

Conclusions The best predictors of positive attitudes towards care during and after involuntary admission are illness related factors, such as levels of insight and improvement in insight, rather than service or legislation related factors, such as the use of coercive measures, seclusion and restraint.

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EV763

Mental pain expression in psychopathology and its assessment as a therapeutic outcome measurement

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Introduction Every theory that explains psychopathology refers to different aspects of mental pain whether it regards annihilation anxiety, fragmentation of the self or feelings of intolerable anguish. The concept of mental pain has proved to be an important symptom in mood disorders in general and suicide in particular (Orbach et al., 2004; Levi et al., 2010; Levinger et al., 2015). Combining the understanding that mental pain is as a part of all forms of psychopathology with the growing interest in assessing therapeutic processes via outcome measures has led to the assumption that the tolerance and severity of mental pain could become powerful outcome measurement. The aim of this study is to assess the Mental Pain Scale (OMMP) and Tolerance to Mental Pain Scale (TMPS) as outcome measurement and to learn about their capabilities to distinguish between different psychopathologies.

Objective The first objective would be to examine patterns of mental pain subscales in different psychopathologies. The second objective is to assess the OMMP and TMPS as outcome measurements.

Method Two hundred and thirty outpatients were administered a clinical questionnaire battery composed of eight questionnaires. The patients were to fill these questionnaires every 3 months for one year or until the end of their therapy.

Results We will present preliminary findings regarding the expressions of mental pain in different kinds of psychopathology and results of 3 months follow-up.

Conclusion Tolerance and severity of mental pain are a vital to the assessment of psychopathology and should be used as outcome measurement of therapeutic process.

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Assessing medication beliefs of mental health professionals: The Portuguese version of the Medication Alliance Beliefs Questionnaire

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Introduction Clinician's attitudes are an important consideration in implementing adherence strategies and that these attitudes can be successfully improved as a result of training. The 22-item Medication Alliance Beliefs Questionnaire (MABQ; Byrne et al.2008) was used to assess clinician attitudes towards non-adherence. The MABQ contains five subscales reflecting the clinician's self-efficacy (adequacy), the satisfaction (work satisfaction); their appraisal of their self-worth (self-esteem), their outcome expectancies (pessimism) in relation to non-adherent patients, and the extent to which they understand the difficulties patients might experience in trying to adhere to treatment (empathy).

Aims/objectives To develop the Portuguese version of the MABQ. **Methods** The MABQ was translated and adapted for Portuguese language. The translation was done by the first author (AC). The accuracy of this translation was discussed in a two focus group of experts, providing opinion on face and content validity. After pre-testing, the final version of the Portuguese translation was produced.

Results A convenience sample of 65 mental health professionals working in a variety of settings is being collected. The average score in MABQ was 80.06 (SD 9.5). The value of internal reliability coefficient α was 0.80. The intraclass correlation coefficient of total MABQ score was 0.35. The *t*-test showed that there were no statistically significant differences between the mean values of the measurement scale at two different times (80.4 vs.76.2; *P*=0.02).

Conclusion The attitudes of mental health professionals may have a predictive relationship with treatment outcomes of patients with mental health disorders. The validation of the Portuguese version of MABQ will provide professionals with a new tool to evaluate crucial issues related to medication beliefs.

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

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EV765

Assessing strategies to improve antipsychotic adherence: The Portuguese version of the difficulty implementing adherence strategies

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Introduction Non-adherence is a problem throughout medicine and there are many strategies that are used to improve antipsychotic adherence. A review of the literature identified 33 commonly cited strategies for enhancing consumer adherence. Three core themes were identified: Information/Education; Behavioural strategies; and Cognitive/Motivational strategies.

Aims/objectives To develop the Portuguese version of the DIAS. **Methods** The DIAS was translated and adapted for Portuguese language. The translation was done by the first author (AC). The accuracy of this translation was discussed in a two focus group of experts, providing opinion on face and content validity. The participants were asked to rate how often they had difficulties using each of the 33 strategies with consumers who were non-adherent. A four point Likert scale was used (1 = never; 4 = always) such that higher scores indicated more frequent difficulty using the strategy.

