

behaviours. However it also attracts girls with high levels of depressive disorder, and thus provides an opportunity to intervene not just for sexual risks, but also to provide psychoeducation and guidance on adolescent depressive symptoms.

P0241

Schizophrenia and Familial Amyloid Polyneuropathy - A clinical case

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The objective of this paper is to make a reflection about how the comorbidity of psychiatric and organic disorders can create several difficulties for the diagnostic and therapeutic approach of the both situations. The portuguese type of paramiloidosis disease was for the first time observed in 1939 by Corino de Andrade. In Portugal, the major focus of the disease, it presents a geographic distribution that must be known by the clinician. A thirty five's patient clinical case is described, who was hospitalized in the psychiatry hospital with the diagnosis of paranoid schizophrenia. After two months of hospitalization and four years after the beginning of the neurological symptoms, a complete organic study was developed, including gastroenterology and neurology evaluations. A diagnosis of Familial Amyloid Polyneuropathy (transthyretin-methionine 30 positive) was established, co - morbid with the diagnosis of paranoid schizophrenia. The authors concluded that the comorbidity with a mental disorder, in which delirious interpretation of the organic clinical situation was predominant in the clinical feature, and that took some time to be pharmacologically stabilized, associated with the fact that the patient hide that his mother and relatives of the mother side died because PAF, contributed significantly to the delay of the diagnosis. Beyond this, the clinical diagnosis of paranoid schizophrenia and the poor family and social background do not make him a potential candidate for a hepatic transplant. Influencing negatively the patient's coping, they can compromise the success of the transplant.

P0242

Spanish validation of the Index of spouse abuse

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Background and Aim: To assess the psychometric properties of the Spanish version of the Index of Spouse Abuse (ISA), and validate it against external criteria of intimate partner violence (IPV).

Methods: A case control, transversal study was designed. Spanish version of the ISA was administered to 405 women (223 controls and 182 IPV cases). Spanish items weights were developed. Internal consistency was assessed through Cronbach's alfa, and factor structure by means of principal component analysis (PCA). Receiver operating

characteristic (ROC) analysis was used to validate the ISA against external criteria.

Results: PCA analysis yielded two factors that accounted the 69% of variance, and reproduced partially the original factors: physical (ISA-P) and non-physical (ISA-NP). Internal consistency coefficients oscillated between 0,88 and 0,98. For the ISA global score, the AUC value for detecting IPV was 0,99; and 0,89 for detecting physical IPV. The optimal cut-off scores were 13 for detecting IPV, and 15 for detecting physical IPV. For the ISA subscales, 6 was the optimal cut-off score for the ISA-P, and 13 was the optimal cut-off for the ISA-NP.

Conclusions: The Spanish version of the ISA is a valid and reliable instrument for detecting and measuring the intensity of the IPV in Spanish women population.

Keywords: domestic violence; intimate partner violence; ISA; validation

P0243

Block escape in intimate partner violence scale: Development and preliminar analysis of its psychometric properties

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Objective: To design a scale to measure perceived reasons to stay in violent partner relationships, and to carry out a preliminar analysis of its psychometric properties.

Method: A 44 dicotomic items (true/false) self-report scale was designed (more a last open response question), elaborated according to published studies and open interviews with battered women. The questionnaire was administered to a pilot sample of 10 women to test its viability and comprehensibility. The questionnaire was then administered to a sample of 132 battered women. Exploratory factorial analysis was used to establish the underlying empirical structure. Internal consistency was calculated by mean of Cronbach's alfa coefficient.

Results: The factor analysis identified two empirical factors: external factor (situational factor) and internal factor (psychological factors). Cronbach's alphas were 0.856 and 0.811, respectively.

Conclusions: The Block Escape in Intimate Partner Violence Scale is a reliable and easily comprehensible instrument mesuring percibed reasons of permanence with the aggressor. Its usefulness in both setting, clinical and social, will allow design with great effectiveness intervention strategies suitable for each case.

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Keywords: Domestic violence; intimate partner violence; block escape

P0244

Does compliance with postdischarge referral lengthen survival in the community?