

Methods HCRU was measured at the start of the OL and DB phases, and every 12 weeks during DB until end of study/early withdrawal. Information included hospitalizations, ER visits, day or night clinic stays, outpatient treatment, daily living conditions, and occupational status. Logistic regressions modeled the probability of hospitalization vs. no hospitalization for psychiatric and social reasons, as well as hospitalizations for psychiatric reasons only, during the DB phase. The models controlled for OL baseline hospitalizations, OL phase hospitalizations, and time in study.

Results The analysis set included 483 subjects randomized to PP3M and 512 subjects to PP1M during the DB phase. The odds of hospitalization for psychiatric/social reasons during 1 year for PP1M subjects were 1.16 times the odds of hospitalization for PP3M subjects (95% CI: 0.70, 1.93, $P=0.56$). For psychiatric reasons only, the odds of hospitalization during 1 year for PP1M subjects were 1.63 times the odds of hospitalization for PP3M subjects (95% CI: 0.88, 3.02, $P=0.12$).

Conclusions PP3M and PP1M demonstrated similar trends in hospitalizations throughout the course of the study.

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

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EW572

The effects of fluvoxamine on cognition in patients with schizophrenia

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Introduction Schizophrenia is a severe disease which affects different aspects of behavior, including cognitive functions. The most important fields of cognitive disorders in schizophrenia are working memory, vigilance/attention, learning by oral and visual memory, argument and resolving, analysis rate and social knowledge.

Aims This study was designed to assess the effects of fluvoxamine on cognitive functions of schizophrenic patients.

Method Thirty-six patients with schizophrenia, all male, were treated with 100 mg fluvoxamine and a second generation antipsychotic for 4 weeks and before and after treatment, their cognitive functions were assessed by Wechsler-3 memory scale (WMS-revised) and negative symptoms by scale for the assessment of negative symptoms (SANS).

Results In our study, the average patients' scores increased in Wechsler-3 memory scale (WMS-revised) before and after receiving fluvoxamine ($P<0.001$). This study couldn't show a statistically significant difference between the patients' scores in negative symptoms (SANS test) before and after the treatment course ($P=0.59$) There was a negative statistically significant correlation found between WMS score before and after the intervention and the level of education, living area and cigarette smoking. Increasing scores in the test was statistically correlated with lower education, cigarette smoking and living in rural area.

Conclusion Augmented treatment with fluvoxamine, probably has effects on some parts of cognitive abilities of male schizophrenic patients which are assessable by Wechsler-3 memory scale. Therefore further studies on evaluation of fluvoxamine effects in other fields of cognitive abilities like concentration and attention in schizophrenic patients are still required.

Keywords Fluvoxamine; Schizophrenia; Cognition; Wechsler-3 memory scale

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

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Sexual Medicine and Mental Health

EW578

Internalized homophobia, social pain, severity of depressive symptoms and quality of sexual life among homosexual young adults

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Background Being a homosexual may be burdened by several psychological problems. This is due to the minority stress that results from feeling excluded and it is characteristic of social minorities. Negative beliefs about their psychosexual orientation and sense of exclusion may be the cause of both depressive disorders and internalized homophobia. These factors can affect the quality of sexual life.

Aim The aim of the study is to analyze the relationship between internalized homophobia, social pain and the severity of depressive symptoms and quality of sexual life.

Methods The study included 103 young adults remaining in permanent homosexual relationships. The study was cross-sectional. The study used Beck Depression Inventory, Social Pain Thermometer, Internalized Homophobia Scale and Quality of Sexual Life Questionnaire.

Results It observed the significant correlations between the level of internalized homophobia and a sense of social pain and the severity of depressive symptoms. Both internalized homophobia, and severe social pain and depressive symptoms proved to be significant predictors of reduced quality of sexual life of homosexuals.

Conclusions During the treatment of depressive symptoms and discomfort associated with the sexual life of homosexuals, it is important to take into account the phenomenon of internalized homophobia.

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Sleep Disorders & Stress

EW579

Sleep quality in epileptic children

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Sleep problems frequently coexist in epileptic patient. The effect of them on each the other has been extensively evaluated. Little review exists on the reciprocal interaction of sleep problems and epilepsy in the children.

Aim of study To evaluate prevalence, pattern and risk factors of sleep problems in epileptic children.

Method Eighty-two epileptic children and 40 healthy controlled children were evaluated using children's sleep habits questionnaire – Arabic form and night polysomnography (2 consecutive nights).

