EV1487

Clinical and psychological characteristics of patients with suicidal thoughts during prolonged depressive and anxiety disorders and their therapeutic correction

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Introduction This is an extremely important problem of determining clinical-psychological and personality-typological characteristics of patients with suicidal intentions. In the complex therapeutic correction of suicidal behavior, there is almost no use of such psychotherapy method as katathym imaginative psychotherapy (KIP).
Objective Study of clinical-psychological and personal-typological peculiarities and development of an optimal adaptation of KIP for the treatment of patients with suicidal thoughts.
Methods The study was included 52 patients with anxiety-depressive disorder and suicidal intentions; was used K. Leongard questionnaire, SCL-90-R, SR-45, J. Vagin questionnaire of suicidal motivation.
Results The investigated patients were divided into three groups with acute reaction on stress, personality disorder and schizotypal disorder. The first group has revealed the predominance of instrumental, anemic, anesthetic motivation, emotive and anxiety types of accentuation and high level of suicidal readiness. The second has identified anesthetic motivation, anxiety and cyclothymia type of accentuation with a moderate level of suicidal readiness. The third group included patients with symptoms of anemic motivation suicidal motivation, anxiety type of accentuation and a high level of suicidal readiness. The reduction of psychopathological symptoms in patients of the first group occurred in a shorter period of 18.0 ± 2.1 days, compared with the second – 25.0 ± 5.6 days, and the third group – 21.2 ± 2.1 days.
Conclusion In the main group, the highest suicide rates were in patients with anemic, anesthetic and motivation and anxiety type accentuation. Patients of the first group showed the best response to a comprehensive pharmacological and psychotherapeutic treatment.

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The confrontation of those who remain: Qualitative reports of relatives about 3 cases of suicide in a small city in the Northeast Brazil

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Introduction Suicide is serious public health problem. In Brazil, suicides are more frequent in countryside and small cities.
Objective To understand how informants have confronted emotionally the suicide at home by listening to viewpoints reported by such relatives of the deceased.

Method Qualitative, exploratory design, conducted in a basic health unit area, in "Pau dos Ferros", a city with 30,000 inhabitants, State of Rio Grande do Norte (RN), Brazil. Sample constructed by technique of "snowball", in which the health team presented us the first family, whose member informed about the following; and this, the third one. Data collection through semi-directed interviews with open-ended questions in depth, and submitted to thematic analysis.
Results Individuals from relatives who had family bond with the suicidal people were interviewed. From analysis of transcribed interviews, three categories emerged:
– "she has never demonstrated" – possible non-perception of potential suicidal behavior by the family;
– "I got crazy" – feelings of relatives facing a hard scene of suicide and determined cultural questionings;
– "we have no professional support in following days" – absence of psychosocial support and healthcare problems.
Conclusions Possible mood oscillations from suicidal persons were masked by opposite emotional reactions of themselves, and/or oscillations were denied by the observers. Suicide scene seems to have provoked feelings of helplessness and guilt for relatives in not being able to avoid the dramatic act. Feelings of discomfort occurred facing curiosity from many persons who would raise uncomfortable assumptions about suicidal motivations. Family members complained about lack of more effective psychosocial care.

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Predicting suicidal behavior by an accurate monitoring of RNA editing biomarkers in blood samples

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Introduction Predicting suicidal behaviors is one of the most complex challenges of daily psychiatric practices. Alterations of RNA editing of neurotransmitter receptors and other proteins have been shown to be involved in etiology of different psychiatric disorders and linked to suicidal behavior. Additionally, an increase in expression levels of ADARs, the RNA editing enzymes, has also been observed.
Objective The objective of the present study was to test whether modifications in RNA editing profile of prime targets allow identifying disease-relevant blood biomarkers and evaluating suicide risk in patients.
Methods A clinical study was performed to identify an RNA editing signature in blood of depressed patients with and without history of suicide attempts. Patient's samples were drawn in PAXgene tubes and analyzed on Alcediag's proprietary RNA editing platform using NGS. In addition, gene expression analysis by quantitative PCR was performed.
Results We generated a predictive algorithm comprising various selected biomarkers to detect patients with a high risk to attempt suicide. We evaluated the diagnostic performance using the relative proportion of the phosphodiesterase 8A (PDE8A) mRNA editing at different sites as well as the expression of PDE8A and the ADARs. The significance of these biomarkers for suicidality was evaluated using the receiver–operating characteristic (ROC) curve. The generated algorithm comprising the biomarkers was found to have strong diagnostic performances with high specificity and sensitivity.

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.

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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 body-related 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.

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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.

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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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