anxiety symptoms and suicidal ideation—due to psychological distress—are frequently reported. The aim of the study was to assess whether psychological factors—psychopathology, perceived health status and coping strategies—together with clinical and sociodemographic factors, were independent predictors of Quality of Life (QoL) in adult psoriatic patients on topical and/or systemic pharmacological therapy. A cohort of 87 patients (53 M and 34 F), whose mean age was 46 ± 22 years, was analyzed. Coping responses were assessed by COPE and general psychopathology by Self-Reported-Symptom Inventory Revised (SCL-90), while HAM-D and HAM-A evaluated depressive and anxiety symptoms. In addition, perceived health status and QoL were analyzed by Short-Form-36 (SF-36) while the disease's burden assessed by PSODISK. Univariate analyses were performed for each variable to explore the relationship with QoL. Preliminary results indicated that, although not severe, anxiety and depressive symptoms were the most reported among patients along with somatization and obsessive-compulsivity. Female patients used more frequently mental disengagement, focus on and venting of emotions, use of instrumental social support and religious coping. Physical pain and mental health, instead, greatly affected QoL of subjects in a negative manner. PSODISK data analysis showed that general health, itching, serenity, shame and degree of extension of the disease on the skin were the most compromised areas. Moreover, correlation analysis indicated that a worse perception of patients' health status was associated to poor QoL.

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### EV396

#### Epilepsy and self-esteem

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**Introduction** Epilepsy is a public health problem that often affects personal and social patients' life. Self-esteem, an important factor contributing to psychosocial well-being, is generally disrupted in epilepsy.