to different mental health care units, with an average follow-up period of 9 years and 1 month.

Results About half of the sample were women and half men (49% versus 51%).

Forty-seven percent of the sample are married or have a couple, and 19% are in active employment.

Thirty-two percent have a family history of psychiatric mental disorder written in his digital clinical record.

Seventy-five percent of the sample meets criteria F22, while 25% are diagnosed as other psychoses.

Conclusion This is the largest record of cases registered with delusional disorder to date, in which we describe the biopsychosocial characteristics of this group of patients in the largest Spanish region.

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#### EV640

# Socio-demographic analysis of an early psychosis intervention programme

C.M. Carrillo de Albornoz Calahorro\*, J.A. Rodrigo Manzano, B. Girela Serrano

Hospital Santa Ana, Unidad de Salud Mental, Motril, Granada, Spain \* Corresponding author.

Introduction During the first 5 years of the onset of schizophrenia, the majority of the clinical and psychosocial deterioration takes place.

This period of time is critical in terms of diagnosing the illness and providing effective psychosocial and pharmacological treatment.

Objectives/aims Knowing the demographic profile of users of an Early Psychosis Intervention Programmeto adapt the intervention to their specific needs.

Methods A descriptive statistical analysis of the records of every patient on admission program during year 2014 was carried out. There have been various socio-demographic variables collected such as: sex, age, initial diagnosis, drug consumption, educational level, labor situation, referral source and origin.

Results We found an average age of 26, near the normal curve between 15 and 35 years distribution.

Eighty percent of our simple were men.

Eighty percent were non-affective psychosis as their initial diagnosis.

Abuse toxic in 70%, in all cases cannabis or derivatives.

Education level: 56% primary studies. Thirty percent reached secondary studies. Fourteen percent higher educational level.

In terms of job-training situation: 30% were working, 40% unemployed and 30% studying.

Sixty-five percent were referred from primary care centers, 20% from drug abuse centers and 15% from hospitalization units.

Main nationalities were Spanish 65%, 30% were Moroccan, and 5% other came from other nationalities.

Conclusion It stresses the importance of intervening on dual diagnosis, the need for greater coordination with primary care to improve the detection of cases and the development of the training-labor area in the recovery process.

It is also necessary to evaluate the different characteristics of immigrants included in the program.

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#### **FV641**

## Physicians' burnout: Can we make a difference?

C.A. Moreira \*, G. Sobreira , J.M. Oliveira , M.A. Aleixo
Centro Hospitalar Psiquiátrico de Lisboa, Psychiatry, Lisbon, Portugal
\* Corresponding author.

Introduction Burnout is a commonly observed syndrome in healthcare workers and it has been defined as a psychological condition involving a continuous exposure to stressful work events leading to adverse consequences both in physical and mental health. Persistent pressure can lead to exhaustion, psychological and/or physical distress and may increase the risk of medical errors and decrease job satisfaction, which incites early retirement.

Objective The authors pretend to make a brief review regarding Physicians' burnout, its prevention and management.

Aims To understand and to be capable of dealing with physicians' burnout.

*Methods* The review was based in papers published on PubMed using the following terms: "burnout", "risk factors", "healthcare professionals" and "physicians coaching".

Results Twenty-five to 60% of physicians report burnout across all specialties. Changes in the healthcare environment have created marked and growing external pressures. Numerous studies suggest that the difficulty that physicians face with balancing their personal and professional lives is a major contributor to distress. To reduce stress at work, one should consider two levels of intervention: the individual and the environmental. Multidisciplinary actions that include changes in the work environmental factors along with stress management programs that teach people how to cope better with stressful events showed promising solutions to manage burnout.

Discussions/conclusions Burnout among physicians is a common and serious issue with potentially devastating personal and professional consequences. More interventional research is needed in order to improve psychological well-being, professional career enjoyment as well as the quality of care provided to patients.

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## EV642

### Victimization of the mentally ill

A. El-Missirv

Ain Shams University, Neurology & Psychiatry, Cairo, Egypt

Background Persons with mental disorders living in the community are liable for victimization and are considered as a high-risk group.

Objective To explore the socio-demographic variables and clinical characteristics related to victimization of patients with schizophrenia in comparison to their non-victimized counterparts. Subjects and methods One hundred patients were recruited from the inpatient wards and outpatient clinics of the Institute of Psychiatry, Ain Shams University. They were subjected to Structured Clinical Interview for DSM-IV Axis I diagnosis (clinical version); Positive and Negative Syndrome Scale (PANSS); Global Assessment of Functioning (GAF); Clinical Global Impression (CGI); designed extensive questionnaire to elicit demographic data; inquiry about drug compliance and Victimization Questionnaire.

Results Seventy patients of the studied sample were non-victimized and 30 patients were victimized. Victimized patients were significantly younger, living mainly in urban areas, had less frequent history of bullying at school. There were exposed significantly to higher frequency of family domestic violence and childhood abuse. They scored higher for all subscales and in total PANSS scores and they were less compliant on medication than did their non-victimized counterparts.

Conclusion Studies of victimization of mentally ill did not draw the attention of researchers and clinicians in Arab world. This study proves that victimization is not uncommon among patients with schizophrenia; clinicians should include assessment for victimization of their patients as a routine work. The current study provides preliminary data for clinicians and policy makers to consider strategies to protect patients with various mental illnesses from being victimized.

