

Conclusions In our sample the average of the results obtained by applying the SAS is considered within normal limits. In our case as to extrapyramidal effects ALAI treatment has been well tolerated. A larger sample would be needed to obtain more reliable results.

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

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EV1055

Indication of depot antipsychotic treatment in the view of slovak psychiatrists

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With the increasing number of atypical antipsychotics in depot form, there emerges question about plus and cons of their use in schizophrenia patients. We focused on the opinion of Slovak psychiatrists about use of this treatment in some specific situations of schizophrenia treatment. Research was realized via questionnaire on psychiatrists ($n=47$) from ambulant and hospital care, during one conference in June 2015. First part of the questionnaire was focused on the preference of oral or depot form of antipsychotic treatment. Depot form would be indicated by psychiatrists (in more than 89%) when low compliance, anosognosia or frequent episodes. On the contrary, oral antipsychotic treatment is preferred in young patients or employed patients. The type of symptoms (e.g. positive, negative) has relatively small impact on the preference of treatment, where the preferences of each type were the lowest (fewer than 36%). According to the opinion of psychiatrists, depot antipsychotic treatment is not suitable in first episode of disorder (according to 81% of respondents), otherwise in second or third episode it would not be chosen by 6% of asked psychiatrists.

From the aspects of the choice between atypical or typical depot, atypical antipsychotics in depot form were favored when presence of adverse reactions (80%), occurrence of negative symptoms (65%) and short duration of disorder (58%). Typical depot was preferred by psychiatrists in patients with chronic states.

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EV1056

Asenapine modulates nitric oxide release and calcium movements in cardiomyoblasts

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Objective To examine the effects of asenapine on NO release and Ca^{2+} transients in H_9C_2 , which were either subjected to peroxidation or not.

Materials and methods H_9C_2 were treated with asenapine alone or in presence of intracellular kinases blockers, serotonergic and dopaminergic antagonists, and voltage Ca^{2+} channels inhibitors. Experiments were also performed in H_9C_2 treated with hydrogen peroxide. NO release and intracellular Ca^{2+} were measured through specific probes.

Results In H_9C_2 , asenapine differently modulated NO release and Ca^{2+} movements depending on the peroxidative condition. The Ca^{2+} pool mobilized by asenapine mainly originated from the extracellular space and was slightly affected by thapsigargin. Moreover, the effects of asenapine were reduced or prevented by kinases blockers,

dopaminergic and serotonergic receptors inhibitors and voltage Ca^{2+} channels blockers.

Conclusions On the basis of our findings we can conclude that asenapine by interacting with its specific receptors, exerts dual effects on NO release and Ca^{2+} homeostasis in H_9C_2 ; this would be of particular clinical relevance, when considering their role in cardiac function modulation.

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

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Psychosurgery and stimulation methods (ECT, TMS, VNS, DBS)

EV1057

A tribute to Johann Gottlieb Burckhardt-Heussler (1836–1907), the pioneer of psychosurgery

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Introduction Johann Gottlieb Burckhardt-Heussler was a Swiss psychiatrist, who pioneered controversial psychosurgical procedures. Burckhardt-Heussler extirpated various brain regions from six chronic psychiatric patients under his care. By removing cortical tissue he aimed to relieve the patients of symptoms, including agitation, rather than effect a cure.

Objectives To present the scientific papers of Johann Gottlieb Burckhardt-Heussler on psychosurgery.

Aims To review available literature and to show evidence that Burckhardt-Heussler made a significant contribution to the development of psychosurgery.

Methods A biography and private papers are presented and discussed, followed by a literature review.

Results The theoretical basis of Burckhardt-Heussler's psychosurgical procedure was influenced by the zeitgeist and based on his belief that psychiatric illnesses were the result of specific brain lesions. His findings were ignored by scientists to make them disappear into the mists of time, while the details of his experiments became murky. Decades later, it was the American neurologist Walter Freeman II, performing prefrontal lobotomies since 1936, who found it inconceivable that the medical community had forgotten Burckhardt-Heussler and who conceded that he was familiar with, and probably even influenced by, Burckhardt's work.

Conclusion It is partly thanks to Burckhardt-Heussler's pioneering work that modern psychosurgery has gradually evolved from irreversible ablation to reversible stimulation techniques, including deep brain stimulation.

