

Variety of symptoms depend on ethnicity, and it is not consistent with diagnostic criteria due to possible pathoplastic moderators. Relaps and non compliance are more likely to occur. Somatic disorders and illness are often reported and diagnostic by psychiatrist. Difficulties in treatment are sometimes based on the line between their social needs and abuse of psychiatry, since the patients and their families are more likely to show rental claims to illness. These request a complexed, multidisciplinary approach.

## P0299

Protecting the residency training environment: A resident's perspective on the ethical boundaries in the faculty-resident relationship

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**Objective:** This paper explores ethical complexities that underlie resident-faculty relationships. The faculty-resident relationship is as complex as that between a therapist and his/her patient, but it has been far less well studied.

**Methods:** From data obtained from psychiatry residents and faculty members regarding their experiences in this relationship, we present five vignettes that illustrate unethical conduct in the faculty-resident relationship.

**Results:** Ethical lapses described in this paper are problematic for two reasons: first, personal and professional harm may come to individual residents who find themselves interacting with an errant faculty member; and second, ethical lapses have the potential to damage the overall training environment itself. Once the terms of the faculty-resident relationship are discussed and accepted by all participants, unintentional or inadvertent ethical problems will be prevented, and residents will be in a position to identify faculty behaviors that do not conform to these agreed-upon expectations

**Conclusions:** This paper highlights the importance of incorporating education about ethical responsibilities and faculty-resident boundaries into the training curriculum. We offer suggestions for understanding faculty members' responsibilities to residents in their training programs.

## P0300

Fentanyl patch and attempted murder: A case report

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**Background:** Fentanyl is a potent Schedule II opioid agonist that has potency more than 80 times that of morphine. A high concentration of Fentanyl is contained in Fentanyl patches (MATRIFEN).

They should be used to manage pain for persons with chronic moderate to severe pain who are already physically tolerant to opiates. During the past years there has been an increase in misuse and abuse in the United States of Matrifen that has caused deaths from overdoses. Matrifen can also cause neurological and psychiatric adverse events such as: delirium anxiety, abnormal thinking, abnormal dreams, depersonalization and hostility.

In the literature Matrifen have not previously been associated with serious offences such as attempted murder but an association with suicide has been noted.

**Aims:** To describe a previously unreported and serious adverse effect of Fentanyl patches.

**Methods:** We followed up the clinical psychopathology of an elderly gentleman who attempted to murder his wife reportedly due to an altered mental state caused by the application of Fentanyl patch. We searched Pubmed and Google for any reported adverse effect of Fentanyl patches of a similar nature.

**Results:** After ruling out all other Psychiatric, Organic and Forensic causes we came to the conclusion that Matrifen was the cause of altered mental state which led to the attempted murder.

**Conclusions:** Although adverse psychiatric effects of Fentanyl patches have been reported in the past we can add attempted murder to the list. Fentanyl patches can be dangerous particularly in the vulnerable elderly patients where they are most commonly used.

## P0301

Assessment of deliberate self-harm in patients attending an accident and emergency department

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**Aims:** To study the presenting features and outcome of deliberate self-harm patients presenting to an accident and emergency department

**Background Review:** Self-harm accounts for up to 170,000 hospital attendances in the UK annually. 15-25% repeat self-harm within 1 year. Self-harm repetition is reported as higher among those who do not receive psychosocial assessments and discharge themselves from accident and emergency departments.

**Method:** All patients triaged within Beaumont Hospital accident and emergency department with a presentation indicative of psychiatric disorder were studied over 12 months. The following were collected on each patient: demographic variables (age, gender, marital status), clinical variables (method of self-harm including associated factors, history of deliberate self-harm, overdose agents used in self-poisoning, whether a psychiatric consultation occurred and outcome). Dates and times of presentations were recorded. Statistical analysis was performed using SPSS14 statistical package.

**Results:** 1,397 liaison psychiatry patients presented to the accident and emergency department over 12 months. 834 (60%) cases were deliberate self-harm, most commonly overdose (47%). 353 (35%) cases of self-harm were associated with alcohol ingestion. Most self-harm presentations (30%) occurred in March (83), April (86) and May (83). Most self-harm cases (27%) presented between 9pm-1am. 27% of self-harm cases presented between 9am-5pm when psychiatric cover was available in the accident and emergency department. 73% presented outside of these hours. 273 (20%) liaison psychiatry patients left before psychiatric consultation.

**Conclusions:** Optimisation of the management of patients who self-harm is important. The reasons why patients leave hospital before assessment has been completed should be further investigated.

