

at intake and followed during outpatient treatment for an average of 531 days. Eighty-three percent of the patients underwent cognitive behavioral therapy, the families of 75% of the patients were included in the treatment and 48% of the patients took antidepressants (SSRI).

Results Both body mass index at assessment and illness duration appeared to be independent factors significantly affecting the outcome. The role of neuropsychological variables was explored including cognitive performance in a multivariate analysis including BMI at intake, duration of illness and diagnostic subtype. The inclusion in the model of the Wisconsin Sorting Card Task performance and the central coherence index (calculated by the Rey Figure Test) significantly increased the prediction ability of the model for full remission at the end of treatment.

Conclusions This is the first study to show that neuropsychological characteristics may predict treatment response in AN. These data support the implementation of cognitive remediation techniques in the treatment of AN.

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EW0532

Prevalence and correlates of perceived stress in young medical undergraduates

A. Mihăilescu^{1,*}, V.P. Matei², L.M. Gâză³, C. Mihailescu⁴, M. Codreanu³

¹ University of Medicine and Pharmacy “Carol Davila”, Medical Psychology, Bucuresti, Romania

² University of Medicine and Pharmacy “Carol Davila”, Psychiatry, Bucharest, Romania

³ Hospital of Psychiatry Prof dr Al. Obregia, Psychiatry, Bucharest, Romania

⁴ CMI dr Mihailescu S. Cristian, Family Medicine, Bucharest, Romania
* Corresponding author.

Introduction Emotional distress—specifically symptoms of anxiety and/or depression—in undergraduate medical student represent a major health issue for university life and for the entire society, as the onset of negative affectivity in young age is lowering quality of life of the affected individual and implicitly, the professional evolution.

Objective The purpose of this study is to investigate the prevalence of perceived stress in medical undergraduates and relationship between perceived stress and emotional distress.

Methods The study comprised a randomised population of 356 students from 1st and 2nd year in Faculty of Medicine who signed the informed consent for the research. Mean age in the group was 20.04 ± 0.9 years old. Instruments used in the study were self-rated Zung Anxiety Scale and Zung Depression Scale and Perceived Stress Scale. Data were analysed with SPSS 16. Statistical significance was at $P < 0.05$.

Results Perceived stress of medium and high intensity was found in 62.5% of the students in the study. There is a significant effect of perceived stress on presence of emotional distress ($F_{(3,352)} = 36,431$, $P < 0.001$). In the emotional distressed group, perceived stress in the period before the exams session is predicting emotional distress in the period of exams (academic stress) with OR = 1.145, $P = 0.04$, IC 95% = 1.006–1.303.

Conclusions There is a high prevalence of perceived stress and perceived stress in the period before session of exams is a predictive factor for having emotional distress in session of exams. Therefore, we are signaling the necessity of implementation of stress management programs in medical undergraduates from the pre-clinical years.

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EW0533

Microstructural changes in patients with Parkinson's diseases and REM sleep behavior disorder: Depressive symptoms versus non-depressed

S. Mohammadi Jooyandeh^{1,*}, M.H. Aarabi², F. Rahmani³

¹ University Hospital Regensburg, psychiatry and psychotherapy, Regensburg, Germany

² Basir Eye Health Research Center, neuroscience, Tehran, Iran

³ Tehran University of Medical Sciences, Student's Scientific Research Center, Tehran, Iran

* Corresponding author.

Introduction REM sleep behaviour disorder (RBD) is associated with psychiatric symptoms, such as anxiety and depression. RBD is characterized by loss of normal skeletal muscle atonia during rapid eye movement (REM) sleep with prominent motor activity and dreaming and is a usual symptom of the early stages of Parkinson's disease (PD). Diffusion MRI connectometry was used to carry out group analysis between age and gender matched PD patients with RBD in with and without depression to characterize possible depression-related white matter microstructural changes in the Parkinson patients with RBD.

Method DWI images were obtained for 15 PD-RBD with depression and 27 PD-RBD without depression. This dataset was acquired on a 3 Tesla Siemens scanner, producing 64 DWI at $b = 1000$ s/mm² and one b0 image. Diffusion MRI data were corrected for subject motion, eddy current distortions, and susceptibility artefacts due to the magnetic field inhomogeneity. Diffusion MRI connectometry was conducted in a total of 27 subjects using percentage measurement.

Results PD-RBD Patients with depressive symptoms showed decreased anisotropy ($FDR < 0.05$) in the fornix bilaterally, right cingulum, inferior longitudinal fasciculus bilaterally, right corticospinal tract and Genu of corpus callosum compared to PD-RBD patients without depression.

Conclusion Since RBD is considered to be an early symptom of PD and also a marker of progression to PD, these results might PD-RBD patients with depression may progress dementing processes and visuospatial dysfunction earlier since fornix, cingulum and ILF have proven to be associated with these cognitive dysfunctions respectively.

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Light as an aid for recovery in psychiatric inpatients: A randomized controlled effectiveness pilot trial

N. Okkels^{1,*}, L.G. Jensen², R. Arendt³, A.B. Blicher³, J. Hjortdal⁴, P. Jennum⁵, S. Straszek³

¹ Aarhus University Hospital Risskov, Clinic for OCD and Anxiety, Risskov, Denmark

² Aarhus University, Department of Mathematics, Aarhus, Denmark

³ Aarhus University Hospital Risskov, Department of Affective Disorders, Risskov, Denmark

⁴ Aarhus University Hospital, Department of Ophthalmology, Aarhus, Denmark

⁵ Copenhagen University Hospital, Danish Center for Sleep Medicine, Copenhagen, Denmark

* Corresponding author.