

EV0003

The burnout's prevalence among Tunisian military consultants in psychiatry

H. Belhadj*, W. Krir, C. Bencheikh, H. Elkefi, A. Oumaya
 Military Hospital, Psychiatry, Tunis, Tunisia

* Corresponding author.

Introduction Burnout causes a considerable human cost. Army employees are, in fact, particularly exposed to this risk.

Objective To determinate the prevalence of burnout syndrome among military consultants in psychiatry and to study its socio-familial repercussions.

Method A cross-sectional study was conducted in a military outpatient clinic in Tunis and included 30 military patients with a seniority of more than 15 years. Burnout and major depression were assessed with the instrument Burnout Measure Short version (BMS-10) and the Patient Health Questionnaire "PHQ-9", respectively.

Results Eighty percent of participants ($n = 24$) had a very high degree of burnout exposure according to BMS-10. Twenty of these (83.3%) had a moderate to severe depression. All married patients ($n = 22$) having burnout syndrome reported a conjugopathy and a tendency to physical and verbal aggressiveness against their children.

Conclusion Military employees are particularly vulnerable to burnout. Detecting burnout in time is therefore essential in order to prevent its undeniable socio-familial repercussions.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.332>

EV0004

Muscular strain as risk factor of somatic symptom of mix anxiety and depression

M. Bhadar^{1,*}, S. Asghar¹, Z. Mukhtar²

¹ Sexual Health Institute Pakistan, Psychiatry, Lahore, Pakistan

² Azm Center, Sexual Health, Sargodha, Pakistan

* Corresponding author.

Introduction Somatic symptoms in depression are not uncommon. There is increased suicidality, poor prognosis, and increased risk of relapse. Neurological and musculoskeletal symptoms can be explained on basis of increased muscular tension in the body.

Methods An internet search was made using key words muscular tension, SSRIs depression, anxiety, somatic symptoms.

Results Ninety-eight percent patients reported at least one of somatic symptoms. Forty-five percent reported six somatic symptom. GIT symptoms in 67% patients. Fatigue in 78% of patients. Weakness in body parts 45% and headache in 43% to 65%. Chest pain more common in male. Patient over 40 showed pain in limbs or joints. Number of symptoms was directly related to severity of depression.

Discussion Increased muscular tension is one component of mix anxiety and depression. Main nerves and their branches pass in between muscular bellies. When there is increased muscular tone, it puts extra compression on major nerves and their branches. This will cause dysesthesia in body parts. Stretching of muscles produce pain due to hypoxia. This produces headache, strain neck and backache pain in chest. Fatigue is result of over consumption of energy due to hypertonia. One of their side effect is of SSRIs is muscular hypertonia which will not be very helpful for these symptoms. Drugs like tricyclics, SNRI can have better results when used alone, gabapentine, pregabline tinazidine used as adjunct can alleviate symptoms. Non-pharmacological treatment includes massage, relaxation technique, and warm water therapy.

Conclusion Somatic symptoms of mix anxiety and depression should be important consideration in its treatment.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.333>

EV0005

Relationship between personality traits with language anxiety among bilinguals

S. Bialayesh (MA in psychology)^{1,*}, A. Homayouni²,

M. Nasiri Kenari (MA in psychology)³,

Z. Shafian (MA in psychology)⁴

¹ Noor, Iran

² Department of psychology, Bandargaz Branch, Islamic Azad University, Bandargaz, Iran

³ Fereydonkenar, Iran

⁴ Tehran, Iran

* Corresponding author.

Language anxiety is a distinct complex of self-perception, beliefs, feelings, and behaviors related to classroom language learning arising from the uniqueness of the language learning process. Effects of foreign language anxiety are particularly evident in the foreign language classroom, and this anxiety is a strong indicator of academic performance. So, the study aimed to investigate relationships between personality traits with language anxiety among bilinguals. The research method was correlation. The population was included all upper intermediate language learners and higher levels in language institutes, that 250 learners were selected by cluster sampling method, and responded to McCare & Costa's NEO personality traits (neuroticism, openness to new experience, extroversion, agreeableness, and conscientiousness) and Horwitz's language anxiety inventory. The data were analysed by Pearson correlation formula. The results showed that there is positive and significant relationship between neuroticism and openness to new experience with language anxiety, and positive and significant relationship between extroversion, agreeableness, and conscientiousness with language anxiety. Thus, it can be concluded that personality traits have important impact on language anxiety.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.334>

EV0006

Gynecological symptoms in somatization disorder

C.M. Calahorro^{1,*}, M. Guerrero Jiménez², B.M. Girela Serrano²

¹ Hospital Universitario San Cecilio, Unidad de Salud Mental, Granada, Spain

² Santa Ana Hospital, Psychiatry, Motril – Granada, Spain

* Corresponding author.

Background Medically unexplained symptoms are common in ambulatory medical patients. Such disorders are consistently more prevalent in women than in men and occurs up to 10 times more frequently in women.

Main objective To review published literature about gynecological symptoms related to somatic disorder and which percentage of these patients diagnosed as Somatoform Disorder are referred from gynecologist consultations.

Methods We present the case of a 31-year-old woman diagnosed of a somatic symptom disorder whose first consultation was gynecological. She is referred to Mental Health Unit from Primary Care Center because of having been referred to five different specialists and been diagnosed as "functional somatic syndromes" in all cases. She started a selective serotonin reuptake inhibitor, and attended