

Result The findings indicated that there is a significant difference between adults who were raised by mothers with the aforementioned mental disorders (schizophrenic and depression), as compared to those who were raised by mentally healthy mothers.

Conclusion The style of attachment in adults who were raised by mothers with the aforementioned clinical diagnosis (schizophrenic and depression) have insecure attachments, while the children who were raised by mentally healthy mothers have almost secure attachment style.

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Irritable bowel syndrome (IBS) and stress; a study of international medical school students

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Introduction Irritable bowel syndrome is one of the most commonly diagnosed functional gastrointestinal disorders. Irritable bowel syndrome (IBS) and its association with stress have not been researched in regards to foreign medical students in Cluj-Napoca, Romania.

Objective To establish the prevalence of IBS in foreign medical school students and the relationship with stress.

Methods This observational case-controlled study was carried out in "Iuliu Hatieganu" University of Medicine and Pharmacy in Cluj-Napoca, Romania. The sample size was 102, and the data was collected using an online self-report questionnaire. The 'Rome 3 criteria' was used to diagnose IBS and 'Stressful Life Events Check-list' was used to measure levels of stress.

Results The prevalence of IBS was 24.5%, with females having higher rates (34%) compared to males (16.4%). The types of IBS were IBS-M (mixed form) 8.8%, IBS-D (diarrhoea dominant) 6.9%, IBS-C (constipation dominant) 5.9% and IBS-U (undefined) 2.9%. Students with IBS reported higher social stress compared to students without IBS.

Conclusions More efforts should be made to combat stress that medical students experience in order to reduce the number of IBS cases. This may involve an increased role of the medical school to develop initiatives and support, with the aim of helping medical school students better cope with stress and stressful events.

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

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A non-smoking program in the psychiatric clinic: Eradicating tobacco from the therapeutic space

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Introduction The work describes the well-succeeded experience of the Non-Smoking Program developed in a psychiatric clinic in Rio de Janeiro city, Rio de Janeiro, Brazil.

Objective To treat the tobacco dependence in patients with disorders for the use of substances and other psychiatric disorders. To

transform the clinic therapeutic space in a free tobacco environment.

Aims To promote the restoring of the patients' health integrally, considering the use of tobacco is responsible for a large number of avoidable deaths, in addition to much harm to health.

Methods In a clinic of hospitalization for diverse mental disorders treatment, especially disorders for the use of substances, in the city of Rio de Janeiro, Rio de Janeiro, Brazil, was simultaneously established a non-smoking treatment program. It was used the pharmacological therapy, associated with cognitive-behavioral therapy, occupational therapy and moderate physical activity. The average time of permanence in the non-smoking program was on average 90 days.

Results There was significant acceptance to the proposed program. In the long-term monitoring, over 12 months, it was evidenced that most patients found themselves in tobacco abstinence.

Conclusion The project achieved its objectives, promoting the tobacco abstinence in patients with comorbidities in hospital treatment. The study proved that it is possible to remove tobacco in patients dependent on this substance during a psychiatric hospitalization.

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1398

Mechanical restraint and staffing level in a psychiatric ward

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Introduction The use of coercion raises ethical dilemmas, as it deprives patients of their autonomy. In Denmark, the subject has gained political attention, and decreases in the use of coercion are demanded. In the attempt of reducing the use of coercion, it is of interest to obtain more knowledge about the circumstances bound to it.

Aim The aim of this study was to investigate a possible correlation between the incidence of mechanical restraint (MR), and staffing level, staff demographics, patient characteristics, type of shift (day/evening/night) and change of shifts.

Methods A naturalistic descriptive method was used to study cases of mechanical restraint in patients admitted to a psychiatric ward. In the study period of one year, 114 cases of MR were carried out. In 66% of cases, the patient was diagnosed with borderline personality disorder. Each case of MR was obtained from Statens Serum Institut's Electronic Reporting System. The care workers from each shift were identified using duty rosters. The statistical package SPSS version 20 was used for data processing, including a logistic regression analysis.

Results A significant association was found between the use of MR and the presence of male care workers on the ward, OR = 1.639, 95% CI: 1.163–2.311, $P=0.005$. The risk of MR is increased during evening shifts, compared to day and night shifts, OR = 1.868, 95% CI: 1.165–2.995, $P=0.009$. No significant associations were found between MR and staffing level, age, education, or experience of care workers.

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