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EV1244

Psychosis and psoriasis, the skin talks the truth

S. García Marin^{1,*}, I.M. De Haro García², N. Martínez Pedrosa³, M.D. Ortega García⁴, V. Marti Garnica⁵

¹ Centro Salud Mental Lorca, Adultos, Lorca, Spain

² Centro Salud Mental Lorca, CAD, Lorca, Spain

³ Hospital de Vinalopó, Adultos, Elche, Spain

⁴ Centro de Salud Mental Cartagena, Infantil, Cartagena, Spain

⁵ Centro de Salud Mental Cartagena, Adultos, Cartagena, Spain

* Corresponding author.

Introduction It is well known about relation between skin and mind, not only due to their mutual origin, but also by their illness expression parallelism. We report a case to show that reciprocity.

Personal antecedents Woman, 42-year-old, single. She only suffers from a skin disease; mild psoriasis guttata placed in both elbows and knees. She treated it with local treatment (cortisone cream) during seasonal pruritus and the lesions did not grow or expand. She was hospitalized due to psychotic symptoms (paranoid delusions with her colleagues) and started antipsychotics treatment (risperidone 12 mg per day and olanzapine 10 mg per night). By the same time, she suffered a psoriasis crisis. Her psoriatic plaques increased their sizes and her chest and both thighs were affected too. She complained about grave pruritus. All her medical test results were normal. After that, the patient improved her psychotics' symptoms, but she started with agoraphobic signs and seclusion at home. Psoriasis were even worse than before and she needed metrotexate to treat it. Being introduced to escitalopram 15 mg per day, anxiety and depression symptoms disappeared and her grave psoriasis became the mild one that she knew.

Conclusion Schizophrenia was associated with a greater variety of autoimmune diseases than was anticipated. Studies found evidence for a shared genetic etiology between schizophrenia and psoriasis. Despite that, we think that the study of psychopathology can amplify our understanding about the etiopathogenesis of psoriasis and associated mental disorders.

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Frontotemporal dementia misdiagnosed as schizophrenia or other psychotic disorder

A. Giamarelou^{1,2}, P. Polychronopoulos^{1,3}, M. Skokou^{1,2,*}, L. Messinis^{1,2}, P. Gourzis^{1,2}

¹ University Hospital of Patra, Rio, Greece

² Department of Psychiatry, University of Patra, Patra, Greece

³ Department of Neurology, University of Patras, Patra, Greece

* Corresponding author.

Introduction Frontotemporal dementia (FTD) encompasses a group of clinical features that include personality and behavior changes (disinhibition, social isolation, antisocial behavior, compulsion) and executive dysfunction (poor planning, loss of judgment and loss of insight). These features may lead to an incorrect diagnosis of a primary psychiatric disorder.

Objectives To emphasize the difficulties in making a clinical distinction between early frontotemporal dementia and other psychiatric diseases.

Methods We describe 11 patients who suffered from FTD, while initially had diagnosed with primary psychiatric disorders. The cor-

rect diagnosis was achieved by psychiatric and neuropsychological evaluations (WAIS SCALE, ACE-R, MMSE), neuroimaging studies (MRI 7/11, SPECT 8/11) and applying the international consensus criteria for FTD.

Results All patients (5 males and 6 females) were initially diagnosed with psychiatric disorders: schizophrenia (2/11), bipolar disorders (4/11), depression (5/11), schizoaffective disorder (1/11), somatization disorder (1/11), personality disorders (2/11), malingering (1/11), alcohol dependence (1/11), while 5 patients had more than one diagnosis. The age of onset varied from 19 to 53 years old. Final diagnosis of FTD was delayed on average 6,5 years from the onset of symptoms.

Conclusion Clinicians should be familiar with the clinical entity of FTD and its difficult distinction from other psychiatric disorders. A possible hospitalization of a patient with FTD in a psychiatric department and the social impact that it brings may be avoided. On the other hand, the proper care of FTD patients (pharmacological and psychosocial) improves the quality of life of patients and their caregivers.

