EV1249

Psychiatric consultations in the emergency room: Focus on suicide attempters with and without longitudinal psychiatric disorders

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Introduction The role of mental illness in the pathway leading to suicide is widely discussed in the literature. Nonetheless, the debate about this issue is open, both from a clinical and philosophical point of view.

Aims The purpose of the present study was to compare suicide attempters with and without a history of psychiatric disorder, in order to highlight the possible differences between the two groups, with a specific focus on intent to die and methods of the attempt.

Methods Data from all ER referrals undergoing a psychiatric consultation in the period 2008–2015 at the Maggiore della Carità Hospital, Novara, Italy, were gathered. Comparison of qualitative data was performed by means of the Chi² test. Statistical significance was set at $P \le 0.05$.

Results We have already gathered data from more than 2000 ER psychiatric consultations, including 495 suicide attempters. Preliminary results suggest that these kinds of behaviours are more common in subjects without psychiatric disorders but with clinical history of previous contact with mental health services and in psychopharmacological therapy. Reasons for self-harming are associated with relational problems rather than psychiatric symptoms. Among Axis II diagnoses, almost half of cases are affected by histrionic personality disorder.

Conclusions The results described above should be considered as preliminary, as data collection and statistical analyses are still ongoing. Anyway, the observed correlation between previous contact with mental health services, socio-relational issues and suicide attempt, and the significant frequency of attempts in histrionic personality disorders seem to be particularly interesting. Implications will be discussed.

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

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Alcohol and substances acute intoxication in a population of suicide attempters

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Introduction The effects of psychotropic drugs and alcohol acute intoxication are important risk factors for attempted suicide among individuals with and without substance use disorder (SUD).

Aims The first aim of this study is describing the sociodemographic features and clinical history of subjects who were acutely intoxicated when attempting suicide. The second aim is to compare their features with those of subjects without acute alcohol and substances intoxication at suicide attempt time.

Methods Determinants of ER psychiatric consultations were studied prospectively during the period 2008–2014 at the "Maggiore della Carità" Hospital in Novara, Italy. For each patient, a data sheet was filled in by experienced psychiatrists, in order to gather demographic features, psychiatric history and present clinical issues like blood and urine dosage of amphetamine and methamphetamine, cannabinoid, cocaine and alcohol. Comparison of qualitative data was performed by means of the Chi² test. Statistical significance was set at $P \leq 0.05$.

Results We collected a sample of 495 suicide attempters who referred to our ER. Statistical analysis of demographic and clinical data is still ongoing.

Conclusions Preliminary results point out that acute alcohol and drugs intoxication at suicide attempt time is much more frequent in subjects without a SUD. Implications will be discussed.

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

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Suicide attempt in alcohol use disorder and Wernicke encephalopathy: A case report

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Background The relation between alcohol dependence and suicidal behavior is well known and alcohol consumption is a risk factor to take in consideration in order to prevent suicidal attempts. Wernicke encephalopathy (WE) is a common acute neurological disorder caused by thiamine deficiency frequently associated with alcohol use disorder and often infra-diagnosed. Just few cases are reported about the possible correlation between suicidal behaviour and Wernicke encephalopathy.

Objective To describe the possible association between suicidal attempts and Wernicke encephalopathy.

Methods We report the case of a 57 year old man, with past diagnosis of disthymia and amphetamine abuse disorder, and a history of bariatric surgery, who was hospitalized in the intensive care unit (ICU) of hospital clinic for a suicidal attempt by mean of metro railway precipitation. He presented two episodes of psychomotor agitation in the context of an abstinence syndrome that reverted with midazolam continuous perfusion and clonazepam 8 mg per day. Consequently to medical improvement, he was moved to Psychiatry Unit of Addictive Behavior and finally diagnosed with alcohol use disorder.

Results In the physical exam, bilateral nystagmus and cerebellar ataxia were observed. Signs of malnutrition were detected in the blood analysis. In a brain magnetic resonance image, volume deficits in the mammillary bodies, thalamus, cortex and corpus callosum, as well as peri-aqueductal altered signal were observed, all signs compatible with Wernicke encephalopathy diagnoses.

Conclusions Wernicke encephalopathy is a frequent concomitant condition in patients with alcohol use disorder. The consequent cognitive decline could represent an independent added risk factor for suicidal behavior.

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

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