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

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EV1059

Electroconvulsive therapy outpatient program recently established in a psychiatric day hospital

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Introduction ECT outpatient program recently created in the Psychiatric Day Hospital in Ávila was designed to assess the safety and efficacy of continuation/maintenance electroconvulsive therapy (ECT) in patients after ECT remission.

Objectives Description of the activity and objectives of an ECT outpatient program in a Psychiatric Day Hospital.

Methods Retrospective cross-sectional descriptive Study. The three patients who received the continuation/maintenance electroconvulsive therapy during the 10 months this unit has been opened were chosen as a sample.

Results From the opening of Psychiatric Day Hospital 10 months ago, 58 patients have been admitted; among them, three patients come to the hospital monthly to receive the electroconvulsive therapy, maintaining their psychopathological stability over time.

Conclusions With the creation of this new program we considered three types of objectives:

– therapeutic: a therapy applied in a more comfortable and satisfactory for the patient and family regime. To prevent relapse and exacerbations;

– management: benefits on the best use of existing resources:

– reduction in hospital admissions and readmissions,

– decrease in the average stay,

– reduction in visits to Emergency Services,

– allow referrals from outpatient department,

– individual monitoring of patients that complements the check at their Mental Health Team;

– teaching, training and investigation.

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

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EV1060

The use of electroconvulsive therapy (ECT) in the Czech Republic

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Aim The aim of this study was to monitor the use of electroconvulsive therapy (ECT) in the Czech Republic for the purpose of harmonizing national practice.

Method A 13-item questionnaire was sent to all Czech inpatient psychiatric facilities. This questionnaire assessed technical background of ECT, indications for the treatment, procedure in detail, way of documentation and monitoring of side effects.

Results ECT is used 23 centers (10 psychiatric hospitals, 5 university psychiatric departments and 8 psychiatric wards) across the Czech Republic. There is no special legal act regulating the use of ECT in the CR, but there are guidelines issued by the Czech Psychiatric Society available. All centers use instruments delivering brief electric stimuli. All patients have to be indicated for this treatment and have to sign inform consent form/excluding situation when patient's life is endangered/. Somatic state is assessed/EKG, blood tests, eye check-up regularly and other examinations in individual cases/. Thiopental and succinylcholine are used most often for anesthesia and myorelaxation. Bitemporal electrode placement is the preferred option in all centers. The ECT is provided 2–4 times a week in special ECT rooms in the presence of staff team/psychiatrist, anesthetist, psychiatric and anesthesiological nurses/. Continuation ECT and outpatient ECT is not used. The procedure including side effects is documented in individual patient's

documentation, but summarizing documentation is conducted only in some centers.

Conclusion ECT is widely used in the Czech Republic. Procedures in all centers follow national guidelines. There is need to improve documentation system to harmonize national practice.

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

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EV1061

Public stigma of electroconvulsive therapy (ECT) in the Czech Republic

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Aims To find out how the use of ECT in psychiatry is perceived by the public in the Czech Republic.

Method The questionnaire (8 questions monitoring awareness, knowledge of ECT and its use in modern psychiatry) created for the purpose of this study was shared through internet and also distributed in paper version to public.

Results The sample consists of 365 respondents – age average 28.9 years, 62% of females, 53% of university graduates, 44% with secondary education, 3% other education, 27% of healthcare professionals outside the field of psychiatry, 20% of medical students before the start of the traineeship at psychiatry, 53% of the public. Among the respondents, 98% have heard about ECT, 7% of them think that ECT is no longer used. Among the respondents, 62% learned about ECT from the media (film, print). Among the respondents, 22% do not believe in the effectiveness of ECT, 30% think that ECT is abused by psychiatrists, 86% believe that ECT has side effects (personality changes, permanent memory disorders, brain damage, epilepsy). Among the respondents, 77% would agree with ECT, if it should be applied to their relative.

Discussion ECT is an effective method in treating of severe mental disorders. But until now the public view is influenced by media. Due to the negative stereotype of the method many people are afraid of this treatment. The interesting fact is that also health professionals and medical students are influenced by public stigma of ECT.

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EV1063

A review of transcranial magnetic stimulation for treating negative symptoms of schizophrenia

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Introduction The finding of prefrontal dysfunction in schizophrenia patients with negative symptoms (NS) has raised interest in using transcranial magnetic stimulation (TMS), which can modulate prefrontal function and dopamine release, as potential treatment for NS.

Objective To briefly review current literature concerning the use of TMS as treatment for NS.