

discussed how mindfulness based cognitive therapy can be used as an intervention to disrupt this feedback.

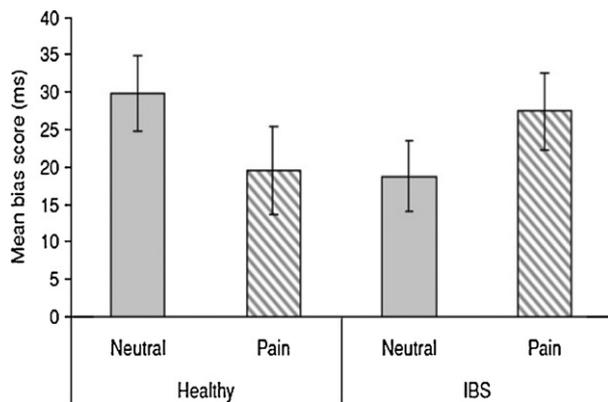


Fig. 1 Attentional bias in IBS and healthy groups with pain and neutral stimuli. Target in the same (valid) or different (invalid) position as the cue, bias = (RT invalid – RT valid).

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EV0026

Conversion disorder: Unexplained symptoms of silenced emotions?

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Introduction Conversion disorder is a condition defined by the presence of symptoms of altered voluntary motor or sensory function, not intentionally produced or feigned, presumed to be the expression of a psychological conflict or stressor, but mimicking neurological diseases or other medical conditions, that must be excluded before this diagnosis is made. The suspicion of conversion disorder arises when clinical findings are incompatible with the suggested neurological or medical conditions and there is a temporal relation between the onset of the symptoms and a psychological stressor. However, when these hints are absent, diagnosis may not be clear and require wider workup.

Objectives/aims To make a brief review on conversion disorder and present an illustrative clinical-vignette.

Methods We collected information from medical records and interview with the patient and made a research on PubMed with the MeSH terms “conversion disorder”.

Results We present a 51-years-old female outpatient with episodes of paralysis of left upper and lower limbs. Some months before the onset of these symptoms, her daughter came to live with her. Their relationship became very conflictual. Electroencephalogram, laboratory and imaging studies were normal. She did not tolerate the antidepressants tried (SSRI, SNRI and trazodone), but reported to feel better with amisulpride and alprazolam.

Conclusions Widely discussed in the past as “hysteria”, conversion disorder is still intriguing, because little is known about the link between body and mind, making the management of patients with this disorder challenging and highlighting the need for more studies on the topic.

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

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EV0027

Diagnosis of generalized anxiety disorder in Russia: The results of a web-based survey of psychiatrists

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Introduction There is a lack of attention on generalized anxiety disorder (GAD) in the psychiatrists' education programs in Russia. The consequence of this is difficult to estimate because of insufficiency of the GAD epidemiology in Russia.

Objectives Are estimation of the comparative prevalence of diagnosis of GAD among other anxiety and stress related disorders; psychiatrists' knowledge about GAD and their therapeutic approaches.

Methods The invitations to survey were sent by e-mail to members of the Russian Society of Psychiatrists; 888 psychiatrists took part in the survey. Twenty-six percent of them worked in inpatient departments, 43% – in outpatient departments, 15% – in somatic services, 17% – researchers and university professors.

Results A total of 83% of respondents have diagnosed GAD at least once during last year. Most often GAD was diagnosed by psychiatrists of somatic services. Mixed anxiety and depressive disorder was diagnosed in 2.5 times more often than GAD; adjustment disorders – in 2.1 times. Doctors have noted that among their patients with other mental disorders 26% have chronic anxiety, but most of doctors do not establish the comorbid diagnosis of GAD for these patients. Only a quarter of doctors consider that detachment of GAD from other anxiety disorders is based on the features of etiology and pathogenesis. In the treatment of GAD together with SSRIs, SNRIs, and pregabalin prescribing, doctors often prescribe benzodiazepines, atypical anxiolytics (hydroxyzine, buspirone) and low-potency antipsychotics (alimemazine, chlorprothixene).

Conclusions Increasing attention to GAD in the psychiatrists' education programs may improve diagnosis and treatment of this disorder in Russia.

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EV0028

Deep brain stimulation – Is there hope for obsessive compulsive disorder?

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Introduction Deep brain stimulation (DBS) is a neurosurgical procedure under investigation for a range of psychiatric and neurological disorders. One of them is obsessive compulsive disorder (OCD), which is a neuropsychiatric illness that often develops in childhood, affects 2% of the general population and causes significant impairment across the lifespan. Some cases are refractory to pharmacotherapy and psychotherapy and that is why new treatments have been investigated over the last decades.

Objectives/aims In this paper, we intent to do a review of the literature about the efficacy of DBS in the treatment of OCD.

