

Conclusions The analysis of the inter-rater reliability allows exploring subjective biases in assessing different structural and content language dimensions. This study advances in the development of a procedure to analyze autobiographical narratives in a valid and reliable way, with a special focus on traumatic and other unpleasant memories.

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

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EW479

Pool-data of clinical cases of inhaled loxapine (Adasuve)

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Introduction Agitation is a psychiatric emergency that requires immediate assistance. Inhaled loxapine is a new option for achieving rapid tranquillisation avoiding coercive measures and over-sedation, which fits with patient's preferences and increases their satisfaction with treatment.

Objective Review the experience of use of inhaled loxapine in clinical practice.

Methods We included data from all reports of case series with 10 or more patients published by European prescribers.

Results Ten posters were included that reported data on 116 patients, mostly diagnosed with psychotic or bipolar diseases. Among the 60 patients that were evaluated using PANSS-EC, baseline agitation intensity was above 20 in 45 of them (75%) and between 15 and 32 in 15 (25%). Regarding patients evaluated with the CGI-S scale, 17 patients had a score between 6 and 7 points and 4 had scores between 4 and 5. All patients were able to properly inhale the drug. In some patients agitation receded as early as 2 minutes, and almost all of them were controlled within 10 minutes. Only 6 patients required the 2nd dose of loxapine within 24 hours. When patients were asked for, they showed a preference for inhaled administration instead of intramuscular one, manifested high levels of satisfaction with inhaled treatment, and in one report inhaled loxapine was stated to contribute to avoid mechanical restraint. Inhaled loxapine was well tolerated and no over-sedation was reported or any EPS, just a case of mild orthostatic hypotension.

Conclusion This pool-data review of inhaled loxapine in real world clinical practice shows that it is an effective treatment, with a very rapid response, easy to administer and well tolerated, with a good acceptance from patients.

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EW480

Validation of the self-compassion scale in a community sample of Portuguese pregnant women

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Introduction In recent years, researchers and clinicians have shown an increasing interest in self-compassion. Indeed, several studies have suggested that self-compassion is a positive factor for mental and physical health. The Self-Compassion Scale (SCS; Neff, 2003) has been widely used to assess six dimensions of self-compassion (self-kindness, self-judgment, common humanity, isolation, mindfulness and over-identification) among diverse populations. Recently, it has also been used in perinatal samples but its psychometric properties in pregnant women is still unexplored.

Objective This study aims was to investigate the reliability and the validity of the SCS using Confirmatory Factor Analysis in a sample of Portuguese pregnant women.

Methods Participants were 417 pregnant women with a mean age of 33 years old (SD=4.74) in their second trimester of pregnancy (M = 17.26, SD = 4.78, weeks of gestation). Participants completed the Portuguese version of the SCS while waiting for the routine prenatal consultation in Maternity Hospital, Portugal.

Results A was tested and results showed that the six-factor model had a good fit to the data (TLI = 0.93, CFI = 0.94, RMSEA = 0.06). The total SCS presented a good internal reliability ($\alpha = 0.91$) and their subscales showed Cronbach's alphas ranging between adequate ($\alpha = 0.77$) and good ($\alpha = 0.87$).

Conclusions Overall, these findings suggest that the Portuguese version of the SCS is a valid and reliable measure to assess self-compassion among pregnant women. Thus, SCS could be useful in diverse settings in the perinatal period.

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EW481

Regret Anticipation Failures Scale (RAFS): Validation of the Portuguese version

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Introduction Failures in regret anticipation undermine regret avoidance, increasing regret frequency and ultimately the risk of regret-related problems. The Regret Anticipation Failures Scale (RAFS; Schmidt and Linden, 2011) was developed to evaluate interindividual differences in regret anticipation.

Objective To investigate the psychometric properties of the RAFS Portuguese version.

Methods A community sample composed of 108 university students and 79 employees (78.1% females; mean age = 33.16 ± 13.175; range: 17–62) answered the Portuguese preliminary version of the RAFS. To study the temporal stability, 31 participants (83.9% females; mean age = 26.54 ± 18.761) answered the RAFS again after approximately 6 weeks.

Results The RAFS Cronbach alpha was "very good" ($\alpha = 0.81$). All the items presented significant correlations with the total (excluding the item; > 0.20); only item 2 (Even when I'm stressed, I can foresee the regrets that certain behaviors could evoke in me) had the effect of lowering the internal consistency if deleted. The test-retest correlation coefficient was high, positive and significant (0.61; $P < 0.001$); there was not significant difference between test and re-test scores [14.26 ± 5.170 vs. 13.06 ± 4.761, $t(30) = 1.532$, $P = 0.136$]. Following Kaiser and Cattell Scree Plot criteria, only one factor was extracted, meaning that the scale is unidimensional.

Conclusions The Portuguese version of RAFS has good reliability and construct validity. It could be very useful both in clinical and research contexts, namely in an ongoing project on the relationship between regret, personality and psychological distress.

