

Workshop: Forensic psychiatry in Europe in 2017: Discussing similarities and differences of five national systems

W026

Forensic care in Italy: Changes, illusions and realities

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Violence and the risk of violence posed by patients with severe mental illness is a major public health problem for many reasons. Firstly there is the obvious harm to victims, secondly the counter-therapeutic effect on patients of the violence itself, thirdly the restrictive measures typically deployed by services to manage the violence, and finally the significant additional financial cost of these specialist services. Within mental health services the sometimes inaccurate estimate of risk of violence posed by patients can lead to the frequent use of a variety of coercive measures including involuntary hospitalization, enforced medication, restraint and seclusion. These restrictive and costly interventions are almost unanimously perceived as traumatic by the patients and can, in turn, trigger frustration, therapeutic resistance and even aggression instead of treatment adherence and cooperation.

Services for the treatment of psychiatric patients who pose a risk of violence are developing and maturing across Europe. New models of care for this extremely complicated multiple needs clinical population exist. However across Europe intervention strategies and service organization and delivery for these patients are very different, and have never been comparatively evaluated. The lack of reliable comparative data has prevented many European countries benefiting from innovative strategies already tested in those countries which have made the greatest efforts in research and service innovation. In this workshop we will compare the organization and functioning of forensic mental health services in different countries; in particular this presentation will inform about the recent changes in forensic mental health services occurred in Italy.

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W027

Forensic care in France

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In France, the number of inmates with psychiatric disorders has grown substantially during the last two decades. In this context, significant changes occurred in France's forensic psychiatry service provision in recent years. Especially, full-time inpatient units for inmates (called unités d'hospitalisation spécialement aménagées, UHSA) have been created in 2010. These changes clearly improved access to mental health care for inmates. Moreover, some recent trends in indicators such as the suicide rate in French prison, which has fallen slightly, are promising [1]. However, the practice of psychiatry in prisons is a subject of debate between the proponents of the development of a specific care system for inmates and those considering that psychiatric teams must stay out of prison. One should insist on the dichotomy between the justice system and the health system, which appears constitutional in France. Indeed, the professional independence of caregivers from the judiciary system and the medical confidentiality are fundamental values on which French model has been built. Furthermore, the improvement of the

quality of health care in prisons could alarmingly lead the judges to preferentially choose imprisonment for patients suffering from mental disorders committing offences while prison should in no way be considered as a patient care setting. This trend is evidenced by the low rate of individuals judged irresponsible for their crime because of mental health status currently observed in France.

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Reference

[1] Fovet T, Thomas P, Adins C, Amad A. France's forensic psychiatry provision: the long and winding road. *The Lancet Psychiatry* 2015;2:e20.

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W028

Forensic care in Germany

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Although the idea that offenders suffering from a mental disorder must primarily be considered as ill and should therefore be exempted from punishment is of considerable antiquity legal frameworks and key concepts, which are applied in this field, differ widely in European Union member States. The respective legal regulations and epidemiological data of Germany will be presented. In German penal law the question of the guilt of an offender is of central significance. Legal regulations on the placement and treatment of mentally ill offenders in a forensic psychiatric hospital are subsumed under the section "Measures on improvement and safety". Section 63 of the German penal law provides for the temporarily unlimited commitment to a forensic- psychiatric hospital. In accordance with section 64 of the German penal law addicted offenders can be committed to a detoxification center for a period of up to two years. The available epidemiological data show a clear increase in the admissions to forensic psychiatric hospitals and to detoxification centers since beginnings of the 1990s. Recently the German parliament passed a new law. The aim of the new law is to strengthen patients' rights and to diminish the number of forensic patients.

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Workshop: Allostasis insulin and the brain: Implications for the disease modeling and treatment in psychiatry

W029

Insulin resistance and telomere length in treatment of depressive disorders

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Insulin resistance and markers of Allostatic load in depression