

Introduction In a globalized world, violence, present in all forms and everywhere, it is a serious public health problem. Violence and war lead to death and leave marks on the bodies and minds, and the post-traumatic stress disorder (PTSD) is a mental disorder that may develop following exposure to a potential event traumatic.

Results In the 3-month period (January 2016 to April 2016), according to typological analysis of the journal cover, the following results were found: the type of prevailing violence was interpersonal, community, committed by a stranger (75%), followed by the violence of the economic type (16.7%), and finally interpersonal violence committed by partner (8.3%). Although not all cases have provided the number of people who perpetrated or suffered violence, most victims of violence were male (8), aged 3 months and 36 years, followed by 2 women, and as a perpetrator of violence the men were in excess (4 men) followed by one woman.

Discussion Violence and war are traumatic stressors and risk factors for PTSD which, in turn, is also a risk factor to perpetrate violence, such as domestic violence. The costs of violence are high and its routinization as a way of life has important effects on the mental health of population.

Considerations Scientific research, including qualitative studies, on PTSD, violence and war are necessary so that we have a better understanding of the phenomenon as well as to promote the mental health of all through early intervention or even in preventing the onset of this disorder.

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EV0980

Deaths and symbolic use of language: Semiotics and thanatological reading of the film *Nell*

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Introduction Psychiatric disorders may become more severe when the subject is exposed to a hostile environment. Symptoms of mental malaise are expressed by the senses, including speech and language.

Methods The method is used of semiotic analysis and thanatological movie.

Objective To investigate the limit and death as a trigger of a singular mode of use of the spoken language. The problem presented in this paper is the linguistic system created by *Nell*.

Results Partial results show that spoken language in this particular cut, becomes an instrument for dealing with the losses accumulated throughout his life. The life of isolation, restrictions on maternal vocalization, her mother's death and mourning acted as an inhibitor of language.

Conclusion The spoken language works like kaleidoscope of interactions of the individual with their group, with the medium in which it is inserted, with the set of beliefs that nourishes and with the world that she wants there, even if only in your intimate venue. Thus, demonstrating the sociolinguistic approach inalienable role in speech performance.

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Pieces of me: A story of trauma and dissociation

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Introduction Traumatic event related disorders (ASD, PTSD and dissociative disorders) could share a common dissociative psychobiological origin. Patients diagnosed with dissociative identity disorder present a high sexual abuse rate (85–90%), way above the rest of the traumatic spectrum disorders.

Objectives The goal of this study is to analyse the existing relation between different types of trauma, especially sexual abuse, and the onset and continuity of dissociative disorders.

Materials and methods We report the case of a 37 years old woman with a long sexual abuse history. The symptoms appear by age 30, in the form of flashbacks, ushering a persistent identity fragmentation in individual differentiated opposed components, shaping a dissociative personality disorder, which was present for years taking a fluctuating and invalidating nature.

Discussion When a traumatic event occurs, acute dissociative reactions frequently appear, usually briefly, disappearing spontaneously afterwards. In this case, we can discern the persistence of the dissociative symptoms and the repercussion they had in the patient's functionality.

Conclusion The existence of a correlation between the duration of a chronic traumatic event and the persistence of dissociative symptoms in the evolution of a dissociative personality disorder is possible.

Keywords Dissociation; Trauma; Abuse; PTSD

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EV0982

Prevalence study of mental disorders in Georgian military personnel participating in peace-keeping missions

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Introduction Due to the professional activities acute stress disorder and PTSD are most diffuse disorders among military servants. Number of studies revealed relationships between post-traumatic stress and depression, anxiety or somatic complaints.

Objective Though Georgian military personnel actively take part in the international peacekeeping missions since 2004 and no research was conducted to investigate the prevalence of above-mentioned disorders.

Aims Thus, this study aims to investigate the prevalence of PTSD, depression, anxiety and somatic complaints in the cohort of Georgian military servants.

