

family interaction most part of the day and most of them become trapped with illegal gangs of drug distribution. Second, women can be exploited with the burglary and shoplifting groups who use low educated and poor women. The destiny of most of these women is prison and being away from the family, which in turn worsens the situation. Vocational skills provided by NGOs have helped women to sustain their life but they are not enough. The factors involving with the situation of these women are the main focus of this paper.

**Keywords** Migration; Women; Education

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1227>

#### EV0898

### Socio-demographic and clinic characterization in youth psychiatric outpatients: An observational study

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**Introduction** Most mental disorders begin during adolescence and early adulthood (18–24-years-old), highlighting the importance of understanding the onset and progression of mental disorders among youths. Although progress has been made, namely by creating youth mental health transition services, gaps continue to exist. Locally, our recently constituted young adults unit aimed to minimize discontinuities in care.

**Objectives/aims** To characterize a population of young adult psychiatric outpatients, regarding socio-demographic and clinic variables.

**Methods** Socio-demographic and clinic characterization of young adult psychiatric outpatients observed during 1st January 2015–30th July 2016.

**Results** Two hundred and fifty-five outpatients were observed: 64.3% females and 35.7% males, average age 20.56-years-old (median 20). Most lived in urban areas (59.4%), with their parents (27.8%), were students (80.4%), attending secondary school (36.1%). A total of, 27.5% were referenced by an emergency department, and adjustment disorders (ICD-10 F43.2) were the most frequent diagnosis (21.6%). Regarding suicidal behaviours and self-harm, 9.8% did self-cutting. A vast majority did not have previous psychiatric hospitalizations—only 5.9% outpatients had at least one. In total, 39.8% were medicated with antidepressants (1/3 of which in association with other drugs), and about 38.8% received cognitive-behavioural interventions. About 2/3 of patients (66.3%) remained in care and only about 1/6 (15.7%) were discharged.

**Conclusions** Our typical youth psychiatric outpatient was of female gender, student, living with its parents. Adjustment disorders were the most frequent diagnosis, and antidepressants were the main psychopharmacologic option, often combined with other psychotropic drugs. In the future, psychotherapy interventions should be more widely available, namely group psychotherapy.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1228>

#### EV0899

### Effectiveness of the structural approach components on the marital quality, and problem solving of couples

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The aim of this research is investigating the effect of training structural-systematic approach components on marital quality and problem solving of couples. General plan of research is a quasi-experimental with pre-post test and control group. Statistic population includes all clients of psychology and counselling clinic of Ferdowsi Mashhad University couples with marital conflicts and issue in problem solving in 2014. Sample size includes 10 couples in each control and examination group. Examination group has received 10 couple-therapy structural-systematic group meetings. Research tools were two questionnaires; revised marital quality scale and family problem solving (2010). To analyse data ANCOVA method has been used. For analysing data SPSS software has been used. Results have indicated that structural-systematic approach results in significance increment of marital quality and couple problem solving in comparison to control group. It can be said that structural-systematic approach may has a significant effect on family structure having a systematic and comprehensive approach and tries to solve happened problems and defects changing family structure. It is hoped that can progress in couple-therapy and family therapy using this approach.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1229>

#### EV0900

### Neuropsychiatric adverse effects of HIV antiviral medication

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**Introduction** HIV (human immunodeficiency virus) infection is related to several neuropsychiatric complications, such as dementia, encephalopathy, psychosis, as well as, opportunistic infections of the central nervous system (CNS). The discovery of antiretroviral therapy (ART) has limited these conditions and extended the life span of infected patients into a chronic illness, but it is also associated with neuropsychiatric adverse effects.

**Objectives** To review the literature on the most common neuropsychiatric complications of the ART, since it can be difficult to distinguish drugs toxicity, the effects of the virus, immune system and psycho-social events.

**Methods** The authors have conducted an online search in PubMed with the terms: “Psychiatry”, “HIV”, “adverse effects” and “antiretroviral drugs” from 2011 until 2016. From the outcome were collected, analyzed and summarized the articles considered to be relevant.

**Results** The antiretroviral therapy (ART) are associated with a numerous adverse effects on the central and peripheral nervous systems, as well as, metabolic, gastrointestinal, cardiac, and other toxicities. The neuropsychiatric effects are common and highly variable, including depression, cognitive impairment and sleep disturbance. The nucleoside reverse transcriptase inhibitors and the

non-nucleoside reverse transcriptase inhibitors are one of the two classes of antiviral drugs most frequently associated with neuropsychiatric complications.

