

Aims To estimate the prevalence of ADHD among adult MH users in west county Ireland.

Methods All consecutive patients attending any of 5 Sligo/Leitrim AMHS were invited to participate. Participants completed the Adult ADHD Self-Report Scale (ASRS) and the Wender Utah Rating Scale (WURS). Clinical notes were reviewed to identify those with pre-existing ADHD diagnosis. Exclusion criteria applied were: age: less than 18 or above 65, illiterate, non-English speaking patients.

Results From 792 attending the clinics, $n = 59$ (47 aged above 65, 10 severe learning difficulties and 2 non-English speaking) were excluded. Ninety-three (11.7%) decline to participate, giving a total of $n = 640$ (87% eligible response rate). Mean age was 41.27 (SD: 12.8), and 336 (52.5%) were females. Three had diagnosis of ADHD. Two hundred and thirteen (33.8%) met criteria on the WURS for childhood onset ADHD and 238 (37.5%) participants met caseness on the ASRS. Applying more stringent criteria of scoring on both scales, suggested 125 (19.5%) with unrecognised ADHD.

Conclusions While recall bias (WURS) and the possibility of overlapping symptoms with other major psychiatric disorders in adulthood need to be considered, the use of both screening reduces these confounders and suggests a very high rate of ADHD. Given the low number previously identified, this becomes a clinical priority, both to offset the negative trajectories associated with untreated ADHD, but also to effect optimal treatments in comorbid conditions.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1621>

EV637

Psychological well-being among social network users of King Saud University students

D. Alateeq^{1,*}, A. Alhadi^{1,2}, F. AlAteeq³, A. Alsubie¹, D. AlEesa³, S. AlShareef³, A. Omair³

¹ King Saud University, College of Medicine, Department of Psychiatry, Riyadh, Kingdom of Saudi Arabia

² King Saud University, SABIC Psychological Health Research & Applications Chair, Riyadh, Kingdom of Saudi Arabia

³ King Saud Bin Abdulaziz University for Health Sciences, College of Medicine, Riyadh, Kingdom of Saudi Arabia

* Corresponding author.

Introduction Social networks allow individuals to express themselves, and establish or maintain connections with others. Using social networks like Facebook may be associated with a sense of self-worth and may play an important role in psychological development of university students who are in emerging adulthood phase.

Objective (1) Assess the psychological well-being of Saudi university students using social networks (Facebook).

(2) Explore whether the relationship between Facebook use and bridging social capital is different for individuals with varying degrees of self-esteem and satisfaction with life.

Aim To study the psychological well-being of Saudi university students using social networks (Facebook).

Method An electronic survey was published in the community site for all students of King Saud University. In addition to the demographic information, the survey evaluates Facebook use intensity, bridging social capital and psychological well-being: self-esteem and satisfaction with life.

Results A total of 1005 students completed the survey, of which 50.5% were female. Majority of them were members in Facebook (92.1%).

Conclusions Results showed no significant correlation between the use of Facebook and psychological well-being. It could be due to the fundamental difference between Arabs and other cultures or due to the use of other social networks. There was a positive relationship between bridging social capital and psychological

well-being with being in preparatory year, which is most likely because advanced years has more workload preventing students from participating in King Saud University community. A longitudinal study over a series of years and addressing other popular social networks would be the next step.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1622>

EV638

Access to mental health and immigration

S. Fuentes Márquez, R. Alonso Díaz*, E. Cortázar Alonso
Hospital Juan Ramón Jiménez, Salud Mental, Huelva, Spain

* Corresponding author.

In the present study, we certain demographic variables of immigrants accessing specialized mental health care at two points in time: 2013 and 2014. According to the National Institute of Statistics, the number of foreigners fell by 4% in 2013 and 3% in 2014 due to emigration and the acquisition of Spanish nationality. Among the objectives of the department of health is collected to ensure the right to health protection to immigrants through effective access to the health system and improve management capacity and performance of health centers in diverse contexts.

Results Despite the overall decline in foreign an increase in first consultations requested for immigrants was observed. At both time points, higher demand for foreign women is observed. With respect to age greater demand seen in middle adulthood, however in 2014 there is a greater homogeneity with respect to this variable. The greatest demand comes from Morocco, Romania and Poland, although most Latin American countries are increasingly observed.

Conclusions Better access and better quality health care to both the immigrant population and of citizens in amount from acceptance and commitment to this complex and diverse and its approach will be achieved.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1623>

EV639

Socio-demographic factors among delusional disorder: A case series register

C.M. Carrillo de Albornoz Calahorra*, M. Guerrero Jiménez, A. Porras Segovia, J. Cervilla Ballesteros

Hospital Universitario San Cecilio, Unidad de Salud Mental, Granada, Spain

* Corresponding author.

Introduction Delusional disorder has reached an entity of growing interest with a prevalence in developed countries between 1 and 4% of the psychiatric consultations.

Objective To describe various socio-demographic and clinical variables that characterize patients diagnosed with delusional disorder in Andalucía according to DSM-5 criteria.

Methods Reviewing common medical history digital records. First, it has been proved whether it complies DSM-5 criteria for the diagnosis of delusional disorder. Then, there have been different epidemiological variables collected: age, sex, family psychiatric history, and marital status, and employment status, age of onset of illness, number of years of follow-up by specialized care, the number of visits to your computer, and number of hospitalizations in a psychiatric inpatient unit among others.

