

keep in mind anxious symptoms when facing a patient at his/her first ACS.

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EV431

Affective disorders in multiple sclerosis

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Background Psychiatric disorders have a remarkable frequency in multiple sclerosis. The leading group of these disorders consists of affective disorders. These psychiatric conditions can worsen the outcome of multiple sclerosis, thus contributing to increase the burden of the disease to both patients and relatives. Managing such a complicated situation needs a focus on the underlying links between affective disorders and multiple sclerosis.

Objective To examine the hypotheses proposed to explain the high prevalence of affective disorders in patients with multiple sclerosis.

Methods Literature was reviewed using the Medline database and the following keywords “bipolar disorder” “affective disorder”, “mania” and “multiple sclerosis”.

Results PubMed research returned 13 results. After manual inspection, 10 articles were retained and examined. The cause of the high comorbidity between multiple sclerosis and mood disorders is regarded as being multifactorial: the medication used in multiple sclerosis possibly inducing/exacerbating mood disturbances, the demyelinating brain lesions which could bring about depression or mania, genetic overlapping with affective disorders and last the psychological reactions and adjustment difficulties to the neurological handicap.

Conclusion Despite the fact that the higher prevalence of affective disorders in multiple sclerosis is well established, these disorders still remain underdiagnosed and undertreated. A shift towards a better assessment of the psychiatric comorbidity in multiple sclerosis patients and the optimal treatment of those disorders is fundamental.

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Consultation liaison psychiatry in Talavera's hospital during the year 2014

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Introduction Analyze the number of interdepartmental consultations carried out at Department of Psychiatry, Hospital Nuestra Señora del Prado from other areas of hospitalization during 2014.

Objectives The goal is to evaluate the prevalence of psychiatric disorders in patients who are hospitalized for other reasons, and which services are needed the most.

Methods Retrospective cross-sectional descriptive study. A record of consultations carried out by the psychiatry service in 2014 was collected. The data were analyzed according to the origin of the consultation service, the month when it was performed and the sex of the patient. The monthly percentage of interconsultations and the percentage represented by each interconsultation service were calculated. They classified according to sex.

Results In 2014, 211 interconsultations were carried out, 104 men and 86 women. Surgery 16, 11%, pneumology 13, 74%, internal medicine 12, 32%, traumatology 8, 06%, digestive 7, 11%), I.C.U. 6, 64%, cardiology 6, 16%, hematology 5, 69%, oncology 5, 21%, pediatrics 4, 27%, gynecology 2, 84%, emergency 1, 90%, palliative 1, 90%, endocrinology 1, 42%, urology 1, 42%, nephrology 0, 95%, E.N.T. 0, 95%, obstetrics 0, 47%, dermatology 0%, ophthalmology 0%, rheumatology 0%. January 12, 8%, February 13%, March 9, 5%, April 6, 2%, May 5, 7%, June 8, 1%, July 6, 2%, August 4, 3%, September 8, 1%, October 12%, November 7, 6%, December 6, 2%.

Conclusions Most of the interconsultations were carried out in January, February and October. However, August was the least busy month. The busiest service was the Surgery service, followed by the Pneumology and Internal Medicine one. There were no interconsultations of the Ophthalmology, Rheumatology and Dermatology services. The consults were in demand mainly by men rather than women.

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Psychological syndrome analysis (Vygotsky – Luria School) in psychosomatics: Clinical and psychological study of patients with mitral valve prolapse

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Introduction One of the dominant methodological principles of Russian clinical psychology (the Vygotsky-Luria School) is the principle of Psychological syndrome analysis (PSA). It can also be heuristically applied to psychosomatics.

Objective To identify a psychosomatic syndrome in patients with mitral valve prolapse (MVP).

Materials and methods We applied various techniques for a qualitative and statistical data analysis of clinical and psychological study. We explored our patients' individual personality profiles, anxiety level (Spielberger et al., 1983), features of achievement motivation (Heckhausen, 1963), emotion regulation strategies (ERS) (Zinchenko, Pervichko, 2014; Pervichko, 2015), dynamics of the patient's emotional state in stress conditions, and degrees of manifestation of MVP clinical symptoms. The study comprised 134 MVP patients, mean age was 24.8 ± 1.2 years, and 73 healthy subjects, mean age was 27.5 ± 1.3 years.

