Methods At three months postpartum 192 women fill in a booklet containing obstetric and sleep variables and the Postpartum Depression Screening Scale (PDSS; Pereira et al., 2010). If they experienced changes in their sleep pattern, they were asked about the perceived cause(s) (multiple choice). Chi-squared and Student t tests were applied as appropriate.

Results A total of 64.6% women referred to some cause(s); the most mentioned were feeding/baby care and older children care (32.3%) and worries (baby and life problems related) (29.5%). Women who mentioned feeding/baby and older children care as a cause did not significantly differ in relation to type of delivery, feeding method proportions and in PDSS mean scores. Women who identified worries as a cause vs. women who did not – presented significant differences in proportions of vaginal (20.0%) vs. assisted delivery (52.2%) (OR 4.444), caesarean-section (22.2%) vs. assisted delivery (52.6%) (OR 3.827), in breast-feeding (36.0%) vs. bottle-feeding (12.9%) (OR .263) and in "having trouble sleeping even when the baby is asleep" (28.0% vs. 2.9%) (OR 12.833) (all P<.05). PDSS mean scores were also significantly higher in women who mentioned worries as a cause (50.20  $\pm$  20.622 vs. 58.640  $\pm$  15.766, P<0.05).

Conclusion It is important to distinguish the causes for changes in sleep pattern in postpartum women. Worries as a perceived cause have a higher impact and clinical significance than causes related to baby care demands.

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### EW590

# Children and sleep disturbance: A case for psychiatric intervention?

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From birth through adolescence changes occur in children's sleep architecture, schedule, and duration including several key interactions in the concomitance of sleep/wake domains and child development. Research investigating the suspected affiliation between inefficient sleep and mental dysfunction in children has been largely enigmatic. We constructed a 111-item questionnaire relative to sleep disturbance in all ages and a 12-item questionnaire specific to pediatrics to use in conjunction with nocturnal polysomnography (PSG), and medical chart reviews of children under the age of 17 referred to our institution for evaluation of SDs. We analyzed these data to create a characterization specific to children/youth (n = 57; age 1–16 mean 9.28; 36 male, 21, female). Examples of findings reveal a characterization distinctive from the general demographic of adults who are referred for sleep studies. For example, 55.6% presented with disabilities ranging from neurological to neuromuscular; 73.3% reported learning disabilities; 66.7% possessed a range of behavioral control challenges; half used prescribed medications for psychiatric issues (despite a paucity of psychiatric evaluation). Another example, is that post-PSG, 69.6% of this sample were diagnosed with abnormal sleep architecture which was statistically related to medication use. These data revealed a pattern of children being more likely to be referred for a professional sleep study in the presence of significant medical symptomatology. Although we found some similarities when comparing this children/youth group to adults, we also found striking differences that were opposite when comparing the age groups. Disclosure of interest The author has not supplied his/her declaration of competing interest.

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# Suicidology and suicide prevention

#### EW591

## Impact of dialectical behavior therapy on incidence of suicidal attempts and non-suicidal self injury among a sample of Egyptian borderline personality disorder patients

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Introduction Dialectical behavior therapy (DBT) is a comprehensive psycho-social treatment developed by Marsha Linehan and originally designed for persons meeting criteria for borderline personality disorder (BPD). DBT is considered as a standard evidence based treatment for suicidal BPD patients in most international guidelines. Although its effectiveness has been proved in multiple studies across different patient populations but almost all the research was conducted in North American or European countries. The current study was the first trial to apply DBT in Egypt with a different language and culture than where the treatment was originally developed.

Objectives Assessment of incidence of suicidal attempts and nonsuicidal self-injury (NSSI) among a sample of Egyptian BPD patients enrolled in an outpatient DBT program.

Aim The aim of the current study was to estimate impact of comprehensive DBT on suicidal attempts and NSSI when applied to Egyptian BPD patients.

Methods Twenty-five BPD patients, 4 males and 21 females, were included in a comprehensive outpatient DBT program for one year and incidence of suicidal attempts and NSSI were calculated.

Results Five patients only attempted suicide again with an incidence of 20% and a mean of one attempt/patient. Seven patients attempted NSSI with an incidence of 28%, an overall 22 incidents and a mean of 3 incidents/patient.

Conclusion Although this was the first time to apply DBT in an Egyptian population, DBT proved to be an effective psychotherapeutic intervention for suicidal BPD patients across regardless of different language or culture.

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

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## EW592

# Factors related to suicidal behavior in korean patients with bipolar disorder: The effect of mixed features on suicidality

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Introduction The aim of the present study was to investigate various risk factors of suicidal behaviors, including the mixed features specifier, in Korean patients with bipolar disorder.