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EW482

Validation of the Depression, Anxiety and Stress Scale–DASS-21 in a community sample of Portuguese pregnant women

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Introduction The Depressive Anxiety and Stress Scale (DASS-21; Antony et al., 1998) had been widely used to measure psychological distress among clinical and non-clinical populations, including in Portugal (Pais-Ribeiro et al., 2004). Although DASS-21 has been considered useful to evaluate psychological distress in the perinatal period, studies reporting on its psychometrics are scarce (Brunton et al., 2015).

Objective To investigate the psychometric properties of the DASS-21 in a Portuguese sample of pregnant women.

Methods Four hundred and twenty-seven pregnant women (mean age: 32.56 ± 4.785 years) in their second trimester of pregnancy (17.34 ± 4.790 weeks of gestation) completed the Portuguese versions of DASS-21 and of Postpartum Depression Screening Scale (PDSS-24; Pereira et al., 2013).

Results The DASS-21 Cronbach's alpha was "very good" ($\alpha = 0.92$). Following the Kaiser and the Cattell Scree Plot criteria, two factorial structures were explored. Three factors structure (explained variance/EV = 57.18%): F1-stress (included 8 items; $\alpha = 0.89$); F2-Anxiety (7 items; $\alpha = 0.79$); F3-Depression (6 items; $\alpha = 0.82$). In the two factors structure (EV = 50.96), the Stress and Anxiety items load in the same factor (F1: 15 items; $\alpha = 0.91$) and the F2 is composed of the Depression items (F2: 6 items; $\alpha = 0.82$). Pearson correlations between DASS-21 total and dimensional scores and the PDSS-24 scores were all significant, positive and moderate to high ($r @ .50$).

Conclusions The Portuguese version of DASS-21 has good reliability, construct and concurrent validity when used with pregnant women. Its factorial structure significantly overlaps with the original, with only one item loading in another factor. DASS-21 could be very useful in diverse settings in the perinatal period.

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EW483

Portuguese validation of the Version of the Regret Scale

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Introduction Regret is defined as an aversive negative emotion associated to specific cognitive contents, felt when we consider that our current situation could be better, if we had taken a different decision (Zeelenberg and Pieters 1997). Regret Scale/RS corresponds to the regret-trait dimension of Regret and Maximization Scale developed by Schwartz et al. (2002).

Objective To investigate the psychometric properties of the RS Portuguese version.

Methods A community sample composed of 108 university students and 79 employees (78.1% females; mean age = 33.16 ± 13.175; range: 17-62) answered the Portuguese preliminary versions of the RS and Bedtime Counterfactual Processing Questionnaire (BCPQ) and also the Profile of Mood States to evaluate Negative Affect/NA. To study the temporal stability, 31 participants (83.9% females; mean age = 26.54 ± 18.761) answered the RAFS again after 6 weeks.

Results The EA Cronbach alpha was "very good" ($\alpha = 0.72$). All the items contributed to the internal consistency. The test-retest correlation coefficient was high, positive and significant (0.72; $P < 0.001$). Following Kaiser and Cattell Scree Plot criteria, only one factor was extracted, meaning that the scale is unidimensional. Pearson correlations of EA and BCPQ2 and NA were significant and high ($r @ .50$).

Conclusions The Portuguese version of RS has good reliability and validity. It could be very useful both in clinical and research contexts, namely in an ongoing project on the relationship between regret, personality and psychological distress.

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EW484

Bedtime Counterfactual Processing Questionnaire (BCPQ): Validation of the Portuguese version

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Introduction Counterfactual thinking is a set of mental representations of alternatives to the past actions. When it focuses on personal decisions, the emotion that results is regret, which has important implications for psychological distress (Borges et al., 2015). The Bedtime Counterfactual Processing Questionnaire (BCPQ; Schmidt and Linden, 2009) was developed to assess the frequency of regret-related counterfactual thoughts during the pre-sleep period.

Objective To investigate the psychometric properties of the BCPQ (extended version) Portuguese version.

Methods A community sample composed of 108 university students and 79 employees (78.1% females; mean age = 33.16 ± 13.175; range: 17-62) answered the Portuguese preliminary versions of the BCPQ and Regret Scale (Schwartz et al., 2002). To study the temporal stability, 31 participants (83.9% females; mean age = 26.54 ± 18.761) answered the BCPQ again after 6 weeks.

Results The BCPQ2 Cronbach alpha was "very good" ($\alpha = 0.81$). All the items contributed to the internal consistency. The test-retest correlation coefficient was high, positive and significant (0.78; $P = 0.05$); there was not significant difference between test and re-test scores [29.87 ± 5.309 vs. 30.13 ± 5.353, $t(30) = -0.204$, $P = 0.840$]. Following the Kaiser and the Cattell's Scree Plot criteria, two meaningful factors were extracted which explained variance (EV) was of 65.06%: F1 Regret (EV 43.17%; $\alpha = 0.88$), F2 low pride