load. In the third study the working memory domain was investigated using four different tests and single scores were not included therefore it was impossible to compare N-back data.

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Self-Concealment Scale: Validation of two Portuguese versions

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Introduction   Self-Concealment Scale (SCS) is composed of ten items to measure self-concealment, defined as a tendency to conceal from others personal information that one perceives as distressing or negative (Larson and Chastain, 1990).
Objective   To investigate the psychometric properties of the SCS-10 Portuguese version and of an adapted version containing two additional items specifically focused on self-concealment related do health problems (physical and psychological)–SCS-12.
Methods   The Portuguese version of the SCS-12 and other validated questionnaires designed to evaluate self-reported health, perfectionism and optimism-pessimism were administered to a convenience sample of 555 adults from the community (60.5% females; mean age = 43.49 ± 10.565).
Results   The SCS-10 and SCS-12 Cronbach's alphas were $\alpha < 0.80$. In both versions, all the items contribute to the internal consistency. The factor analysis, following the Kaiser and the Cattel's Scree Plot criteria, revealed that SCS-10 is unidimensional and that SCS-12 reliably and validly evaluates two dimensions: F1 Keeping secrets (Explained variance = 48.60%; $\alpha = 0.816$), F2 Personal concealment including health problems (9.65%; $\alpha = 0.797$). The pattern of correlations of the SCS dimensional and total scores was as follow: negative low correlations with physical health (@−0.20), negative moderate correlations with psychological health (@−.30), moderate correlations with self-oriented perfectionism, social-prescribed perfectionism (@0.25) and optimism (@0.20).
Conclusions   The Portuguese versions of SCS have good reliability and validity (construct and convergent-divergent). The factorial structure partially overlaps with the original. SCS could be useful for research proposes, namely in an ongoing project on the role of the mentioned personality traits on illness and health behavior.

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Perseverative negative thinking prospectively mediates the relationship between perfectionism and psychological distress

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Introduction   We have recently found that Perfectionism and Perseverative Negative are both correlates of psychological distress/PD and that PNT mediates the relationship between perfectionism and PD (Macedo et al., 2015).
Objectives   To investigate if perfectionism and PNT are prospectively associated to PD and if PNT is a longitudinal mediator between perfectionism and PD, controlling for perceived stress and gender.
Methods   A total of 227 university students (80.1% girls) filled in the Portuguese validated versions of Perseverative Thinking Questionnaire (PTQ), Multidimensional Perfectionism Cognitions Inventory (MPCI), Profile of Mood States and Perceived Stress Scale, with an additional item to evaluate perceived social support/PSS at T0 and after approximately one year (T1) (Mean months = 12.77 ± 1.137). Only variables significantly correlated with the outcomes (Tension/Anxiety at T1 and Depression at T1) were entered in the conditional process analysis. The moderating role of perceived support on the link between Concern over Mistakes (MPCI) and psychological distress and between PTQ total score and psychological distress (anxiety and depression separately) was examined via conditional process analyses.
Results   The estimated models were significant ($F = 4.257$, $P = .002$; $F = 6.476$, $P < .001$) explaining 15.9% of tension-anxiety and 25.5% of depression variance. A significant conditional indirect effect of PTQ total score on psychological distress at average and higher levels of perceived support was found, in both models (anxiety and depression). On the contrary, the two models showed a non-significant conditional direct effect of Concern over Mistakes on psychological distress only at any level of perceived support.
Conclusion   PNT prospectively mediates the relationship between negative perfectionism and PD.
Disclosure of interest   The authors have not supplied their declaration of competing interest.

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Effects of different types of instruction on the Scores of PID-5 profile

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Introduction   Section III of 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) includes a hybrid model of personality pathology, in which dimensional personality traits (PTs) are used to derive one of six categorical Personality Disorder (PD) diagnoses. The Personality Inventory for DSM-5 (PID-5) has been developed to assess PTs within this new system.
Objectives   PT is a tendency to feel, perceive, behave, and think in relatively consistent ways across time and situations. PD diagnosis is generally stated if a pattern of maladaptive PTs persists at least 5 years. Nevertheless, the PID-5 instruction does not cover duration of symptoms.
Aims   We have explored the effect of two different types of instructions, in which duration of symptoms is or is not explicitly mentioned, on the PID-5 scores. Moreover, we have asked whether the scores differ in psychiatric patients and healthy individuals.
Methods   Differences between original and modified instructions of the Czech PID-5 version have been evaluated in a group of 62 psychiatric patients and 38 healthy controls; each respondent has been administered both instruction types in random sequence. ANOVA