

with delirium using DRS-R98 were more likely discharged to an institution ($z = 2.12$, $P = 0.03$)

Conclusion Assuming a direct association between delirium and examined outcomes (mortality, loss and discharge destination) different classification systems for delirium identify populations with different outcomes.

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

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EV0286

Proportions of anxiety and depression symptoms in adult cleft patients and non-cleft patients with skeletal malocclusions

V. Medvedev^{1,*}, Y. Fofanova¹, V. Frolova¹, A. Drobyshev²

¹ PFUR University, Chair of Psychiatry, Psychotherapy and Psychosomatic Pathology, Moscow, Russia

² Moscow State University of Medicine and Dentistry, Moscow, Russia

* Corresponding author.

Introduction Diagnosis and treatment of patients with craniofacial anomalies such as cleft lip and palate and skeletal malocclusions present a challenge to public health. Dentofacial abnormalities may be associated with depressive and anxiety disorders and poor quality of life.

The aim of this screening study was to evaluate and to compare the rates of anxiety and depression in cleft patients and non-cleft patients with skeletal malocclusions.

Methods The study used psychometric method-HADS and State Trait Anxiety Inventory were used. The first group consisted of cleft patients, the second group consisted of non-cleft patients with skeletal Class II, Class III and anterior open bite malocclusions; the third group was control.

Results Study sample consists of 42 patients (33 females; 24 ± 7.2 years). In the 1st group, anxiety symptoms were detected in 34.7%; depression symptoms - in 17.2% of patients, high rates of reactive anxiety were registered in 35.8%. In the 2nd group, anxiety symptoms were detected in 29.6% of patients; depression symptoms - in 13.1% of patients, high rates of reactive anxiety were registered in 34.2%. In the 3rd group anxiety (18.7%) and depression (8.3%) symptoms and high rates of reactive anxiety (17.7%) were registered significantly less often than in 1st and 2nd groups ($P < 0.005$, $P < 0.001$ and $P < 0.001$ respectively).

Conclusions Our data suggest that cleft-patients and non-cleft patients with skeletal malocclusions have statistically significant higher rates of anxiety and depression than controls and require orthodontic-surgical treatment that should be organized with the assistance of psychiatrist.

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EV0287

Causeless appearance discontentment in patients of plastic surgeons and cosmetologists: Risk factors and patterns of dynamics

V. Medvedev*, V. Frolova

PFUR University, Chair of Psychiatry, Psychotherapy and Psychosomatic Pathology, Moscow, Russia

* Corresponding author.

Introduction Though phenomenon of dysmorphic disorder has been studied extensively clinical dynamical characteristics of this disorder are still being investigated.

Aim of this study was to evaluate patterns of dynamics and risk factors of body dysmorphic disorder in patients of plastic surgeons and cosmetologists.

Methods We included adult patients of Maxillofacial Surgery and Cosmetology departments of Moscow State University of Medicine and Dentistry (from January 2010 to May 2016) with unconfirmed “facial deformity” diagnosed with dysmorphic disorder (F45.2 and F22.88 according to ICD-10). The study used clinical psychopathological method with follow-up period 1–3 years. Data from clinical psychopathological assessment were processed using correlation analysis and non-linear regression analysis by means of logistic regression method.

Results Study sample consisted of 103 patients (78.6% female; mean age 33.4 ± 4.7 years). Statistically significant chronobiological (age, hormone fluctuations, genesial cycle) and psychosocial (financial changes, forced separation, bereavement, loss of job, reduction of social activity, conflict situation, sexual dysfunction, violation of law, diagnosing of somatic disease) risk factors for dysmorphia in different life periods have been established. Strong correlations were found between dysmorphic disorder heterogenic clinical picture (overvalued–33%, affective–24.3%, hypochondric–23.3%, obsessive-compulsive–10.7%, delusional–8.7%) and patterns of dynamics (phasic–41.7%, recurrent–33%, chronic–25.3%). Our data suggest that dysmorphia manifests in any age group and in 74.7% cases is not continuous.

Conclusion Our findings allow to conduct focused diagnostic search, prophylactic psychotherapeutic interventions and early psychopharmacological treatment in individuals with identified risk factors for dysmorphic disorder.

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

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EV0288

Behavioral manifestations post hemispherectomy due to Sturge-Weber syndrome—A case of success

J. Melim*, A. Batista, A. Tarelho, R. Araújo, S. Fonseca

Centro Hospitalar de Leiria, Psychiatry, Leiria, Portugal

* Corresponding author.

Introduction Sturge-Weber syndrome or encephalotrigeminal angiomatosis is an uncommon neurocutaneous syndrome that manifests with vascular malformations involving the brain, eye and skin; Severe cases present with refractory seizures, sometimes requiring major surgery such as hemispherectomy. Most of the times, some degree of mental retardation and behavioral problems are associated, requiring use of psychotropic medication and other contention strategies. This report describes the case of a 19-year-old boy who was submitted to a left hemispherectomy by the age of one, and was still able to successfully complete basic education. He started presenting severe behavioral problems, with aggressive outbursts, by the beginning of adulthood, having been committed to psychiatry ward. By the age of 22, the patient finds himself calm and functional considering his limitations, with no need for hospital admission for 2 years.

Objectives/aims To describe a clinical case whilst reviewing literature concerning this matter.

Methods Case report with complete clinical history and medical data. Non-systematic review of PubMed database under the terms “Sturge-Weber disease”, “Hemisferectomy”, “behavioral disorder due to organic causes”, “post hemisferectomy out-comes”.