Results MVP patients proved to be more prone to emotional stress; they were also inclined to choose less effective ERS as compared to healthy subjects. ANOVA data revealed dependence of intensity of such clinical symptoms as cardialgia, tension headaches and psychogenic dyspnea on the degree of anxiety level and the presence of dysfunctional ERS in MVP patients. The interpretation of the study results with PSA method suggested that the patients' psychological and clinical characteristics form into a psychosomatic syndrome. The first syndrome-generating factor is the presence of the approach – avoidance motivational conflict in achievement settings. Dysfunctions of emotion regulation appear

as a second syndrome-generating factor in psychosomatic syndrome in MVP patients.

Conclusions PSA (the Vygotsky-Luria School) can be used as a means to approach diagnostic and prognostic tasks in Clinical psychology and Psychosomatic medicine.

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EV434

Low-FODMAP-diet in irritable bowel syndrome offers benefits not only in terms of gastrointestinal symptoms, but also in terms of psychopathology in the medium- and long-term

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Introduction Low-FODMAP (fermentable oligosaccharides, disaccharides, monosaccharides, and polyols) diets are strongly recommended to improve irritable bowel syndrome (IBS) symptoms. They are also hypothesized to improve the psychopathological status that often accompanies the syndrome. A study (Ledochowski et al., 2000) suggested that the ingestion of FODMAPs affected negatively the mood and that the elimination of dietary FODMAPs improved depressive symptoms.

Objectives/aims We aimed to assess the levels of psychopathology pre- and post-diet in IBS patients free of any severe psychiatric disease (e.g., bipolar disorder, major depressive disorder, schizophrenia) or alcohol/substance abuse.

Methods We consecutively recruited 75 IBS outpatients (68% females; age range = 21–68 years) at the Gastrointestinal Outpatient Center of our University Hospital. They filled out the Symptom Checklist-90-Revised (SCL-90-R), a visual analogue scale (VAS) to rate the intensity of abdominal bloating/pain, and a 2-week diary card registering the frequency of bloating/pain. Then, they were blindly assigned to a low-FODMAP diet, a low-FODMAP gluten-free diet and a control diet for 4 weeks. During the last 2 weeks they filled out a 2nd diary card and related the intensity of bloating/pain. Patients were reassessed after a 16-month follow-up. Independent *t*-test, χ^2 test, and one-way ANOVA with Tukey post-hoc test were used.

Results Baseline characteristics did not differ between the three groups. Post-diet and at follow-up, the two low-FODMAP diets, vs. the test diet, improved not only the intensity and frequency of bloating/pain, but also the SCL-90-R GSI, anxiety, and phobic anxiety scores (*P*-values < 0.05).

Conclusions The low-FODMAP diet may improve psychopathology in IBS patients.

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EV435

EV435 Life satisfaction and enjoyment in medication-overuse headache patients: The role of depression and insomnia

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Introduction Epidemiological research has documented a strong association between medication-overuse headache (MOH) and psychiatric disorders, emotional disturbances, and disordered personality traits, which are associated with worse outcomes, poorer quality of life, and higher costs to the health care system.

Objectives Identifying risk factors for progression of headache into MOH represents one of the most relevant public health priorities and psychiatric comorbidity has been identified as a potential factor related to chronic phases.

Aims The aim of the present study was to determine whether depression and insomnia complaints were associated with satisfaction and enjoyment with one's own life in Medication-overuse headache (MOH) patients, and whether insomnia complaints were able to explain part of the variance of QoL explained by depression.

Methods Participants were 187 consecutive adult outpatients admitted to the outpatient headache clinic. Patients were administered the Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q), the Beck Depression Inventory-II (BDI-II), and the Athens Insomnia Scale (AIS).

Results The BDI was associated with all the dimensions of the Q-LES-Q, with more severe depression being associated independently with lower satisfaction and enjoyment with one's own life. The AIS was independently and significantly associated only with physical health, such that patients with more insomnia complaints were 3.1 times (*P* < 0.001) more likely to report lower physical health satisfaction.

Conclusions Our findings confirmed that MOH has a negative impact on quality of life, and suggested that depression and insomnia were independently associated with satisfaction and enjoyment of life in MOH patients.

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Psychiatric comorbidity and suicide risk in patients with psoriasis

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Introduction Psoriasis has a significant impact on the mental and emotional functioning.

Objective It has been reported that the risk of psychiatric comorbidity increases with the severity of the disorder, and the most frequent associations appear to be those with depression and anxiety.

Aims To analyze the association between psoriasis, mental disorders and suicidal ideation in a sample of patients affected by psoriasis. To investigate the differences between psoriasis patients and patients with other dermatologic diseases.

Methods Participants were 242 consecutive patients (142 women and 100 men), 112 patients with psoriasis (46.3%), 77 with melanoma (31.8%) and 53 with allergy (21.0%). All patients were administered a structured sociodemographic interview and the following measures: the Hamilton Rating Scale for Depression