EV1207

Approach in a mental health hospitalization unit

M. Rodríguez ^{1,*}, V. Pérez ¹, D. Linares ¹, S. Jose María ²

- ¹ Centre Hospitalier Torrecárdenas, Psychiatry, Almería, Spain
- ² Centre Hospitalier Torrecárdenas, Psychology, Almería, Spain
- * Corresponding author.

Introduction The mental health hospitalization unit of Torrecárdenas Hospital consist of a team of professional psychologists, psychiatrists, nurses and occupational therapists who perform different approaches to look after the hospitalized patient. The therapeutic Objective of this unit is the containment and implementation of intensive interventions in a crisis situation in which it has not been possible to achieve an improvement or control of the patient's symptoms in external resources.

Material and methods We performed a descriptive crosssectional study with patients hospitalized at the mental health hospitalization unit between September 22 and October 28, taking into account the age, sex, admitted, diagnoses, previous treatments, psychological approach and free hospital stay.

Results (Figures 1–3).

Conclusions The results of this study indicate the most prevalent patient profile has a diagnosis of severe mental disorder. The 66.7% of patients had previous hospital admissions. The 81.5% of hospital admissions are involuntary. The normative psychopharmacological prescription is an atypical antipsychotic as main treatment in our study. We highlight the use of Olanzapine with an 18.52% being consolidated as the first therapeutic option. As adjunctive treatment we have a mood stabilizer such as Valproic Acid with 11.1%; or another antipsychotic such as Paliperidone with the same percentage (11.1%). Regarding hypnotic treatment, it should be pointed out the use of medium-life benzodiazepines (Lormetazepam) with a prevalence of 55.56%.

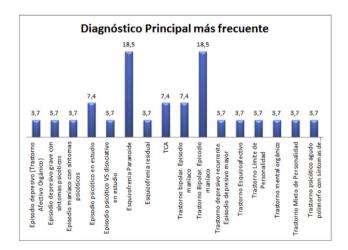


Fig. 1

TIPO DE FÁRMACO PRINCIPAL (MÁS PREVALENTES)

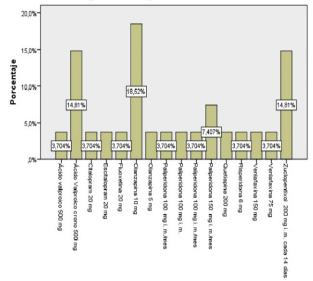


Fig. 2

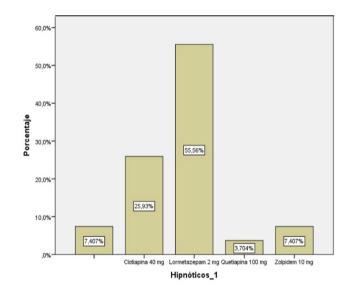


Fig. 3

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1537

EV1208

The genetic methods for drug-resistant epilepsy

M. Salohiddinov

Tashkent Medical Academy, Psychiatry and narcology, Boyovut, Uzbekistan

Actuality Mechanisms of underlying pharmacoresistance have been explored insufficiently. Enzymes of a system for biotransformation of xenobiotic and transporters for drugs are the key participants in the systems of metabolism of antiepileptic drugs (AEDs). Among proteins-transporters, glycoprotein P encoded by MDR1 gene plays an essential role in the processes of uptake, distribution and excretion of AEDs.

Objective The work initiated to study gene MDR1 C3435 T polymorphism and to assess its association with pharmacoresistance formation in patients with epilepsy receiving antiepileptic drugs (AEDs).

Materials Study involved 89 patients with localization-related epilepsy and 55 unrelated healthy subjects.

Results Distribution of 3435 T/C polymorphism in NDR1 gene was analyzed in the patients with the localization-related epilepsy and nominally healthy donors. The distribution of frequencies of gene alleles was found to correspond to the Hardy-Weinberg equilibrium (P>0.05). Incidence of genotypic variants of the polymorphism was as follows, CC was found in 18.6%, CT and TT were observed in 55.9% and 25.4% of cases. In the controls CC was found in 60.0%, CT and TT were observed in 33.3% and 6.6% of cases, respectively. The findings are the evidence for significant effect of functionally weak variants in C3435 T polymorphism of MDR1 gene on efficacy of antiepileptic therapy.

