

## EV882

**Personality disorders and suicide attempts**

O.W. Muquebil Ali Al Shaban Rodriguez<sup>1,\*</sup>, J.R. López Fernández<sup>2</sup>, C. Huergo Lora<sup>2</sup>, S. Ocio León<sup>1</sup>, M.J. Hernández González<sup>1</sup>, A. Alonso Huerta<sup>1</sup>, M. Gómez Simón<sup>3</sup>, I. Abad Acevedo<sup>4</sup>, L. Rubio Rodríguez<sup>5</sup>, G. García Álvarez<sup>6</sup>, A. González Suárez<sup>1</sup>

<sup>1</sup> Centro de Salud Mental de Mieres, Psichiatria, Mieres del Camino, Spain

<sup>2</sup> Hospital Vital Álvarez-Buylla, Psichiatria, Mieres del Camino, Spain

<sup>3</sup> Centro de Salud Mental de Mieres, Psychology, Mieres del Camino, Spain

<sup>4</sup> Hospital Universitario Central de Asturias, Psichiatria, Oviedo, Spain

<sup>5</sup> Hospital de Jove, Psichiatria, Gijón, Spain

<sup>6</sup> Hospital San Agustín, Psichiatria, Avilés, Spain

\* Corresponding author.

**Introduction** The personality disorders are defined according to the DSM-5 like “an enduring maladaptive patterns of behavior, cognition and inner experience, exhibited across many contexts and deviating markedly from those accepted by the individual’s cultures. These patterns develop in adolescence and the beginning of adulthood, and are associated with significant distress or disability”. The personality disorders can be a risk factor for different processes of the psychiatric pathology like suicide. The personality disorders are classified in 3 groups according to the DSM-5:

- cluster A (strange subjects): paranoid, schizoid and schizotypal;
- cluster B (immature subjects): antisocial, borderline, histrionic and narcissistic;
- cluster C (frightened subjects): avoidant, dependent and obsessive-compulsive.

**Aims** To describe the influence of personality disorders in suicide attempts.

**Methodology** Exhibition of clinical cases.

**Results** In this case report, we exhibit three clinical cases of suicide attempts which correspond to a type of personality disorder belonging to each of the three big groups of the DSM-5 classification, specifically the paranoid disorder of the cluster A, the disorder borderline of cluster B and the obsessive compulsive of cluster C.

**Conclusions** The personality disorders have a clear relation with the suicide attempts, increasing this influence in some of them, especially the borderline personality disorder.

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## EV883

**A new look at personality disorders treatments**

S. Neves<sup>1,\*</sup>, J. Tudela<sup>2</sup>

<sup>1</sup> Portugal

<sup>2</sup> Coimbra, Portugal

\* Corresponding author.

**Introduction** Mental illness develops and is inseparable from the sociocultural context. The Disturbances may exhibit different symptoms in different cultures. In personality disorders, there is a pathological expansion of normal traits that often demonstrate a sociocultural change. The quality of life of these patients can improve with certain treatments, which appears to be relevant to be achieved.

**Method** Search on Pubmed and Medline for original research or review articles published in English or Portuguese in the last 10 years. It used a combination of terms: “personality”, “treatment”, “personality disorder”, “borderline”, “antisocial”, “pharmacotherapy”, and other named personality disorders.

**Objectives/Aim** Search the evidence base and the new perspectives for the effective treatment of personality disorders.

**Results** The same personality traits may be adaptive or non-adaptive in different contexts. So, without changing these characteristics, patients can learn to use them more effectively. In other words, although the therapy did not change the personality traits, it can be modified in the way they affect the behavioral expression.

**Conclusions** Psychological or psychosocial intervention is recommended as the primary treatment for borderline personality disorder and pharmacotherapy is only advised as an adjunctive treatment. The amount of research about the underlying, abnormal, psychological or biological processes leading to the manifestation of a disordered personality is increasing, which could lead to more effective interventions.

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## EV884

**Belle de jour: A case of hysteria**

C. Noval Canga<sup>1,\*</sup>, S. Gómez Sánchez<sup>2</sup>, S. Cepedello Pérez<sup>2</sup>, R. Hernández Antón<sup>2</sup>, I. Sevillano Benito<sup>2</sup>, L. Rodríguez Andrés<sup>2</sup>, L. Gallardo Borge<sup>2</sup>, G. Medina Ojeda<sup>2</sup>, H. De la Red Gallego<sup>2</sup>, A. Portilla Fernández<sup>3</sup>

<sup>1</sup> Valladolid, Spain

<sup>2</sup> Hospital Clínico Universitario, Hospital Clínico Universitario, Valladolid, Spain

<sup>3</sup> Hospital de Navarra, Hospital de Navarra, Pamplona, Spain

\* Corresponding author.

**Introduction** Histrionic Personality Disorder is one of the most common personality disorders diagnosed in Psychiatry. This disorder has been known to be present in more than 40% of patients. There is also a high tendency for those diagnosed with this disorder to be female.

**Objectives** The case is to show all the difficulties caused by this pathology, differential diagnosis with other personality disorders, groups of characteristics from different clusters and also, complications produced in daily routine.

**Methods** The purpose is to study a clinical case of a 27-year-old woman, with a degree in journalism, who began with a depressive episode after a failed relationship. After being diagnosed of infertility, she debuted with dissociative episodes and somatization symptoms. After that, she suffered several depressive episodes. At the moment, all the clinical symptoms support the diagnosis of histrionic personality disorder.

**Results** Histrionic Personality Disorder can be found in the cluster B group of personality disorders. They often present in an overly dramatic, erratic or emotional manner. They may fulfil their need for attention through speech and behaviour that draws one’s focus of attention toward themselves, and also demanding and manipulative in interpersonal relationships. There are high comorbidity rates in those who suffer from HPD with other diagnoses.

**Conclusions** Histrionic Personality Disorder appears to be one of the least threatening diagnosis among personality disorders as those affected are high functioning and do not seek relief for the disorder itself. There is also very little research on HPD which makes treatment options limitless.

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

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