**Conclusions** The occurrence of new-onset conditions related to ART makes it difficult to determine the association between psychiatric disorders and ART adverse effects, and given the fact that patients commit to lifelong therapy, as well as, they can diminish quality of life; it makes these assessment important in treating these conditions.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1230>

#### EV0901

### Sex differences in psychiatric inpatients: Demographics, psychiatric diagnoses and medical co-morbidities

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**Objectives** There are few published studies on the relationship between gender and psychiatric disorders. We assessed sex differences in a sample of first-admission psychiatric inpatients to identify possible risk factors and targets for sex-tailored treatment interventions.

**Methods** A retrospective study of admissions to the psychiatry department, Coimbra hospital University Centre, Portugal, in 2015 was accomplished ( $n=924$ ). The two groups were compared for demographic features, psychiatric diagnoses and medical co-morbidities.

**Results** Male patients were significantly younger (age average = 47.7 vs. 53.3). Differences in employment, educational, and marital statuses were found between male and female psychiatric patients. Having a degree was a protective factor for males, whereas it was a risk factor for females. Being divorced and single were both risk factors for medical co-morbidity in females. A higher proportion of men among patients hospitalized for schizophrenia (14.9 vs. 5.5%) or substance use disorder (10.3 vs. 2.1%) and a higher proportion of women among those admitted for affective disorders (43.3 vs. 25.9%), including bipolar disorder (13.4 vs. 9.0%), were found. No significant differences in duration of hospitalization between the two groups (22.8 in male vs. 22.2 days in female)

**Conclusions** The differences between the two groups of inpatients were very pronounced. A better understanding of these differences may help to establish more effective treatment strategies.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1231>

#### EV0902

### Who are the Europeans admitted to psychiatric hospital in Tunisia?

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**Introduction** A large number of foreign travellers and expatriates visits or lives in Tunisia.

**Objectives** To explore socio-demographic, clinical and therapeutic characteristics of European patients admitted to psychiatric care in Tunisia.

**Methods** This is a retrospective, descriptive study on all European patients admitted to Razi psychiatric university hospital, which is

situated at the outskirts of the capital Tunis, between 2000 and 2015.

**Results** A total of 44 Europeans was admitted. Most frequent nationalities were: French and Germans (19 and 16 patients). The stay in Tunisia was mainly due to pathologic travel (17 subjects) and tourism (13 subjects). In total, 25 patients travelled without being accompanied. Average age was 51.3 years with extremes from 16 to 78 years. A history of psychiatric disorder was found in 15 patients, of whom almost all had stopped treatment. A majority (19 patients) was diagnosed with bipolar I disorder, and 8 patients suffered from schizophrenia. Average duration of hospitalization was 19 days. A total of, 22 patients were repatriated for medical reasons. Major difficulties during hospitalization were the language barrier, difficulties to contact family members or former treating psychiatrists for further information on the patient and his medical history, and the lack of insurance covering repatriation for medical reasons.

**Conclusion** Psycho-education and early action on the precipitating factors could help to prevent psychiatric illness or relapse in these patients. Furthermore, attention of public authorities should be drawn to incomplete insurance coverage in many psychiatric patients.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1232>

#### EV0903

### New psychiatric service – fresh nurses experiences

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The year 2015 started a new assistance in the cycle of mental health care ending the gap that existed in the district of Beja in the last twenty years, in this area. The aim of this presentation is to give the data of nursing activity in the first six months inpatient psychiatric service. The population studied was 98 inpatients, 53% male and 47% females aged between 16 and 87-years-old, diagnosed with depression, schizophrenia, personality disorders, bipolar disorders, dementias and others. Descriptive statistic of collected data. We rated the gender, marital status, aged and main disorders as well as the nursing therapeutic activities performed with the patients. Six different kinds of activities were done. The total of interventions were 148: relaxation, ludic activities, physical activity, art therapy, health education and music therapy. Nursing intervention in the treatment of people with mental disorders improves the compliance to the treatment (adherence, self-care, useful occupation, stress career and insight of the illness) during the hospitalization time, aiming to avoid the worsening situation and the social isolation of the patient, and promote the recovery and quality of life. These objectives begin on hospital stay during the acute crisis. We are aware of the fact that this is just the beginning of this approach and for more and better results we have to have a bigger sample and a longer time of intervention as well as better methodology, namely the use of scales to measure some parameters that can provide more consistent and objective findings.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1233>

#### EV0904

### Psychosis and/or Lyme disease: There is more than meets the eye

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