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The aim of this study was to analyse frequency of embitterment in war veterans with Posttraumatic stress disorder (PTSD) as well as the potential impact of embitterment on the development of chronic PTSD.

**Patients and methods** It was analyzed 174 subjects (from Health Center Zivinice/mental health center) through a survey conducted in the period from March 2015 to June 2016, of which 87 war veterans with PTSD and control subjects 87 war veterans without PTSD. The primary outcome measure was the post-traumatic embitterment disorder self-rating scale (PTED Scale) who contains 19 items designed to assess features of embitterment reactions to negative life events. Secondary efficacy measures included the clinician-administered PTSD scale–V (CAPS), the PTSD checklist (PCL), the combat exposure scale (CES), the Hamilton depression rating scale (HAM-D), the Hamilton anxiety rating scale (HAM-A) and the World health organization quality of life scale (WHOQOL-Bref). All subjects were male. The average age of patients in the group war veterans with PTSD was 52.78 ± 5.99. In the control group, average age was 51.42 ± 5.98. Statistical data were analyzed in SPSS statistical program.

**Results** Comparing the results, *t*-tests revealed significant difference between group veterans with PTSD and control group ( $t = -21.21$ ,  $P < 0.0001$ ). War veterans group with PTSD ( $X = 51.41$ ,  $SD = 8.91$ ), control group ( $X = 14.39$ ,  $SD = 13.61$ ).

**Conclusion** Embitterment is frequent in war veterans with PTSD.

**Keywords** Embitterment; Posttraumatic embitterment disorder; Posttraumatic stress disorder; War veterans; Bitterness  
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## EW0741

### The role of personal value preferences in predicting army stress

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**Background** The military is a stressful environment, and many service persons experience army stress. Therefore, it is important to understand the factors affecting army stress and stress resiliency.

**Objective** The present study examines the connections between personal value preferences and army stress, applying the value congruency paradigm.

**Method** Male soldiers serving in three combat units in the Israeli Defense Forces participated in the study ( $n = 257$ ).

**Results** The results obtained demonstrated that personal value preferences explained a significant proportion of the variance in army stress beyond the socio-demographic variables. A lower stress level was associated with a higher preference for the values of societal security, conformity, achievement, and universalism, and with a lower preference for the face and personal security values.

**Conclusions** The research promotes our understanding of the relationships between general motivational goals expressed in personal value preferences and stress in the military context. In addition, the results obtained indicate the possible relevance of using values for selecting and preparing recruits who will most likely adjust well to the army framework. Finally, some value-oriented interventions that may be used for promoting the soldiers' psychological adjustment during their army service are suggested.

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## EW0742

### Is auto-noetic recollection of threat in PTSD related to impaired inhibitory skills?

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**Introduction** Intrusive traumatic reminiscences are among the most distressing and salient characteristics of post-traumatic stress disorder (PTSD). Associated with involuntary onsets, emotional disturbances and consciousness-related impairments, such symptoms suggest that memory functioning could be impaired in PTSD. While there is a growing body of research on experimental assessments of memory in patients with PTSD, inconsistent results remain.

**Objective** Using an experimental methodology, this study aims to measure memory in PTSD in consideration of central features of intrusive symptoms, especially emotional, inhibitory and consciousness-related memory impairments.

**Method** 34 patients diagnosed with PTSD were compared with 37 non-PTSD controls on an item-cued directed forgetting paradigm for emotional words combined with a remember/know recognition procedure.

**Results** Results confirmed prior findings of an increased and peculiarly conscious recognition of trauma-related words in PTSD. Interestingly, our results showed that, despite general memory inhibitory deficits, PTSD patients, if requested, presented a preserved ability to inhibit this improved recollection of trauma-related words.

**Conclusion** While our findings highlight a biased memory functioning in favour of threatening stimuli in PTSD, inhibitory deficits for such information was not reported to play a role on this effect. Conversely, it seems that instead of inhibitory deficits, patients presented a preferential treatment of threat concordant with vigilant-avoidant models of information processing. Focusing on memory impairment in treatment for PTSD appears of prime importance. Our findings regarding preserved inhibitory skills for threat memories in the disorder could be an interesting clue for therapeutic interventions on intrusive symptoms.