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Validation of the Portuguese version of the consumer experiences of stigma questionnaire (CESQ)

L. Mendonça¹, S. Azeredo-Lopes², I. Landeiro³, J. Grácio⁴, M. Gonçalves-Pereira^{4,*}

¹ Hospital de Cascais, Departamento de Saúde Mental, Cascais, Portugal

² Nova Medical School/Faculdade de Ciências Médicas, Universidade Nova de Lisboa, Department of Biostatistics and Informatics, Lisbon, Portugal

³ CHLO, Centro Hospitalar de Lisboa Ocidental, Psychiatry and Mental Health, Lisbon, Portugal

⁴ Nova Medical School/Faculdade de Ciências Médicas, Universidade Nova de Lisboa, CEDOC, Chronic Diseases Research Center, Lisbon, Portugal

* Corresponding author.

Introduction Tackling stigma and discrimination is a major concern worldwide as demonstrated e.g. in the European Mental Health Action Plan. We need valid and feasible indicators to assess the stigma of mental illness. In Portugal, validated scales focused on mental health consumers' personal experiences of stigma are scarce. The consumer experiences of stigma questionnaire (CESQ) (Wahl, 1999), developed in collaboration with the National Alliance for the Mentally Ill, focuses on users' real life experiences. Although it was validated in different countries, some psychometric properties (e.g. test-retest reliability) are to be tested.

Objectives To further assess CESQ psychometric properties and to validate its Portuguese translation.

Methods The CESQ Portuguese translation was developed in collaboration with the author (Otto Wahl), using standard translation and back-translation procedures. The acceptability of items was assessed in pilot studies and discussed in groups also involving health professionals. The measure was then used in a convenience sample of 122 persons with severe mental illness. Assessments included test-retest reliability ($n=48$). A factor analysis was also conducted.

Results Overall, the CESQ translation proved acceptable and missing items were few, not compromising the analysis. The intra-class correlation coefficient (ICC) for test-retest reliability was 0.83 [95% CI 0.71–0.90] and Cronbach's alpha for internal consistency was 0.80 [95% CI 0.75–0.85]. In the principal component analysis, factor loadings confirmed the two originally reported domains: stigma and discrimination.

Conclusions The CESQ Portuguese version demonstrated good validity and reliability, replicating research using the original version and adding to the documentation of its psychometric properties.

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EV1247

Help-seeking behavior among patients and their relatives presenting to psychiatric unit in southern Sri Lanka

K.D.D.R. Goonawardena*, S.W. Kotalawala, R. Ruban
Teaching Hospital Karapitiya, Psychiatry, Galle, Sri Lanka
* Corresponding author.

Background Early recognition of the signs and symptoms of psychiatric illnesses is important as the delay would predict worse prognosis.

Aims To study the help-seeking behavior and sociodemographic factors of psychiatric patients presenting to Psychiatric Unit Teaching Hospital, Karapitiya.

Methods A descriptive cross sectional study. Sample drawn from patients presenting for the first time to Psychiatric Unit Teaching Hospital, Karapitiya. An interviewer administered questionnaire was used to collect data.

Results Age ranged from 13 to 76 years ($n=50$). Males 34 (68%). Duration from onset of symptoms to first presentation ranged from 2 days to nine years, mean 2 years. Twenty-five (50%) had symptoms for more than one year. Sixteen (32%) stated to have attributed illness to supernatural courses as the reason to delay seeking medical help. None gave difficulty in accessing a psychiatric unit as reason for the delay. Twenty-six (52%) referred by nonpsychiatric medical professionals. Regarding alternative treatment engaged in prior to presentation to a psychiatric unit, eighteen (36%) tried to dispose of evil spirits with the help of yakaduru or kattadi, seven (14%) sought help from indigenous medical practitioners and twenty (40%) engaged in religious rituals. Thirteen (26%) sought nonpsychiatric medical treatment.

Conclusions A substantial number of patients suffering from psychiatric disorders present to psychiatric units delayed. As the majority were referred by nonpsychiatric medical professionals, alerting them regarding importance of early identification of psychiatric illnesses could help in reducing the delay.

