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**Objective** To determine gender differences in prevalence of anxiety traits in general population and to evaluate its impact on the risk of hypertension in men and women aged 25–64 years in the open population in Russia/Siberia.

**Methods** Under the third screening of WHO program “MONICA-psychosocial” a random representative sample of the population aged 25–64 were surveyed in Novosibirsk in 1994 ( $n=657$  men,  $n=870$  women). Anxiety levels were measured by means Spielberger test. Over the 16-year period were identified 229 cases of AH in women and 46 for men. Cox-proportional regression model was used for an estimation of hazard ratio (HR).

**Results** In general population aged 25–64 years at 99.5% of women and 97.5% of men had moderate and high levels of anxiety traits. In univariate Cox regression analysis model the risk incidence of arterial hypertension in women and men with high level of anxiety was 2.383-fold and 5.18-fold higher, respectively, over 5 years of follow-up. It was 1.853-fold and 5.75-fold higher over 10 years and 1.45 and 3.82 times higher over 16 years after baseline. In the multivariate Cox regression model HR of hypertension was 1.648 in women with high level of anxiety; and it was 4.568-fold higher in men.

**Conclusion** Despite the higher prevalence of HLA in women, the risk of developing hypertension is much higher in males.

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

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#### EV0036

### Contribution for the Portuguese validation of the Depression, Anxiety and Stress Scales (DASS-21): Comparison between dimensional models in a sample of students

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**Introduction** The Depression, Anxiety and Stress Scales are widely used in clinical and non-clinical populations, both in research and clinical settings. The need for briefer but valid and reliable instruments has motivated the reduction of the original 42-item scale to a short 21-version. On Portuguese samples, Pais-Ribeiro et al. (2004) found that the original 3-factor solution (stress, anxiety and depression) explained 50.35% of the variance and in an exploratory analysis; Xavier et al. (2015) presented a two factor solution and a modified three-factor solution with a sample of pregnant women, both with adequate factors' reliability ( $<0.70$ ) and explaining above 50% of the variance.

**Aims** Based on the previous results of factor analysis with Portuguese samples, the present study aimed to perform confirmatory factor analyses (using Mplus software) to evaluate which dimensional structure best fitted the data.

**Methods** The sample comprised 234 students (78.2% female), between 18–26 years old ( $M=20.55$ ;  $SD=1.66$ ). Eighty-five percent of the participants were on their first three years of college education. Participants filled the Portuguese version of the DASS-21.

**Results** Our results showed that the original 3-factor structure had the best model fit [ $\chi^2_{(186)}=475.465$ ,  $P<0.05$ ;  $RMSEA=0.082$ ,  $90\% CI=0.073-0.091$ ;  $CFI=0.918$ ;  $TLI=0.908$ ;  $SRMR=0.05$ ]. Good reliability was found for all subscales (0.92 for stress, 0.87 for anxiety and 0.91 for depression subscale).

**Conclusions** The DASS-21 is a reliable instrument that, with student populations, seems to have better performance when used with a 3-factor structure. Further research is needed to confirm this structure in Portuguese clinical samples.

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

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#### EV0037

### Psychogenic nonepileptic seizures

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**Introduction** Psychogenic nonepileptic seizures (PNES) are defined as a somatoform conversion disorder manifesting as paroxysmal events not associated with electroencephalographic (EEG) epileptiform correlates. This entity is poorly understood and often misdiagnosed as epilepsy. It is important to recognize that misdiagnosis leads to inappropriate use of antiepileptic drugs, which may worsen the course of the disease.

Recent studies have suggested that the frequency of psychogenic nonepileptic seizures ranges from 10 to 23% of referrals to a pediatric epilepsy center, as well as 60% of children with PNES achieve symptom improvement and event freedom of symptoms following appropriate treatment.

**Objectives** The aim of this study is to conduct a literature review of studies which the purpose was better understand the etiologies, features, and care outcomes of psychogenic nonepileptic seizures (PNESs) in a pediatric setting.

**Conclusion** A early identification of the risk factors for comorbid psychopathology, diagnosis and appropriate care for PNESs reduces inappropriate medical investigation and therapy, expedites rates of remission, and decreases health-care utilization in a pediatric setting.

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

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#### EV0038

### Emetophobia (a specific phobia of vomiting): A case study

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**Introduction** Case presentation of a young woman Ms. A.M., referred by her GP with an eating disorder, who was thereafter diagnosed with an uncommon type of phobia (emetophobia – a specific phobia of vomiting) and treated accordingly.

**Objectives** To highlight the diagnostic dilemma with such uncommon cases, who are often misdiagnosed as having anorexia nervosa or bulimia nervosa or suffering from other anxiety disorders (like OCD or GAD).

**Methods** A comprehensive mental state examination was conducted including a diagnostic clarification interview. She was followed up by the mental health team on a regular basis with support and also providing appropriate psychotherapy.

**Discussion** Ms. A.M. refused medications and only agreed to non-pharmacological treatment. She was therefore commenced on once weekly psychotherapy (CBT), which she undertook for a period of 4 months. She showed good response to the psychotherapy with significant attenuation of her core symptoms, although she still continued to exhibit some avoidance behaviors.

**Conclusions** This particular patient showcases a relatively uncommon and often misdiagnosed specific phobia (emetophobia)