(n=290). We re-evaluated in the postpartum with Edinburgh Depression Scale and selected those with subsyndromal depressive symptoms (\geq 7.5) (n=57). Clinical, demographic and functional data were collected.

Results A total of 50.7% had RF. A percentage of 48.6 had family history of mental illness (MI), 34.1%had personal history of (MI) and 34.1% had some pregnancy associated illness. Twenty percent had needed some assisted reproductive technique, 14.1% had little family support and 15.2% had little couple support, 3.8% showed anxiety-depressive disorders during pregnancy, 19.7% had depressive symptoms after delivery. The mean age was 33.67. No significant differences between patients with and without RF (T-1858, P 0.064). Among women with RF, 59.6% were married, 35.1% single and 3.0% had other situation. 89.5% live with their own family, 8.8% with their family of origin, 1.8% alone. 50.8% had university studies.

Conclusions Assessing RF during pregnancy can help these women, since we see that the 19.7% will have serious risk of developing postpartum depression. The RF to take more into account are not those related to social-academic development, neither the presence of anxiety-depressive symptoms during pregnancy, but the family or personal history of (MI) and the presence of a pregnancy associated illness. Early detection and treatment may prevent the development of this disease improving the quality of life of mother and babies' development.

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Others

EW633

Chronic rhinosinusitis and mood disturbance

S.E. Erskine¹, J. Beezhold^{2,*}, A. Clark³, C.M. Philpott⁴

- ¹ Norwich Medical School UEA, ENT Department James Paget University Hospital NHS Foundation Trust, Great Yarmouth, UK
- ² Norwich Medical School UEA, Central Acute Service, Hellesdon Hospital, Norwich, Norfolk and Suffolk NHS Foundation Trust, UK
- ³ Norwich Medical School UEA, Norwich, UK
- ⁴ Norwich Medical School, UEA, ENT Department James Paget University Hospital NHS Foundation Trust, Great Yarmouth, UK
- * Corresponding author.

Introduction Chronic rhinosinusitis (CRS) is a condition of inflammation of the nose and paranasal sinuses affecting 6.8 million Britons. It has a great impact on quality of life and productivity. CRS is currently subdivided into two main types – with and without nasal polyps (CRSwNPs and CRSsNPs respectively. Allergic fungal rhinosinusitis (AFRS) is severe subtype of CRSwNPs.

Objectives This study is part of the Chronic Rhinosinusitis Epidemiology Study (CRES). The overarching aim is to determine factors influencing onset and severity of CRS.

Aims To determine whether those with CRS are more likely to report mood disturbance compared with healthy controls.

Methods CRES is study-specific questionnaire asking about demographic and socioeconomic factors and past medical history as well as a nasal symptom score (SNOT-22) and SF-36 (QoL – quality of life tool). Questionnaires were distributed to patients with CRS attending ENT outpatient clinics at 30 centres across the United Kingdom from 2007–2013.

Results A total of 1470 participants were recruited (Table 1). Differences between those with CRS and controls were found; those with CRSsNPs reported significantly more consultations with their

GP for depression and anxiety. Patients with CRS also showed significantly poorer mental well-being than controls across the mental health and emotional well-being domains of the QoL tools used. Those with CRSsNPs scored significantly worse than those with nasal polyps across all domains.

Conclusions Mood disturbance is significantly more common in patients with CRS compared to healthy controls, especially in those with CRSsNPs. This added mental health morbidity needs consideration when managing such patients.

Table 1

	Controls	CRSsNP	CRSwNP	AFRS
Participants	221	553	651	45
Females	143 (68.4%)	259 (53.1%)	185 (32.2%)	19 (43.2%)
Mean Age (s.d)	47.3 (14.9)	51.8 (15.3)	56.0 (14.6)	56.1 (12.7)
Range	19-82	18-84	17-102	20-76

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

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EW634

Impact on personal growth and environment conservation self-perception in a volunteering program with adults with severe mental illness (SMI)

D. Cabezas Sánchez 1,*, A. Ramírez Macías 1, J. Sáiz Galdós 1,2

- ¹ Grupo 5, Centro de Día Aranjuez 2, Aranjuez, Spain
- ² UCM, Social Psychology, Madrid, Spain
- * Corresponding author.

Introduction "Viaje del Parnaso" is a volunteering project developed at the Day Center Aranjuez2 (CD2) for helping adults with SMI to get a satisfactory and responsible occupation through their implication in a volunteering work in the community, while involved in the maintenance of a green area in the city of Aranjuez. Objectives/aims The aim of this study was to evaluate the impact of the project on the volunteers' lives in terms of personal growth and environment conservation and compare its results with non-volunteers also attended at the CD2.

Methods The project was carried once a week during 45 weeks. 11 volunteers participated on the project, plus 5 non-volunteers were considered as cuasi-control group. The instruments applied were an item on "environment conservation" and 2 subscale items of "Personal Growth" from the Ryff Scales of psychological well-being. Measures were applied at baseline, 6 and 12 months after. Results Significant differences were found on the environment conservation item between volunteers at baseline and 6 months after (P<0.05). Results also revealed a significant difference (P<0.05) between volunteers and non-volunteers at both variables ("environment conservation" and "Personal Growth") in baseline and 6 months after treatment.

Conclusions The data from this study suggest that a volunteering program seems to be an effective intervention for bringing about improvements in well-being of people with SMI, and also for increasing their environmental awareness. These improvements

may also help to change the stigma of SMI reinforcing mental health patient's contributions to society.

