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Introduction Behavioural, psychological and cognitive disturbance have been associated with hypothyroidism, even it has been suggested that this symptoms may remain despite adequate replacement therapy with thyroxine.

Objective To describe prevalence, sociodemographics and clinical features of patients with hypothyroidism in an acute psychiatric unit.

Aims To know about the relation between hypothyroidism and psychiatric symptoms.

Methods Data base collection of all patients admitted between 2010 and 2014 in the acute unit of our psychiatric hospital in Barcelona, was analyzed using SPSS program.

Results In all 3.1% of the 4536 total patients had hypothyroidism. Among them, 46% were duplicate cases. Mean age was 53 ± 14.27 years. A total of 82.7% were woman. Patients having a TSH lower than 0.30 were 12%, TSH normal were 60.2%, TSH higher than 5 were 27.8%. Most frequent Levothyroxine dosage was: 75 μg (22.1%), 100 μg (19%), 25 μg (12.5%) and 125 μg (12.5%). Diagnosis more frequently associated with hypothyroidism was: Bipolar (26.5%), Schizophrenia (20%), Depression (15.1%), Unspecified psychosis (10%), Personality disorder (10%), Schizoaffective disorder (7.2%), Paranoia 4.3%.

Conclusion Most of patients were stable of thyroid condition when had been admitted to our hospital. Hypothyroidism could be a relapse factor, even when treatment is adequate. Affective disorders are more frequently related with hypothyroidism (lithium has to be consider a confounding factor).

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EW144

Burnout among Portuguese oncology healthcare providers – Differences between pediatric and adult teams

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Introduction Burnout is characterized by emotional exhaustion, depersonalization and reduced personal accomplishment, resulting from the inability to cope with chronic job stress. The literature suggests that staffs working in adult oncology are at risk of burnout. At the same time, research found that pediatric staff experiences a different set of stressors when compared with colleagues working in adult oncology. However, no studies were identified which directly compared prevalence and sources of Burn-out on pediatric and adult oncology staff.

Objectives To compare the differences on prevalence and sources of burnout between pediatric and adult oncology multidisciplinary teams.

Methods Pediatric and adult oncology professionals, including medical and nursing from a Portuguese oncology center completed the Portuguese version of the Copenhagen Burnout Inventory. Data was analyzed using SPSS.

Results Since the study is currently ongoing the authors will only be able to provide final results and conclusions by the time of submission of our work presentation, in March 2016. However,

according to the literature available, we are expecting to found symptoms of Burnout in the superior limit of normality, with differences in the major sources of stress between adult and pediatric professionals.

Conclusion The differences in the challenges experienced by adult and pediatric teams highlight the importance of adequate prevention strategies to specific needs of each unit. Further investigation of stress across a wider range of professional disciplines is required in order to explore this gap.

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EW145

Liaison psychiatry: Its impact in an intrahospital treatment for a psychotic patient

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Different manners of non-suicidal self-injuries are common ways to deliberately hurt oneself in order to alleviate suffering. It can be seen in various psychiatric affections. The ingestion of bizarre objects in psychotic patients is part of aggressive behaviour as a reaction to massive anxiety. We hereby present the case of a schizophrenic patient who presented to the Emergency Department for a second episode of ingestion of numerous metallic objects (screws, coins, knives, spoon, handles, ...). Physical examination showed no abdominal guarding. CT scan revealed the presence of multiple metallic objects, which seemed impossible to go through the pylorus. Surgical transgastric extraction was performed. Outcome was uneventful. Patient was discharged and followed-up in a private structure. Three months later, the patient was readmitted for the same reason. Flexible endoscopy allowed this time complete extraction of the ingested objects. He recovered rapidly and was allowed to discharge from the surgical ward. The psychiatrist took decision with family to transfer him into a psychiatric hospital for the first time. His treatment was: chlorpromazine, Proton pump inhibitor, pain killers. Patient was treated by means of medication, psychotherapy, daily activities and family, preparation him for a day hospital.

Conclusion We discuss here the beneficial multifocal treatment of a 42-year-old man suffering from schizophrenia. The life threatening ingestion of sharp and other metallic objects three times in a year was treated surgically with success. The psychiatric affection including invalidating acoustic-verbal delusions and severe negative signs were treated in psychiatric hospital. The definite results will be discussed.

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

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EW146

The prevalence of depression and its correlates in ankylosing spondylitis: A systematic review and meta-analysis

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Introduction Ankylosing spondylitis (AS) is a chronic inflammatory disease, associated with significant pain, functional impairment, and diminished quality of life. However, there is significant uncertainty regarding the prevalence of depression in AS and its associations.