Of the 1927 patients studied, 1452 met the criteria for diagnosis of delusional disorder. These patients live in Andalusia and come

to different mental health care units, with an average follow-up period of 9 years and 1 month.

Results About half of the sample were women and half men (49% versus 51%).

Forty-seven percent of the sample are married or have a couple, and 19% are in active employment.

Thirty-two percent have a family history of psychiatric mental disorder written in his digital clinical record.

Seventy-five percent of the sample meets criteria F22, while 25% are diagnosed as other psychoses.

Conclusion This is the largest record of cases registered with delusional disorder to date, in which we describe the biopsychosocial characteristics of this group of patients in the largest Spanish region.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1624>

EV640

Socio-demographic analysis of an early psychosis intervention programme

C.M. Carrillo de Albornoz Calahorra*, J.A. Rodrigo Manzano, B. Girela Serrano

Hospital Santa Ana, Unidad de Salud Mental, Motril, Granada, Spain
* Corresponding author.

Introduction During the first 5 years of the onset of schizophrenia, the majority of the clinical and psychosocial deterioration takes place.

This period of time is critical in terms of diagnosing the illness and providing effective psychosocial and pharmacological treatment.

Objectives/aims Knowing the demographic profile of users of an Early Psychosis Intervention Program to adapt the intervention to their specific needs.

Methods A descriptive statistical analysis of the records of every patient on admission program during year 2014 was carried out. There have been various socio-demographic variables collected such as: sex, age, initial diagnosis, drug consumption, educational level, labor situation, referral source and origin.

Results We found an average age of 26, near the normal curve between 15 and 35 years distribution.

Eighty percent of our sample were men.

Eighty percent were non-affective psychosis as their initial diagnosis.

Abuse toxic in 70%, in all cases cannabis or derivatives.

Education level: 56% primary studies. Thirty percent reached secondary studies. Fourteen percent higher educational level.

In terms of job-training situation: 30% were working, 40% unemployed and 30% studying.

Sixty-five percent were referred from primary care centers, 20% from drug abuse centers and 15% from hospitalization units.

Main nationalities were Spanish 65%, 30% were Moroccan, and 5% other came from other nationalities.

Conclusion It stresses the importance of intervening on dual diagnosis, the need for greater coordination with primary care to improve the detection of cases and the development of the training-labor area in the recovery process.

It is also necessary to evaluate the different characteristics of immigrants included in the program.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1625>

EV641

Physicians' burnout: Can we make a difference?

C.A. Moreira*, G. Sobreira, J.M. Oliveira, M.A. Aleixo

Centro Hospitalar Psiquiátrico de Lisboa, Psychiatry, Lisbon, Portugal
* Corresponding author.

Introduction Burnout is a commonly observed syndrome in healthcare workers and it has been defined as a psychological condition involving a continuous exposure to stressful work events leading to adverse consequences both in physical and mental health. Persistent pressure can lead to exhaustion, psychological and/or physical distress and may increase the risk of medical errors and decrease job satisfaction, which incites early retirement.

Objective The authors pretend to make a brief review regarding Physicians' burnout, its prevention and management.

Aims To understand and to be capable of dealing with physicians' burnout.

Methods The review was based in papers published on PubMed using the following terms: "burnout", "risk factors", "healthcare professionals" and "physicians coaching".

Results Twenty-five to 60% of physicians report burnout across all specialties. Changes in the healthcare environment have created marked and growing external pressures. Numerous studies suggest that the difficulty that physicians face with balancing their personal and professional lives is a major contributor to distress. To reduce stress at work, one should consider two levels of intervention: the individual and the environmental. Multidisciplinary actions that include changes in the work environmental factors along with stress management programs that teach people how to cope better with stressful events showed promising solutions to manage burnout.

Discussions/conclusions Burnout among physicians is a common and serious issue with potentially devastating personal and professional consequences. More interventional research is needed in order to improve psychological well-being, professional career enjoyment as well as the quality of care provided to patients.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1626>

EV642

Victimization of the mentally ill

A. El-Missiry

Ain Shams University, Neurology & Psychiatry, Cairo, Egypt

Background Persons with mental disorders living in the community are liable for victimization and are considered as a high-risk group.

Objective To explore the socio-demographic variables and clinical characteristics related to victimization of patients with schizophrenia in comparison to their non-victimized counterparts.

Subjects and methods One hundred patients were recruited from the inpatient wards and outpatient clinics of the Institute of Psychiatry, Ain Shams University. They were subjected to Structured Clinical Interview for DSM-IV Axis I diagnosis (clinical version); Positive and Negative Syndrome Scale (PANSS); Global Assessment of Functioning (GAF); Clinical Global Impression (CGI); designed extensive questionnaire to elicit demographic data; inquiry about drug compliance and Victimization Questionnaire.

Results Seventy patients of the studied sample were non-victimized and 30 patients were victimized. Victimized patients were significantly younger, living mainly in urban areas, had less frequent history of bullying at school. There were exposed significantly to higher frequency of family domestic violence and childhood abuse. They scored higher for all subscales and in total PANSS scores and they were less compliant on medication than did their non-victimized counterparts.