Conclusions We developed tools to measure disease–specific biomarkers in blood samples of patients for identifying individuals at the greatest risk for future suicide attempts.

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

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EV1490

Risk factors for suicide in the transgender community

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Introduction Approximately 41% of transgender people attempt suicide at least once in their lives compared to the rate of 5% in the general population Transgender patients who have attempted suicide once have a nearly 40% chance for making a third attempt in their lifetime. Addressing the high rate of suicidality among transgender people must be an important clinical concern during treatment. Screening for suicidal ideation is important when working with the transgender community. Knowing the risk factors that affect the transgender community and creating interventions to ameliorate these risk factors can decrease the negative outcomes.

Method A literature review of articles pertaining to the transgender community and suicide was performed. Of 20 articles reviewed, 14 were pertinent.

Results The literature review showed several unique risk factors contribute to the high rate of suicide in this population: lack of family and social supports, gender-based discrimination, transgender-based abuse and violence, gender dysphoria and bodyrelated shame, difficulty while undergoing gender reassignment, and being a member of another or multiple minority groups.

Discussion Aiding the transgender patient to develop coping mechanisms for dealing with negative societal pressures and skills in widening their social supports may help to reduce risk factors and increase well-being for transgender patients. Assessing suicidal ideation in transgender patients, connecting them with contacts in the transgender community and utilizing CBT based techniques to reduce dysphoria and to aid in coping may reduce risk of suicide attempts. More research is needed in specific interventions in the transgender community.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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e-Poster viewing: Training in psychiatry

EV1491

Improving medical student empathy: Initial findings on the use of a book club and an old age simulation suit

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Introduction Empathy is critical to the development of professionalism in medical students, but evidence suggests that empathy actually declines over the course of undergraduate medical education.

Objectives Improving medical student empathy by encouraging students to think about the person behind the illness.

Methods Two interventions were studied. From December 2015 until November 2016, a fourth year psychiatry medical student book club was conducted. Students were asked to read an autobiography of a lived experience of psychosis. The old age simulation suit aims to simulate the sensory and physical impairments faced by older adults with age related illnesses. A training session provided a transient experience of old age for the students.

Results Forty-four students completed the feedback on the book club. Twenty-eight (64%) stated that they strongly agreed with the statement 'the book club encouraged me to consider the person behind the illness'. Thirty-nine (89%) stated that after attending the book club their empathy towards people with mental health problems had increased. Eleven students completed full feedback following the old age simulation session. Empathy statements relating to living in an ageing body improved from the pre-test median score of 4 (range 1–7) to a median score of 6 (range 2–8) post-teaching session. Empathy statements focusing on sensory and physical impairments had pre-test score median of 3 (range 1–7) and post-test median 8 (range 3–9).

Conclusions Feedback from these sessions has demonstrated that with a little creativity, empathy training can be delivered to medical students with a positive impact.

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

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EV1492

Why a multidisciplinary workforce needs a multidisciplinary education team: Our experiences of providing integrated training in a community and mental health service

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Introduction North East London NHS Foundation Trust (NELFT) provides an extensive range of integrated community and mental health services for people living in London serving a population of 1.5 million people. With an annual budget of £325 million NELFT is one of the largest community service providers in the United Kingdom (UK). NELFT is responsible for the education and training of the entire workforce and in August 2016, it employed a nurse fellow to work with the medical education fellows so it could focus on multidisciplinary team (MDT) teaching.

Objectives (1) Providing MDT teaching by delivered by a MDT medical education team.

- (2) Improving the training experience of all trainees, nurses and allied health professionals in NELFT.
- (3) Improving physical health knowledge for mental health staff.
- (4) Improving mental health knowledge of physical health staff.

Methods Two psychiatrists and one nurse manager worked together on joint projects to deliver the MDT teaching. Teaching sessions where at least one psychiatrist and nurse manager delivered teaching on serious incidents affecting patient care, identification and management of sepsis in community settings and empathy training using an old age simulation suit.

Results Multiple teaching sessions were delivered to MDTs within the Trust. Staffs were receptive to learning in MDTs rather than traditional splits according to professions. Due to the success of this teaching and the reputation of the medical education team, neighboring Trusts have expressed an interest in working in partnership with the team to further enhance teaching and learning in acute and community settings.

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