- <sup>3</sup> University of Athens, Medical School, 1st Department of Psychiatry, Aeginition Hospital, Athens, Greece
- \* Corresponding author.

Introduction To our knowledge, a limited number of studies address criminality among psychiatric patients as depicted in legal files.

*Objectives* The objective of the present study was to provide demographic, psychiatric, legal/criminal data about psychiatric patients in Greece.

Methods Legal case files of 100 adult subjects, 90 male/10 female, 88 Greeks/12 foreigners were reviewed.

Seventy eight percent of the subjects had at least one psychiatric evaluation prior to the commitment of the crime. The main diagnoses at the time of the criminal act were: schizophrenia spectrum psychosis (18%), anti-social/borderline/mixed personality disorder (15%), substance use disorder (15%), alcohol use disorder (10%), depressive affective disorder (6%), mixed anxiety/depressive disorder (6%), bipolar disorder (5%), anti-social personality disorder/substance use disorder (5%), schizophrenia/substance use disorder (3%). In 11% the diagnosis was unknown. Eighty four percent of the crimes committed were homicides/attempted homicides, 6% assaults/(attempted) homicides, 3% property crimes/(attempted) homicides and below 3% assaults, property crimes, sexual offences, drug crimes. The weapon used was a knife/sharp object (42%) or a gun (40%). Perpetrator and victim were strangers in 25% of the cases, just acquaintances in 14%, had a professional relationship in 7%, their relationship was conjugal (15%), they were partners (13%) or relatives (7%). In persons with schizophrenia spectrum psychosis the victims were relatives/spouses in 41.2%, while in other diagnoses the respective percentage was 21.5% (P = 0.044).

Conclusions In accordance to the international literature, there is a vast need for further research in order to improve forensic psychiatric services and prevent criminality among psychiatric patients. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.910

## EV0581

## Criminal insanity and psychiatric diagnoses in Greek penal cases

G. Tzeferakos <sup>1,\*</sup>, M. Papaliaga <sup>2</sup>, C. Papageorgiou <sup>3</sup>, P. Bali <sup>1</sup>, A. Douzenis <sup>1</sup>

- <sup>1</sup> University of Athens, Medical School, 2nd Department of Psychiatry, Attikon General Hospital, Athens, Greece
- <sup>2</sup> University Hospital of Larissa, Department of Psychiatry, Larissa, Greece
- <sup>3</sup> University of Athens, Medical School, 1st Department of Psychiatry, Athens, Greece
- \* Corresponding author.

Introduction To our knowledge, few studies address the issue of criminal responsibility among psychiatric offenders. In Greece, articles 34 and 36 of the penal code regulate criminal insanity and diminished responsibility, respectively.

*Objectives* The objective of the present study was to provide psychiatric/legal data considering the appeal to articles 34/36 of the Greek penal code.

Methods Legal case files of 100 adult subjects, 90 male/10 female, 88 Greeks/12 foreigners were examined.

Results According to the first degree court, one defendant was found criminally insane, 29 with partial responsibility, while the rest were regarded as fully capable. The decisions of the court of appeal/the supreme court of appeal were 2 criminally insane, 36 partially responsible and 62, fully criminally responsible. The decisions were unanimous in 78% of the cases.

The most common diagnoses were schizophrenia spectrum psychosis (18%), antisocial/borderline/mixed personality disorder

(15%) and substance use disorder (15%). Court decisions of criminal insanity/diminished responsibility were higher when the perpetrator had an Axis I diagnosis (47.5%), significantly lower in cases of personality disorder (22.2%) and even lower in cases of substance use disorder (16.7%). In patients with prior hospitalizations the percentage of criminal insanity/diminished responsibility was 55.6%, significantly higher than in cases without (24.4%).

Conclusions Schizophrenia is the most common mental disorder correlated with offenders criminally insane/partially responsible, while a history of psychiatric hospitalization is a very strong positive predictive factor for the successful appeal of the aforementioned articles.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.911

## EV0582

## Agreement between psychiatric evaluations and court decisions concerning criminal responsibility

G. Tzeferakos <sup>1</sup>,\*, M. Papaliaga <sup>2</sup>, C. Papageorgiou <sup>3</sup>, A. Douzenis <sup>1</sup>, P. Bali <sup>1</sup>

- <sup>1</sup> University of Athens, Medical School, 2nd Department of Psychiatry, Attikon General Hospital, Athens, Greece
- <sup>2</sup> University Hospital of Larissa, Department of Psychiatry, Larissa, Greece
- <sup>3</sup> University of Athens, Medical School, 1st Department of Psychiatry, Aeginition Hospital, Athens, Greece
- \* Corresponding author.

Introduction To our knowledge, a relatively small number of studies address the agreement between psychiatrists and court decisions concerning criminal responsibility among psychiatric offenders.

Objectives The objective of the present study was to examine the agreement between psychiatric evaluations and court decisions in Greek penal cases.

Methods Legal case files of 100 adult subjects, 90 male/10 female, 88 Greeks/12 foreigners were studied, and agreement was assessed by the  $\kappa$  (kappa) statistic.

Results Seventy eight percent of the subjects had had contact with psychiatric services before the commitment of the crime. The most common diagnoses were schizophrenia spectrum psychosis (18%), antisocial/borderline/mixed personality disorder (15%) and substance use disorder (15%). In 30% of the cases criminal insanity/partial responsibility was attributed in the first-degree court. The presence of a psychiatrist (n = 63), attending, defense, prosecution or appointed by the court, significantly increased the possibility of such an attribution (41.3% versus 10.8%).

The highest agreement ( $\kappa$  = 0.780) was observed between court's decision and the evaluation of the psychiatrist appointed by the court, in the 35 cases in which such an expert was present (P<0.001). Very significant agreement ( $\kappa$  = 0.805) was observed between the decisions of second and first-degree courts (P<0.001). In 91% of the cases, the decisions remained unchanged.

Conclusions Criminal insanity/diminished responsibility, were attributed in 30% of the reviewed cases. The presence of a psychiatrist already at the first-degree court is a prerequisite for such an attribution, especially when, he is appointed by the Court.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.912