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EW635

Cardiovascular risk assessment in psychiatric inpatient setting

E. Dahmer ^{1,2,3,*}, Ñ.C. Lokunarangoda ^{4,5,6}, K. Romain ^{7,8}, M. Kumar ⁹

- ¹ Health Education West Midlands, The Shrewsbury and Telford Hospital NHS Trust, Telford, United Kingdom
- ² South Staffordshire and Shropshire Healthcare, Former F1 Dr in General acute inpatient Psychiatry-St George's Hospital, Stafford, United Kingdom
- ³ Health Education West Midlands, Former FY1-University Hospitals of North Midlands, Stafford, United Kingdom
- ⁴ The Shrewsbury and Telford Hospital NHS Trust, Cardiology, Telford and Shrewsbury, United Kingdom
- ⁵ Teaching Hospital Anuradhapura, Former Acting
- Cardiologist-University Medical Unit, Anuradhapura, Sri Lanka ⁶ Rajarata university of Sri Lanka, Senior Lecturer in Medicine, Mihintale, Sri Lanka
- ⁷ Health Education West Midlands, University Hospitals of North Midlands, Stafford-Stoke, United Kingdom
- ⁸ South Staffordshire and Shropshire Healthcare, F1 Dr in General acute inpatient Psychiatry-St George's Hospital, Stafford, United Kingdom
- ⁹ South Staffordshire and Shropshire Healthcare, Consultant Psychiatrist- General acute inpatient Psychiatry-St George's Hospital, Stafford, United Kingdom
- * Corresponding author.

Objectives To assess the general cardiac health of inpatients in acute psychiatric units and to evaluate the practice of ECG use in this setting.

Aims Overall cardiac risk is assessed using QRISK2. Clinically significant ECG abnormality detection by psychiatric teams are compared with same by cardiologist.

Methods Ten percent of patients (n = 113) admitted to five acute psychiatric wards during a period of 13 months across three hospital sites, covering a population of 1.1 million, were randomly selected. Electronic health care records were used to collect all data, in the form of typed entries and scanned notes. An experienced cardiologist, blind to the psychiatrist assessments, performed ECG analysis. The QRISK2 online calculator was used to calculate 10-year cardiovascular risk as recommended by NIHR, UK.

Results A score of 10% or more indicates a need for further intervention to lower risk.13.5% of patients had a QRISK2 score of 10–20%, 5.2% had a score of 20–30%, and 1 patient had a QRISK2 score > 30%. In total, 19.7% had a QRISK2 of 10% or greater. A total of 2.9% had prolonged QTC interval (>440 ms), with 2.9% having a borderline QTC (421–440). A total of 34.3% of ECGs were identified by the ward doctors as abnormal, with action being taken on 41.6% of these abnormal ECGs. Cardiologist analysis identified 57.1% of ECGs with abnormalities of potential clinical significance.

Conclusions One in five patients admitted to psychiatry wards have poor cardiac health requiring interventions. Though QTC interval prolongation is rare, half of patients may have abnormal ECGs that require further analysis.

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EW636

The agitated patient; need for mechanical restraint and prevention measures in relation to psychiatric diagnosis

F. Dinamarca*, L. Galindo, M. Grifell, E. Perez, V. Chavarria, P. Salgado, S. Perez

Hospital Del Mar, Psychiatry service – INAD, Barcelona, Spain * Corresponding author.

Introduction Psychomotor agitation is a common psychiatric emergency in our environment that can occur in a wide clinical spectrum. Both the agitation itself as the procedures for their control, carry an implicit risk to patient safety and health workers.

Objective To describe the prevention measures used in patients requiring mechanical restraint in relation to diagnosis of psychiatric disorders.

Material and methods This is a naturalistic descriptive study. Mechanical restraints made in brief psychiatric hospitalization units of "Hospital del Mar" between January of 2013 to March of 2015, were analyzed by diagnosis. Proportions of the prevention intervention performed by nurses in each episode were compared. The groups of prevention interventions done were: "verbal approach", "environmental measures", "psychopharmacological intervention", "observation increase" and "inability for applying any measure because unpredictability".

Results A total of 2986 mechanical restraints were done in brief hospitalization units. Among the results, we find that verbal approach measure was use in 77.23% of patient with personality disorders. Environmental measures were used in 40% of the total of restraints. The most of psychopharmacological intervention was done in alcohol intoxication (50%) and then in psychotic spectrum (42.01%). The inability for applying measures was greater in alcohol intoxication (45.4%).

Conclusion Some of the results of this study are interesting and consistent with clinical practice (for example, effectivity of pharmacological intervention in psychosis and bipolar disorders, as well verbal approach in anxiety, etc.), we can predict the usefulness of measures applied to prevent a mechanical restraint. Further research is needed in this topic.

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EW637

Interim results of remotely provided, one-on-one, tailored psycho-education and skills training to caregivers of patients with mental health difficulties

K. Ashcroft (BA MPhil D ClinPsy) (Consultant Clinical Psychologist) 1,*,

B. Insua-Summerhays (BSc) (Research Assistant – MyHealios)²

- ¹ London, UK
- ² Southampton, UK
- * Corresponding author.

In the past several decades, considerable evidence has emerged on the efficacy of caregiver and family interventions in the treatment of severe and enduring mental health disorders, particularly schizophrenia. Studies have demonstrated benefits of these interventions with regard to both reduced rates of burden in caregivers, and a reduction in relapse and improvement in symptoms of the person with psychosis. However, many caregivers who may benefit from such interventions are unable to access them, due to limited resources and geographical factors. Additionally, concerns about stigma and time constraints may deter caregivers from accessing