Results A convenience sample of 65 mental health professionals working in a variety of settings is being collected. The average score in DIAS was 85.0 (SD14.6). The value of internal reliability

coefficient α was 0.93. The intraclass correlation coefficient of total MABQ score was 0.45. The *t*-test showed that there were no statistically significant differences between the mean values of the measurement scale at two different times (84.5 vs. 90.5; $P=0.04$).

Conclusion Interventions to improve antipsychotic adherence would benefit from further research. However, it is important always to bear in mind that none of these strategies can be a substitute a positive therapeutic alliance. The Portuguese version of DIAS will provide professionals with a new tool to evaluate the frequency how strategies are implemented and the impact of each strategy in treatment adherence.

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EV768

Decisional trust and regret mediate the HRQL in work-related hand injury patients

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Background Despite mounting evidence that non-injury-related factors have an important role in recovery from injury; specific variables associated with surgery outcomes are poorly understood. This lack of knowledge complicates efforts to improve the care of work-related hand injury (WRHI) patients. However, substantial research and investigation have still not clarified these underlying relationships, which merit further attention.

Objective The purpose of this study was to evaluate the Health-Related Quality of Life (HRQL) outcome for WRHI patients after the impact of event and to investigate the moderated mediation analysis associated with their decision trust and regret.

Methods A cross sectional study design was used to investigate the impact of event and the associated HRQL in 53 WRHI patients following severe and major hand injury. All consenting patients completed the Impact of Event Scale Revised, the Symptom Checklist-90-Revised, Decisional Trust scale, Decisional Regret scale and Short Form-36.

Anticipated achievement In the result of mediation analysis, patients affected HRQL via decisional trust and decisional regret, respectively. In addition, our data suggest that certain decisional trust and decisional regret (partial) characteristics significantly moderate this association. These findings may aid in the development of clinical interventions to enhance HRQL for WRHI patients. Overall, it is important for clinicians to consider the notion that more decisional trust or less decisional regret may sometimes, but not always, be better.

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EV770

An empirical study of the working conditions in the drug prevention centers of Attika, Greece: New prospects and possibilities in an era of uncertainty

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Introduction Studies have documented that drug prevention centers in Greece have been through an era of turmoil and uncertainty (EKTEPN, 2015, Tsounis, 2012, Kiritsi and Tsiotra, 2004) underlining the staff's hard work all over Greece.

Purpose The aim of this study was to investigate the effects of the current fiscal crisis on the operating conditions as described by the staff of the Attica substance prevention centers with the emphasis on main problem areas and solutions.

Material Statistically reliable questionnaires were used by the research team investigating participants views on the aforementioned areas of enquiry.

Method Two Questionnaires were administered to 59 psychologists and social workers working at the centers of Attica, Greece during the summer of 2015.

Results The majority (85%) of those working at the centers mentioned the main problems as following:

- issues concerning the institutional role of the centers, the education and supervision of the staff;
- fiscal issues as a result of the economic austerity, which undermine the operation of the centers and the morale of the staff.

Conclusions Our empirical study is actually the first one which delves into the inner workings of the drug prevention centers in Attica, Greece:

- the extent the phenomenon of drug dependence in Greece, examining the epidemiology and the influence of the financial crisis, as well as the strategies and action plans developed in a national and EU level;
- the most significant innovative and standard European and Greek prevention programs.

Finally, research methodological issues are discussed in the light of the main findings of the empirical research.

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EV771

Mobility in psychiatry: A personal experience in Swiss addictology

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Introduction Switzerland is a very attractive country for workforce brain drain in the field of psychiatry, with work, academic and financial conditions identified as pull factors; resulting in long-term migration and high level of satisfaction [1].

Objectives To enlight the phenomenon by reporting a personal experience of migration from France to Switzerland for work reasons as a psychiatrist.

Aims To describe the main characteristics of the Swiss Mental Health Care in the Canton of Vaud focused on ambulatory cares in addictology.

Methods Self-report description from the Centre Saint-Martin for drug addictions of the Community Psychiatry Department in Vaudois Teaching Hospital (CHUV) of Lausanne.

Results The Centre Saint-Martin is an ambulatory center providing cares, support, treatment and harm reduction for adult drug