Methods We present a literature review of some scientific articles found on Pubmed search using “deep brain stimulation and obsessive compulsive disorder/DBS and OCD”.

Results Clinical outcome of DBS for OCD shows robust effects in many studies. It appears that most patients regain a normal quality of life after DBS, reporting changes in perception, feeling stronger and more confident, and doing things unreflectively. It seems that DBS is a valid alternative to lesional ablative neurosurgery for severe, therapy-refractory OCD patients, although with partially discrepant results probably related to differences in anatomical targeting and stimulation conditions.

Conclusions DBS seems to be a promising modality for the treatment of some refractory psychiatric disorders such as OCD, but the search for the best target still continues. Randomized studies with larger samples are needed to establish the optimal targeting and stimulation conditions.

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

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EV0029

Is there a difference in prevalence of anxiety and depression symptoms among patients with different stages of hypertension?

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Introduction Whether anxiety and depression are associated with hypertension and to what extent is not clear.

Aims The aim of the present study was to assess any differences in the prevalence of anxiety and depression among different groups of hypertensive patients.

Methods The study cohort comprised of 127 patients (75 male, mean age 54 ± 14) who underwent assessment of their blood pressure levels and were divided in four groups: group I (normotensives, $n = 34$), group II (stage 1 HTN, $n = 33$), group III (stage 2 HTN, $n = 30$) and group IV (stage 3 HTN, $n = 30$). The evaluation of anxiety disorder was made by means of Hospital Anxiety Depression Scale (HADS), while the evaluation of depression was made with the Beck Depression Inventory (BDI). Statistical analysis was done with SPSS for windows. *P*-value was set at 0.05 for differences to be considered significant.

Results Comparing the four groups of patients there was a significant difference both in BDI (8.6 ± 7.0 vs. 11.6 ± 10.4 vs. 27.1 ± 5.8 vs. 32.4 ± 3.9 , $P < 0.0001$) and HADS (10.2 ± 7.2 vs. 9.7 ± 7.0 vs. 16 ± 4.7 vs. 27 ± 5.1 , $P < 0.0001$). We proceeded to comparison among the 4 groups and there was a significant rise in the BDI and HADS in three of the four groups group II > group III > group IV, $P < 0.0001$.

Conclusion These data suggest that there is a clear burden of anxiety and depression as the levels of BP increase. This finding is of important clinical significance as it could contribute to a different approach of hypertensive patients. A larger cohort study could enlightened the mechanisms involved.

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

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EV0030

Association of arterial stiffness burden with anxiety and depression in different stages of hypertension

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Introduction There has been an attempt to associate anxiety and depression with arterial stiffness. In the present study, we assessed differences in arterial stiffness among 3 groups of hypertensive patients compared to control normotensives as well as possible association with anxiety and depression scoring system.

Methods The study cohort comprised of 127 patients (75 male, mean age 54 ± 14) who underwent assessment of their blood pressure levels and were divided in four groups: group I (normotensives, $n = 34$), group II (stage 1 HTN, $n = 33$), group III (stage 2 HTN, $n = 30$) and group IV (stage 3 HTN, $n = 30$). The evaluation of anxiety disorder was made by means of Hospital Anxiety Depression Scale (HADS), while the evaluation of depression was made with the Beck Depression Inventory (BDI). Arterial stiffness evaluation was done with Cardio-Ankle Vascular Index (CAVI). Statistical analysis was done with SPSS for windows. *P*-value was set at 0.05 for differences to be considered significant.

Results Both CAVI R and CAVI L indices were significantly higher as the severity of hypertension progressed ($P < 0.001$). BDI score was significantly correlated with CAVI R (Pearson $r = 0.53$, $P < 0.0001$) and CAVI L (Pearson $r = 0.39$, $P < 0.0001$). HADS score was also significantly correlated with both CAVI R (Pearson $r = 0.53$, $P < 0.0001$) and CAVI L (Pearson $r = 0.43$, $P < 0.0001$).

Conclusions There is a burden in the arterial stiffness of this population with the increase of the levels of BP which is not surprising. However, the new finding is that there is a strong correlation with arterial stiffness indices and both anxiety and depression scoring system.

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EV0031

The relationship of social phobia and personality characters in colleague students

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Social anxiety disorder, pervasive and debilitating disorder with a high rate that affects many aspects of human life. The aim of the study was to assess the relation between social phobia and personality traits of Rafsanjan University of medical sciences students. By using Cochran formula and random stratified sampling, 284 person of Rafsanjan University of medical sciences students selected. Participants responded to questions of the NEO Personality and Social Phobia questionnaire. Data analyzed with Pearson correlation coefficient, analysis of variance and regression. Among the individuals, 11.6% had severe social phobia and 4.6% very severe. The relationship between social phobia and neuroticism was reversed and significant and other personality characters were significantly. Neuroticism and openness predicted social phobia