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Associations between cognition in parents with schizophrenia or bipolar disorder and their 7-year old high-risk offspring

A.N. Greve^{1,*}, J.R.M. Jepsen², V. Bliksted¹, E.L. Rasmussen³, D. Gantriis¹, B.K. Burton⁴, D. Ellersgaard⁵, C.J. Christiani⁵, K. Spang⁴, N. Hemager⁵, A. Thorup⁵, M. Nordentoft⁵, K.J. Plessen⁴, O. Mors¹

¹ Aarhus University Hospital, Psychosis Research Unit, Risskov, Denmark

² Copenhagen University Hospital, Centre for Neuropsychiatric Schizophrenia Research & Centre for Clinical Intervention and Neuropsychiatric Schizophrenia Research, Copenhagen, Denmark

³ University of Copenhagen, Department of Public Health and Center for healthy Aging, Copenhagen, Denmark

⁴ Copenhagen University Hospital, Child and Adolescent Mental Health Centre- Mental Health Services Capital Region, Research Unit, Copenhagen, Denmark

⁵ Copenhagen University Hospital, Mental Health Centre Copenhagen, Copenhagen, Denmark

* Corresponding author.

Introduction Neurocognitive and social cognitive impairments are central characteristics of schizophrenia and, to a lesser extent, of bipolar disorder. Birth cohorts and familial high risk studies have described cognitive impairments in subjects before onset of diagnosis as well as in children with increased genetic risk for development of the disorders.

Objectives To our knowledge, this is the first study to investigate the correlations between neurocognition and social cognition in parents and offspring simultaneously and with the same methodology. We will divide the parents into subgroups (cognitive impairment and good cognitive functioning) and use these subgroups to describe correlations with their offspring. Identifying associations between parents and offspring can add important clues to risk factors for schizophrenia and bipolar disorder and, on the long-term, help the development of more effective and potentially preventive treatments.

Methods This study is part of the Danish high risk and resilience study-VIA7. The VIA7 cohort consists of 522 children age 7 with zero, 1 or 2 parents diagnosed with schizophrenia or bipolar disorder and both of their biological parents. We assessed neurocognition and social cognition with a comprehensive test battery including: intelligence (RIST), executive functions (WAIS-IV, D-KEFS, CANTAB), verbal memory (TOMAL2), attention, emotion recognition, decision making and response control (CANTAB), theory of mind (animated triangles) and social perception (TASIT). Parental subgroups were based on the 95% CI of the controls (cognitive impairment <95%CI and good cognitive functioning >95% CI).

Results Data analysis is ongoing and results will be presented at the conference.

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Gynecological consultations during the period of untreated psychosis

C.M. Carrillo de Albornoz Calahorra¹, M. Guerrero Jiménez^{1,*}, J.E. Muñoz Negro²

¹ Santa Ana Hospital, Mental Health Unit, Motril, Spain

² University Hospital Complex of Granada, Psychiatry, Granada, Spain

* Corresponding author.

Background Twenty-one percent of women with first episode of psychosis in the south Granada between 2008 and 2014 went to hospital emergency during the duration of untreated psychosis (DUP) aiming a gynecological consultation caused by psychotic symptoms. Only one in five was referred to mental health services.

Aims To improve difficulties detecting cases during the prodromal phase, we aim to analyze the patient's profile and reasons for consultation and study whether there are variables that facilitate referral to specialist intervention.

Methods A retrospective clinical-cases review of medical histories was made searching for sociodemographic variables, drug consumption, emergency services consultations and psychotic prodromal outcomes.

Results They were single women between 18–32 years. Sixty percent reported cannabis consumption. All of them live with family. Eighty percent were studying or unemployed. Three types of emergency consultations were reported with a similar incidences: order the emergency-contraception-pill, a pregnancy test or "a scan to check virginity/a nonconsensual relationship". During the initial exploration, about 40% were under the influence of drugs.