Method A cross-sectional study of 189 female university students using paper-based Bar-On Emotional Quotient Inventory: Youth Version was conducted. BarOn EQ-i:YV consists of 7 sub-scores which estimate various domains of emotional intelligence along with general mood. The academic achievement was assessed via self-reported Grade Point Average (GPA).

Result The average Intrapersonal score of participating students was 14.9 ± 3.4 and Interpersonal was 41.7 ± 4.9 . The students scored 32.0 ± 5.0 in stress management scale and 31.9 ± 4 in adaptability. The lowest score achieved in the Emotional Inelegance scale was 32.5 whereas the top score was 71.3. The average general mood was 47.1 ± 6.4 and the positive impression ranged between 6 and 23 (17.3 ± 2.8). Positive week correlations were defined between the GPA and self-efficacy (r=0.13) and Adaptability (r=0.08) though these correlations were statistically insignificant (P>0.05). Linear regression model showed that domains of Bar-On scale could explain up to 33% of changes in GPA (R^2 =0.33) with significant effect of self-efficacy, adaptability and general mood scores (P<0.05).

Conclusion Medical students showed high level of emotional intelligence which positively affect their academic achievement. Therefore, improving the emotional intelligence domains can help students improving their academic achievement.

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EV1537

Gender differences in response to psychological treatment for social anxiety disorder in those with comorbid drug dependence

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Introduction Individuals with social anxiety disorder do poorly in residential treatment programs for the treatment of drug dependence. This is not surprising given the social nature of residential rehabilitation where group work and close social interactions are required.

Objectives Given the social nature of residential rehabilitation, we were interested in exploring whether we could address social anxiety symptoms prior to treatment entry and therefore enhance the likelihood that an individual would enter treatment and stay in treatment.

Aims To conduct a randomised control trial to evaluate whether treatment of social anxiety symptoms prior to treatment entry improves treatment entry and retention.

Method Treatment seeking substance users (n = 105) completed intake assessment interviews for entry into a residential rehabilitation program. Assessment comprised the Mini International Neuropsychiatric interview (Mini), the alcohol, smoking and substance involvement screening test (ASSIST), the Liebowitz Social Anxiety Scale (LSAS). Participants were randomised to either a foursession social anxiety intervention or treatment as usual (which was to remain on the waiting list until treatment entry). A survival analysis was conducted to examine whether the intervention impacted on treatment retention.

Results The treatment did not significantly impact on treatment but the intervention group were significantly more likely to remain in treatment and this effect was only found in women.

Conclusion For individuals with social anxiety disorder brief evidence based intervention focused on ameliorating social anxiety

symptoms (e.g., cognitive behavioural treatment) may improve the retention in treatment. This effect appears to be gender specific. *Disclosure of interest* The authors have not supplied their declaration of competing interest.

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EV1538

Group art therapy for the management of fear of giving birth

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Introduction Fear of giving birth may affect many pregnant women. Fear of childbirth leads to an increase in C-section demands and the ratio of C-section births. Group therapy addresses at least 8 people at the same time, which both saves time and treatment expenses.

Objectives The objective of this study was to evaluate the impact of group art therapy for the management of fear of giving birth.

Methods Thirty women volunteers in the third trimester of pregnancy who were attending a public women's hospital and who had fear of giving birth were included in the study. They were randomly distributed to 2 groups. First group (n=15) received 6 sessions of group art therapy. Second group (n=15) received 6 sessions of psychoeducation regarding fear of giving birth. Each weekly psychotherapy session lasted 130 minutes.

Results By the end of the six weeks Beck depression scale (BDS) scores, Beck Anxiety Scale (BAS) scores and Wijma delivery expectancy/experience questionnaire version A (W-DEQ) scores decreased significantly in the group art therapy group (P < 0.001). In contrast, the psychoeducation group showed no significant changes in terms of BDS, BAS, W-DEQ scores.

Conclusions Our study shows that group art therapy may be a promising cost-effective treatment method to manage fear of giving birth in pregnant women. The study needs to be replicated in women coming from different cultures and socioeconomic statuses to establish group art therapy for the treatment of fear of giving birth.

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EV1539

Early maladaptive schema domains in the first day of menses and 15 days after the menses in healthy volunteers

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Introduction Premenstrual syndrome (PMS) symptoms may affect the physical, psychological and social lives of many women of the reproductive age group. Most women report being extrasensitive and have difficulties with emotional regulation and some patients report worsening of their psychiatric symptoms during the premenstrual period. Early maladaptive schemas (EMS) are developed early in childhood and may remain dormant until they are activated by situations relevant to the particular schema.

Objective We hypothesized that some of the psychological symptoms of PMS may be related to EMS activation and that this activation is due to the hormonal changes of the menstrual cycle.

Aims Our aim was to measure any changes regarding the EMS domains between the first day of menses and 15 days later.

Methods One hundred and ten women from an architectural and engineering firm were enrolled in the study. After ruling-out psychopathology with Symptom check-list-90-R, remaining women (n=65) filled out young schema scale short form (YSS-SF) on the first day of menses and 15 days after menses. The time of probable ovulation was defined as 15 days after the first day of menses.

Results YSS-SF scores regarding the schemas of defectiveness, insufficient self-control, failure to achieve, vulnerability to harm or illness were significantly decreased by the 15th day of menses

(P<0.05). Abandonment, social isolation, dependency, enmeshment and self-sacrifice schema scores remained similar on the first and 15th days.

Conclusions EMS activation may contribute to the PMS symptoms, therefore schema therapy may be an option for those women suffering from PMS.

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