Result Prevalence of sleep problem in epileptic children was 45% and 17% of normal control children with significant difference in sleep latency, total sleep time and number of awaking per night with significant prevalence with partial epilepsy, poly therapy and poor controlled epilepsy.

Conclusion Sleep problems are common in epileptic children with close relation to partial epilepsy, number of anti epileptic and poor controlled epilepsy. This is important to deal with it in order to better control of sleep problems in such patient.

Keywords Child psychiatry; Sleep disorders; Epilepsy

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EW580

Correlates of sleep difficulties in young adults: A gender comparison

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Introduction Sleep disturbance is one of the most common health complaints among late adolescents and young adults. Women report more sleep-related complaints than men (Krishnan and Collop, 2006) and more anxiety or depressive symptoms (Voderholzer et al., 2003). Higher levels of repetitive negative thinking appear to be causally involved in the initiation/maintenance of emotional problems (Ehring and Watkins, 2008).

Aims To analyze the sleep difficulties differences by gender and its associations with stress, cognitive emotion regulation, perseverative thinking and negative affect.

Methods Five hundred and forty-nine students (80.1% females) from two Universities filled in the PSS-10 (Cohen et al., 1983; Amaral et al., 2014), CERQ (Garnefski et al., 2001; Castro et al., 2013), PTQ (Ehring et al., 2011; Chaves et al., 2013) and POMS-58 (McNair et al., 1971; Azevedo et al., 1991; Amaral et al., 2013). Three questions were used to access difficulties of initiating sleep (DIS), maintaining sleep (DMS) and early morning waking (EMA).

Results Females reported more sleep difficulties (excluding DIS), stress, perseverative thinking than males. Males reported higher levels in self-blame and blaming-others dimensions. In female sample we found significant correlations between all sleep difficulties and stress, perseverative thinking, emotional regulation (rumination, self-blame, catastrophizing) and negative affect. In male sample only the difficulties of initiating sleep are correlated with stress, perseverative thinking, self-blame and negative affect.

Conclusions There are no gender differences in frequency and most of correlates of DIS. DMS and EMA were higher in females and were related to perseverative thinking and emotional regulation mechanisms in this sample.

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EW582

Sleep disorders among adolescents in Nigeria: The development of an assessment instrument (Sleep Disorders in Nigeria Questionnaire [SDINQ])

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Introduction Nigerian adolescents report various sleep disorders metaphorically based on the local/native description of such disorders. Hence, it is sometimes difficult for clinicians without a good grasp of the nuance in their description to understand their presentation.

Aim To develop a culturally relevant (Nigerian) instrument for assessing sleep disorders.

Methods One thousand two hundred and twenty-seven Nigerian Secondary School adolescents (634 males and 593 females) between 12–19 years with mean age of 15.20 (SD=1.5) were administered a 44 item instrument developed following the DSM (V), American Association of Sleep Medicine's International Classification of Sleep Disorders (ICSD, 2005) criteria, and case reports of sleep disorders. The data was subjected to a Principal Component Analysis using Varimax rotation.

Result Ten factors instead of the original eleven factors suggested by the authors emerged in the analysis and on closer examination and in juxtaposition with cultural nuances, it was found the ten factors were in line with what is generally reported by adolescents. Sleep walking disorders and sleep related movement disorders loaded in one factor labelled sleep movement disorders, while items representing non restorative sleep experiences, sleep talking, sleep paralysis, sleep apnea, circadian rhythm sleep disorder, narcolepsy, insomnia, sleep terror disorder and nightmare disorder loaded on their individual factors. The SDINQ showed a Cronbach Alpha of .916 and a good correlation with subscales of the School Sleep Habits Survey (SSHS).

Conclusions The SDINQ has been found to be a valid and reliable instrument for assessing the presence of sleep disorders among adolescents in Nigeria.

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EW583

Prevalence of restless legs syndrome in professional cyclists

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Introduction Restless legs syndrome (RLS) is a sleep disorder affecting a significant part of general population. Clinically RLS is characterized by abnormal sensations of irresistible urge to move legs, becoming worse at night, and frequently causing insomnia. Consequences of RLS include daytime dysfunction, depressed mood, anxiety and decreased quality of life.

Objectives Determine prevalence of RLS in professional cyclists.

Aims The aim of this study was to examine the prevalence of RLS in professional cyclists. According to our knowledge this is the first research of RLS in professional cyclists.

Methods A total of 43 professional cyclists were asked to complete 4-item questionnaire based on IRLSSG Diagnostic Criteria for RLS. Data from questionnaire was compared to antropometric measurements, epidemiologic data, age of starting trainings and total years of professional performance.