Results/discussion Although presenting with severe arteriovenous malformation, refractory epilepsy and left hemispherectomy, the patient was able to conclude basic instruction; He has lived with his family until the age of 19, when he started displaying disruptive behaviour; after 3 hospital admissions and perfecting

psychotropic drugs treatment, the patient was admitted to an institution for rare diseases patients. Since then he has experienced a calm and functional life, with trained professionals who can offer the non-pharmacological approaches he needs.

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EV0289

A psychiatric liaison team at the university medical services: A pilot experience

S. Morais^{1,2,*}, J. Silva Ribeiro¹, A. Melo³, M. Rodrigues³, T. Pereira³, C. Lavaredas³, A. Queirós³, N. Madeira^{1,2}

¹ Coimbra Hospital and University Centre CHUC, Psychiatry Department, Coimbra, Portugal

² University of Coimbra, Faculty of Medicine, Coimbra, Portugal

³ University of Coimbra, University Medical Services, Coimbra, Portugal

* Corresponding author.

Introduction University students represent a specific population with concerns, burdens and worries that differ from other age and occupation groups. Students' experiences are often exciting and empowering, yet facing multiple stressors that may trigger various forms of psychopathology. Our psychiatry department created a specific liaison service for university students in order to provide an easy and quick access to this medical speciality, included at the Multidisciplinary University Medical Services.

Aims To characterize a sample of college student users of our Psychiatry Liaison Unit regarding socio-demographic and clinic variables.

Methods Socio-demographic and clinic characterization was undertaken in all students observed during sixteen months (1st April 2015–30th July 2016).

Results Fifty-three outpatients were observed: 35 females (66%) and 18 males (34%), aged between 18 and 39 years old (average: 23.94; median: 23). The majority was Portuguese and lived originally in urban areas. A total of 75.3% were displaced and 60% lived with colleagues while 84.9% attended an undergraduate degree, and 38% studied at faculty of Science and Technology. Clinically, 79.2% were referenced by the University Medical Services, and adjustment disorders (ICD-10 F43.2) were the most frequent diagnosis. Relatively to suicidal behaviors and self-harm, 5.7% did self-cutting, 49.1% took an antidepressant combined with another psychotropic drugs, and 81.1% maintained cognitive-behavioral interventions.

Conclusions The typical university students' psychiatry outpatient was of female gender, in an undergraduate degree, displaced and living without their family. The most frequent diagnosis was adjustment disorder, and about a quarter were successfully discharged. Multidisciplinary University Medical Services located near to students can easily refer patients to Psychiatry Liaison Units, allowing diagnosis and intervention at early stages of mental disease.

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EV0290

Somatogenic depression on cardiovascular disease patients

B. Mykhaylov^{1,*}, V. Mykhaylov², O. Kudinova¹

¹ Kharkiv medical academy of postgraduate education, Psychotherapy, Kharkov, Ukraine

² Kharkiv National Medical University, Psychiatry, Kharkiv, Ukraine

* Corresponding author.

In research, based on the systematic approach of evaluating results of complex clinical-psychopathological, psychodiagnostic investigation myocardial infarction and cerebral stroke patients the clinical structure features, regularities in the formation, development and course of somatogenic depression and associated disorders on these patients was determined. At patients with cardiac infarction in acute period the pain syndrome is the main one, leads to severe psycho-emotional disorders. Against the background of cognitive function preservation phobic, anxiety and depressive symptoms prevail, their intensity depends on the severity of pain. Subsequently, the primary psycho-emotional constituent element disappeared and anxiety-depressive disorders developed along with hypo and anozognostical type of personal condition perception. At cerebral stroke, patient's disorders of level of consciousness were primary with cognitive and asthenic disturbances with subsequent formation of psycho-emotional disorders, anxiety and depressive disorders with hypochondrical elements on the basis of persistent cognitive impairments.

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EV0291

System of early medical and psychological support among patients with acute physical conditions

B. Mykhaylov^{1,*}, B. Fedak², O. Kudinova¹

¹ Kharkiv medical academy of postgraduate education, Psychotherapy, Kharkiv, Ukraine

² Regional Clinical Hospital Centre of Urgent medical care and accident medicine, Kharkiv, Ukraine

* Corresponding author.

Basing on a systematic approach to assessing the results of a comprehensive clinical, clinical and psychological psychodiagnostic investigation of 605 patients with acute physical condition, had been established clinical model of phenomenology and pathogenetic mechanisms of formation of mental sphere disturbances. Basing on the clinical data had been identified clinical variants of mental disorders development depending on the degree of severity: somatogenically, due to asthenic syndrome nosogenic reactions of psychological maladjustment, nosogenic neurotic disorders. Had been determined pathogenetic mechanisms of mental disorders, taking into account the stratification of various parts, highlighted psychophysiological level, emotional functioning, motivation, personal performance. Design and implementation of integrative and differentiated system of early medical and psychological support of patients with acute physical condition based on the principles of phasing, consistency and comprehensiveness, its effectiveness had been evaluated from the standpoint of evidence-based medicine.

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

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EV0292

Multiphasic personality inventory on pneumo- or hemo-thorax: Retrospective cross-sectional analysis of military candidate in Korea

B. Nam^{1,*}, M.C. Ahn¹, T. Kim²

¹ Konkuk university, psychiatry, Chungju, Republic of Korea

² Gongju National Hospital, Psychiatry, Gongju, Republic of Korea

* Corresponding author.

Objectives The aim of this study was to identify association between pneumo- or hemo-thorax and psychological distress using the Military Personality Inventory (MPI).