Objectives We performed a meta-analysis to examine the prevalence of depression in AS and its associated correlates.

Methods The study protocol was prospectively registered with PROSPERO (CRD42015019676). EMBASE, Medline, PsycINFO and Web of Science were systematically searched for cross-sectional studies with ≥ 50 adult AS patients, which reported depression prevalence using diagnostic criteria or a validated screening tool. Depression prevalence, tool and threshold used, age, gender, disease duration, as well as measures of disease activity, functional impairment, pain and innate inflammation, were abstracted. Open-Meta was used to calculate pooled prevalence estimates and to conduct meta-regression.

Results Eight hundred and seventy-seven texts were identified and 17 studies satisfied inclusion criteria, totalling 3187 participants (75.2% male). Six diagnostic tools and 10 different thresholds were reported, with depression prevalence estimates ranging from 4.9–55.5%. In studies using the depression subscale of the Hospital Anxiety and Depression Scale (HADS-D), 37.1% of participants satisfied criteria for mild (≥ 8) and 8.2% met criteria for moderate depression (≥ 11). Multivariate meta-regression demonstrated significant positive correlations between depression and, respectively, disease activity ($P < 0.001$) and C-reactive protein ($P < 0.001$).

Conclusions The prevalence of depression in AS is comparable with that of other rheumatic and degenerative diseases. Moreover, depression demonstrates significant associations with age, inflammation and disease activity, which require further investigation in prospective studies.

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EW148

Psychological factors influence the symptoms of Gastroesophageal Reflux Disease (GERD) and their effect on quality of life in Korean fire fighter

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Objective The aim of the study was to investigate the psychological factors influence the symptoms of gastroesophageal reflux disease (GERD) and their effect on quality of life in Korean Fire Fighters.

Methods This study examined data collected from 1217 fire fighters. Depression and Anxiety were identified using the Patient health questionnaire-9 (PHQ-9) and the 7-item Generalized Anxiety Disorder Scale. Occupational stress and Stress coping were identified using the KOSS-26 and the Ways of Coping Checklist-Revised. Self-esteem and quality of life were identified using the Rosenberg's Self-Esteem Scale and World Health Organization quality of life scale abbreviated version (WHOQOL-BREF). The scores for anxiety, depression and QoL of the two groups were analyzed. The correlation between psychological factors and QoL was also analyzed.

Results Current psychological variables were associated with increased odds of concurrent GERD-related symptoms. Current depression, anxiety and stress were associated with increased odds of GERD-related symptoms. According to the WHOQOL-BREF,

depression, anxiety, stress, stress coping and self-esteem were significantly correlated with quality of life in patients with GERD. Quality of life was obviously affected by psychological variables in patients with GERD.

Conclusions These results indicate that psychological symptomatology, depression, anxiety, occupational stress and self-esteem are associated with GERD-related symptoms. Acknowledging this common comorbidity may facilitate recognition and treatment, and opens new questions as to the pathways and mechanisms of the association.

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EW149

The syndrome of irreversible lithium-effectuated neurotoxicity: Clinical case and review

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Introduction Lithium is a mood stabilizer used in the treatment of bipolar disorder. Lithium has recently been associated to permanent neurological damage namely persistent cerebellar dysfunction as well as peripheral and central neuropathies.

Objectives To present a clinical case of a probable Syndrome of Irreversible Lithium-effectuated Neurotoxicity (SILENT) and a review of the literature concerning this rare syndrome.

Aims Increase awareness and knowledge of SILENT.

Methods Psychiatric and psychological evaluation of a probable clinical case of SILENT and review of the literature using the key words "lithium neurotoxicity" and "Syndrome of Irreversible Lithium-effectuated Neurotoxicity".

Results A 54-year-old female patient was admitted in our hospital due to involuntary lithium intoxication, with acute renal and cardiovascular failure, neurological, metabolic and electrolytic dysfunction in an acute confusional state and in need of dialysis. The patient clinical picture rapidly improved although, when she achieved normal lithium seric levels, it was observed a worsening of the preexisting confusional state followed by two consecutive generalized tonic-clonic convulsions and a partial convulsion. A short time after, it was recognized the development of a persistent catatonic state. It was detected urinary incontinence and repetitive, monosyllabic, incoherent, short phrased speech featuring echolalia, together with emotional lability and incongruous affect. The patient slightly improved with the introduction of anti-Parkinson's pharmacotherapy.

Conclusions This clinical case raises several differential diagnoses due to its psychiatric and neurologic characteristics. We conclude that the most probable diagnosis is SILENT.

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EW150

Psychiatric symptoms as a presentation of central nervous system involvement in Chagas disease, a case report

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