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## EW0743

### A case series: Efficacy of short term EMDR on patients with persistent complex bereavement disorder (PCBD)

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Grief is a normal response to loss of someone to whom a bond was formed; however, prolonged grief is considered pathological. Persistent complex bereavement disorder (PCBD) is defined as a persistent longing for the deceased over 12 months. Several treatment ways have been used for traumatic loss including eye

movement desensitization and reprocessing (EMDR). In the current case series, effectiveness of EMDR on three PCBD patients will be indicated. Three patients applied to the clinic with similar complaints based on different traumatic backgrounds; commonly, all experienced death of a first-degree relative. Complaints of the patients were over-thinking about the deceased, sleep disturbances, self-blaming, social isolation, avoiding talks about lost relative, and loss of interest in activities. After pre-interviews, they were advised EMDR therapy. One session of EMDR was applied to two of the patients, and two EMDR sessions were conducted on one of them. After the sessions, the patients reported not feeling guilty about the loss anymore, returning their normal routines, feeling better, and showing decreased avoidance. Additionally, the scores of scales (CAPS, BAI, BDI, and IES-R) significantly declined. EMDR therapy can show successful results in a shorter time than other treatment ways used for PCBD treatment [1].

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

**Reference**

#### Reference

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#### EW0744

### Confirmatory factor analysis of the perinatal depression screening scale-24

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**Introduction** Pereira et al. (2013) adapted to the antenatal period and validated a shorter version of the original 35-items Postpartum Depression Screening Scale (PDSS [1]), composed of 24 items, selected from the exploratory factor analysis matrix. In their study, the researchers considered this version a useful alternative to evaluate depressive symptoms in pregnancy, taking into account its reliability, concurrent validity and satisfactory combinations of sensitivity and specificity to screen for antenatal depression.

**Aim** To confirm the four dimensions' structure of the PDSS-24 using confirmatory factor analysis.

**Methods** 616 women (mean age:  $32.29 \pm 4.466$ ) in the second trimester of pregnancy (mean weeks of gestation =  $17.13 \pm 4.929$ ), with uncomplicated pregnancies, completed the PDSS-24 while waiting for their routine prenatal consultation at local health medical centers.

**Results** The 4-dimensional model of PDSS-24 presented good fit ( $\chi^2_{[242]} = 893,275$ ; RMSEA = 0.067, CFI = 0.934, TLI = 0.94, PGFI = 0.717;  $P < .001$ ). The PDSS-24 Cronbach's alpha was  $\alpha = 0.90$ ; all factors presented good/excellent reliability: Derealization and failure ( $\alpha = 0.87$ ); Concentration difficulties and anxiety ( $\alpha = 0.81$ ); Suicidal ideation ( $\alpha = 0.94$ ), and sleeping difficulties ( $\alpha = 0.89$ ).

**Conclusion** This further validation study emphasizes that PDSS-24 is an adequate measure of antenatal depressive symptoms. To better distinguish it from the version to use in the postpartum (PDSS-21 [2]), from now on, we will denominate it perinatal depression screening scale-24.

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

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#### EW0745

### The effectiveness of first-time-mother parent education for infant interaction and sense of parenting competence during the first year in Taiwan

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**Background** When new mothers do not understand how to interact with their newborn babies, they would increase anxiety, even decrease the quality of parent-infant interactions. Previous studies indicate that the postpartum parenting education for first-time-mothers can improve the quality of mother-infant interactions in first two months. This study aimed to evaluate the long-term effectiveness of parenting education for postpartum women during the first year.

**Methods** The study recruited 81 healthy first-time-mother infant dyads from the medical center in Taipei city. The experimental and control groups received extra education by way of a 40-minute videotape and normal postpartum care, respectively. Data from around first week (T1), followed by the third (T2), sixth (T3), ninth (T4), and twelfth (T5) month postpartum are collected. Assessment scales such as the Edinburgh perinatal depression scale (EPDS), the Chinese version of the parenting sense of competence scale (C-PSOC), and the Nursing child assessment teaching scale (NCATS) used for videotaped mother-infant interactions measurement were used in the study.

**Results** The analytical results show that the quality of mother-infant interaction increased at T2, T3, T4, and T5 in the experimental group (Fig. 1). No different change in maternal sense of competency was found in the experimental and control groups from T1 to T4. However, a positive change in sense of parenting competency at T5 was found in the experimental group (Fig. 2). No difference in postpartum depression was found between the two groups (Fig. 3).

**Conclusions** The first-time-mothers parent education has long-term effectiveness in the mother-infant dyad interaction quality.