## P0302

Obstetric complications and post-partum psychosis: A follow-up study of 1.1 million first-time mothers between 1975 and 2003 in Sweden

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**Background and Aims:** Postpartum psychosis is a severe psychiatric disorder that leads to hospital admission in about one woman per 1,000 deliveries. It coincides with the vulnerable period associated with becoming a mother and may, if untreated, lead to suicide and infanticide. Some risk factors for postpartum psychosis have been identified in previous research, such as primiparity and previous psychiatric disorder.

Knowledge on how postpartum psychosis is related to obstetric factors might be helpful in the clinical risk assessment of postpartum psychosis.

The aim of this large-scale follow-up study was to examine the association between postpartum psychosis and certain pregnancy and delivery complications and other obstetric variables, after adjustment for age, year of delivery and previous hospitalization for psychiatric disorder.

**Method:** 1,133,368 Swedish first-time mothers were included during a 29-year period yielding 1,413 hospitalized cases of postpartum psychosis. Several obstetric variables were analyzed separately after adjustment for possible confounders.

**Results:** Respiratory disorder in the neonate, severe birth asphyxia, preterm birth, caesarean section, perinatal death and SGA infant were associated with an increased risk of postpartum psychosis. After adjustment for previous hospitalization for psychiatric disorder only preterm birth and acute caesarean section remained significant risk factors for postpartum psychosis (relative risks were 1.20 and 1.31, respectively).

The relative risk of postpartum psychosis among first-time mothers with previous hospitalization for psychiatric disorder was increased more than 100-fold.

**Conclusion:** Careful clinical risk assessments of postpartum psychosis are crucial among women with a history of psychiatric disorder whereas obstetric variables have a minor importance.

### P0303

Evaluation of postgraduate studies in Czech Republic: Current situation and perspectives

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**Background and Aims:** In an effort to acquire detailed overview regarding postgraduate training in psychiatry together with gaining opinions on the present and ideal postgraduate program, our Young Psychiatrists Section in Czech Republic decided to undertake a survey.

**Methods:** The questionnaire was addressed to all current PhD students in the field of psychiatry and to those who finished the studies previously, maximum 10 years ago. We distributed the questionnaires via mail and e-mail to all 7 psychiatric clinics and put it also on our website. 32 participants from 5 institutions responded. The questionnaire encompasses questions related to the methodology of the project, tutor engagement, working schedule, financial situation and other

funding opportunities. Second part contained requests on various aspects of ideal training program.

**Results:** The majority of the participants is satisfied with tutor involvement (92%) and the methodology of the project (85%) but less with the financial support of the project (69%) and time devoted to work on it (69%). The ideal organization of the PhD program should be in blocks (81%), for a certain period of time for PhD project and the rest for clinical work.

**Conclusions:** The survey revealed some weak spots of our contemporary PhD studies program in Czech Republic, e.g. lack of time for working on PhD project and poor funds for covering it. Beside various models for organizing postgraduate studies, PhD students are in sum mainly satisfied with it. Suggestions on ideal organization of the program are meant to serve as potential models for consideration.

### P0304

Paracetamol availability in pharmacy and non-pharmacy outlets in Dublin, Ireland

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**Background:** In 2004, there were 11,092 presentations to Irish hospitals with deliberate self-harm, including 7,933 cases of drug overdose, of which 31% involved paracetamol. Limiting the availability of paracetamol reduces morbidity and mortality associated with paracetamol overdose. The present study aimed to determine the level of compliance with statutory regulations governing the sale of paracetamol in Ireland.

**Methods:** Researchers visited pharmacy and non-pharmacy outlets (newsagents, mini-markets and supermarkets) in Dublin city and attempted to purchase amounts of paracetamol that exceeded the statutory limits for a single transaction. All paracetamol tablets purchased in non-pharmacy outlets were in blister-packs and all non-pharmacy outlets sold packs with 12 tablets or fewer per pack.

**Results:** Amounts of paracetamol in excess of statutory limits for a single transaction were purchased in

- 50.0% of pharmacies
- 81.8% of newsagents/mini-markets
- 20.0% of supermarkets.

#### **Conclusions:**

We recommend that

- (a) the sale of paracetamol in newsagents/mini-markets should be discontinued
- (b) the sale of paracetamol in supermarkets should continue, but automated check-out tills should be programmed to prevent the sales that exceed statutory limits
- (c) there should be greater efforts to ensure compliance with statutory regulations in pharmacies.

### P0305

Transition to home for youth with complex mental health issues

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