Conclusion presence of T-allele of C3435T polymorphism of MDR1 gene increases risk of pharmacoresistance in the patients with epilepsy and is a significant and predicting criterion of efficacy and feasibility of the antiepileptic therapy conducted.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1538

EV1209

Ambientation/acculturation of a psychologist as "methodological internship" for developing qualitative research to study clinical supervisions at a psychiatric outpatient service of Brazilian general hospital

M.E.D.F. Bremberger, R.A. Bastos, V.L.P. Alves, E.R. Turato* UNICAMP, State University of Campinas, LPCQ, Laboratory of Clinical-Qualitative Research, Campinas, Brazil

* Corresponding author.

Qualitative research in a psychiatric setting requires methodological updates on its modus operandi for professionals who migrated paradigmatically from other academic areas. The mere adoption of the concept of acculturation, from anthropology to field of health services, may not correspond to specificities of assistance and research in this field.

Objective To discuss results of a certain environment and acculturation strategy for development of humanistic research that took place in a psychiatric outpatient service of a university hospital.

Method Observation of environment of psychiatric supervision for qualitative method in health setting, in period of six months. The first author, doctoral student, psychologist, systematically attended discussions of clinical cases, observing relationship between supervisors and residents. Data were recorded in field diary, followed by free-floating readings and critical analyses. These were also submitted to peer reviewers of the LPCQ-laboratory of clinical-qualitative research.

Results – The experience, similar to an "internship", has been confirmed as necessary to conduct qualitative research in this field; – It allowed accurate apprehension of features of environmental functioning and, above all, cultural dimensions of language of participants;

- This proved pertinent for clearing the theme-problem to be researched:
- Postgraduate researchers, in particular those graduates under other paradigms, have strengthened their methodological knowledge on this field, and have been inserted epistemologically for which they will have built new knowledge;

- Finally, this methodological stage improved the so-called active observation and phenomenological listening of the researchers regarding those observed.

Conclusions The experience contributed significantly to establishing and validating the qualitative methodological course.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1539

e-Poster Viewing: Schizophrenia and other psychotic disorders

EV1210

Psychosis in epilepsy patients

M. Agudo^{1,*}, M. Guillán², M.G. García¹

- ¹ Hospital Universitario Rey Juan Carlos, Psiquiatría, Mostoles, Spain
- ² Hospital Universitario Rey Juan Carlos, Neurología, Mostoles, Spain
- * Corresponding author.

Introduction Psychosis in patients with epilepsy was known in antiquity and was already described in detail in the nineteenth century.

This kind of psychosis can be categorized in relations to seizures: preictal psychosis (before the seizures), during them (ictal) or after the seizures (postictal psychosis)

Aims Through several cases of patients that were treated in our department with the diagnosis of psychosis, previously or during the treatment diagnosed with epilepsy, we analyse the characteristics and diagnostic criteria of these pathologies.

Methods Systematic literature review in up-to-date and Pubmed, looking for reviews on psychosis and epilepsy, in international scientific journals of neurology and psychiatry.

Conclusions Being able to recognize this several types of psychotic states associated with epilepsy has a clinic and prognosis utility, because made important differences in treatment and in the evolution of the illness.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1540

EV1211

Family burden in caregivers of schizophrenia patients

H. Ahlem, Y. Zgueb, U. Ouali*, Y. Laajili, S. Ben Alaya, R. Jomli, F. Nacef

Razi hospital, psychiatry A, Manouba, Tunisia

* Corresponding author.

Introduction Schizophrenia is a disabling, chronic psychiatric disorder that has far-reaching consequences for both patients and their relatives. Management of schizophrenia involves family support and care. In this context, burden of care is a concept related to caregivers and family's members of patients assuming responsibility for these patients. This construct can be conceptualized as a syndrome of varying clustering affecting the general and mental health of caregivers.

Objectives This study aims to determine the frequency and clinical correlates of family burden in schizophrenia.

Methods We performed a transversal study in department of psychiatry A at Razi hospital. Thirty principal caregivers of schizophrenia patients were interviewed. Caregiver's burden was assessed using the Zarit scale.

Results The mean age of caregivers was 48.7 ± 7.15 years. In our sample, 63.3% (n = 19) were parents, 23.33% (n = 7) were brothers