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#### EV643

# Study of self-perceived health in a clinical sample

A. Fernandez-Quintana\*, M.D.C. García-Mahía Clinical University Hospital of La Coruña, Psychiatry, La Coruña, Spain

\* Corresponding author.

Introduction The assessment of self-perceived health provides an insightful clinical tool when it comes to addressing the subjective perception of social functioning, mental and physical health.

Objective To analyze self-perceived health in patients treated in a primary care clinic and its relationship with other clinical and socio-demographic variables.

Methods A randomized sample of 130 patients, aged 18 years or over, undergoing treatment in a primary care clinic was evaluated. Patients were interviewed following a self-perceived health scale as well as a scale for other clinical and socio-demographic variables. Clinical records were reviewed for prior psychiatric and somatic diagnoses.

Results Overall, the prevalence of somatic disorders in our simple was 92.3%, whilst psychiatric disorders were present in 23% of patients. Only 6% of the sample reported their mental health to be affected to some degree, while 67% declared their physical health to be damaged. Forty-three percent of the sample follows prescribed psychopharmacological treatment. Women showed lower self-perceived health and reported more psychiatric symptoms in accordance with higher actual prevalences of psychiatric disorders. Among those patients with a psychiatric illness, only two reported the will to search for mental health care, whilst most would prefer consulting their general practitioner.

Conclusions Less than half of the patients who have been diagnosed with a psychiatric disorder consider their mental health to be affected. Among those who do report a self-perceived mental health concern, the majority would prefer consulting their general practitioner rather than a psychiatrist.

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

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### EV644

# Motives and behaviors of medical students (mis)using prescription stimulants

G. Fond <sup>1</sup>, F. Berna <sup>2</sup>,\*, P. Domenech <sup>3,4</sup>

- <sup>1</sup> Schizophrenia Expert Center Fondation Fondamental, Creteil, France
- <sup>2</sup> Hôpitaux Universitaires de Strasbourg, Inserm U1114, FMTS, Fondation FondaMental, Psychiatry, Strasbourg cedex, France
- <sup>3</sup> Inserm U955, Translational Psychiatry team, Créteil, France
- <sup>4</sup> Paris Est University, DHU Pe-PSY, Pôle de Psychiatrie des Hôpitaux Universitaires H.-Mondor & Spine Institute, CRICM, UPMC, Inserm UMR\_S 975, CNRS UMR 7225, CHU Pitié-Salpêtrière, Brain & Spine Institute, CRICM, UPMC, Inserm UMR\_S 975, CNRS UMR 7225, CHU Pitié-Salpêtrière, Créteil, France
- \* Corresponding author.

Aims To estimate the prevalence of psychostimulant use in French medical undergraduate and postgraduate students, associated consumption behaviors and motives.

Design A population-based cross-sectional study using a self-administered online survey.

*Participants* A total of 1718 French students and physicians (mean age  $26.84 \pm 7.19$  years, 37.1% male).

Measurements Self-reported lifetime use, motives, sociodemographic and academic features for other the counter (OTC), medically prescribed (MPP), and Illicit (IP) psychostimulant users. Lifetime prevalence of psychostimulant use was 33% (29.7% for OTC, 6.7% for MPP and 5.2% for IP). OTC consumption mainly aimed at increasing wakefulness during competitive exams preparation and internship. OTC consumption was twice more frequent among users of other psychostimulants (MPP and/or IP). Most of OTC consumers began their consumption during exam preparation. Corticoids were the most frequently consumed MPP (4.5%) before methylphenidate and modafinil (1.5% and 0.8%, respectively). Unlike corticoids, methylphenidate and modafinil prescriptions are tightly regulated in France. Motives for MPP consumption were increased academic performance/concentration-memory and wakefulness. In that respect, restrictions on methylphenidate and modafinil prescriptions seem to be effective at limiting misuse. Corticoids were mostly consumed by interns seeking for wakefulness. Overall, 5.2% of the subjects consumed at least once IP, mostly cocaine and amphetamine derivatives. They sought euphoria and/or novelty. Psychostimulant use is common among French undergraduate students, interns and postgraduate physicians. The type of drug used seems to depend mainly on product availability. Increased rates of corticoids consumption for wakefulness purposes suggest another potential public health problem, as corticoids may have severe side effects.

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### **EV645**

# The assessment of social disability in persons with a diagnosis of mental disorder. Preliminary data

T.M. Gondek\*, A. Królicka, B. Misiak, A. Kiejna Wrocław Medical University, Department of Psychiatry, Wrocław, Poland

\* Corresponding author.

Social disability in persons diagnosed with mental disorder is one of the factors preventing them from achieving the broadly defined well-being, even when appropriate and effective treatment is applied. Improvement in the field of social disability is therefore one of the main challenges for the mental health and social welfare policy makers. The second version of the Groningen Social Disabilities Schedule (GSDS-II) is widely used in the assessment of social disability, however the relationship between its degree and many of the clinical and demographic factors have not been investigated thoroughly enough.

The objective of the study is to assess the degree of social disability using GSDS-II as well as to analyze the relationship between the degree of social disability and clinical, social and demographic factors, in patients with a mental disorder diagnosis of F20–F48 according to ICD-10, aged 18–65, in a day ward and an inpatient ward settings.

The paper presents the data gathered from a preliminary sample of 20 patients of both genders diagnosed with mental disorders who gave their informed consent to participate in the study, thus comprising 10% of the targeted total study sample.

Our study, performed on a larger, targeted sample, will provide a better insight into the social functioning of persons with a burden of