

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.

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Socio-demographic analysis of an early psychosis intervention programme

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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.

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Physicians' burnout: Can we make a difference?

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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.

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Victimization of the mentally ill

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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.