Method The research participants were 2799 military servicemen who had been deployed on the 6 month long period to the peace-keeping missions and were screened for psychological problems after deployment. All of them were Caucasian males, with average age of 29.3 years. All participants were asked to complete a PTSD Checklist for DSM-5 (PCL-5), as well as a 15-item somatic subscale of the Patient History Questionnaire (PHQ-15), a 9-item depression subscale of the Patient History Questionnaire (PHQ-9), a 7-item anxiety subscale of the Patient History Questionnaire (GAD-7).

Results Prevalence rate of probable PTSD screened by the PCL-5 was 2.7%. Further investigation showed that depressive, anxiety and somatic symptoms among them was 21.6%, 8.7% and 21.7% respectively.

Conclusion Appreciable positive relationship was found ($r=0.65-0.70$; $P<0.001$) between these variables in the deployed military servants. Therefore, it is recommended that military servants should be screened on all above mentioned conditions along with PTSD, in order to see full picture of co-morbid problems.

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Predictors of post-traumatic stress disorder in military personnel deployed to peacekeeping missions

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Background The following study shows that PTSD, depression and anxiety present actual and urgent problem in military field. These disorders appear to be highly co-morbid that results in much more complicated treatment process and outcome. Service members of Georgian armed forces participate in various international peacekeeping operations on the regular basis, though there are no researches conducted so far to provide evidence for mental health problem prevalence in Georgian deployed military personnel.

Method Collection of the data took place during the period of 2014–2015 years after six months of service members returning from the international peacekeeping mission back to their homes. The sample for this research were represented by 2799 servicemen who actively engaged in ISAF peacekeeping missions. All of them were male, with average age: $M=29.3$ ($SD=6.3$). The data for the following research were collected using self-administered assessment measures, namely PCL-5 for PTSD screening and PHQ for depression and Anxiety and somatic complaints assessment.

Results PTSD appeared to be significantly predicted by range/level of anxiety and depression symptom urgency, nevertheless after joint/combine integration of these variables in one regression equation, just symptoms of depression remained as statistically reliable explanatory factor for the significant percentage of the somatic symptom range variation.

Conclusion It would be wise to recommend mental health care specialists particularly to bear in mind the possibility of co-existing depression and anxiety symptoms in patients with PTSD.

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EV0984

Religious beliefs and post-traumatic growth following stillbirth in a sample Moroccan women

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Introduction While research on religious beliefs as an adjustment is on the rise, less is known regarding such process following stillbirth and no study has been conducted on a sample of Moroccan women.

Objectives The aim of the present study is to extend the current literature by:

– identifying a typology of Moroccan women who experienced stillbirth based on several dimension of religious coping strategies;

– examining whether these profile differ on grief, anxiety, post-traumatic stress disorder (PTSD) and posttraumatic growth (PTG) symptoms.

Methods One hundred Moroccan women who experienced stillbirth were recruited through a Moroccan public hospital. At 6 weeks following stillbirth, they completed questionnaires assessing Religious Coping Strategies (RCS), PTSD, PTG, anxious and grief symptoms.

Results Five clusters were identified: one with high level of plead and religious avoidance coping strategies, one with high level of interpersonal coping strategies, one with multiple religious coping strategies, one with discontent religious coping strategies and one with low religious coping strategies. High levels of psychological symptoms were found in the 5 cluster and PTG symptomatology was as associated with increased RCS.

Conclusion Our findings suggest that, while religious beliefs and practices as a coping strategy do not protect from short-term psychopathological symptoms in the immediate aftermath of stillbirth, they play an important role in the development of positive reactions. As PTG symptoms have been reported be a protective factor for long term psychiatric symptomatology further longitudinal studies focusing in this area is warranted.

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Post-traumatic mania symptoms: About one case

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Introduction Psychotraumatism can constitute for some people a real existential fracture, a real upheaval of the psychic organization. Immediate psychological reactions can vary from one-off and temporary reactions to far more severe and sometimes enduring reactions.

Material and methods We collected the case of a patient who was hospitalised in April 2015 for manic symptoms in the immediate aftermath of a terrorist attack, with a review of the literature.

Clinical case This is Mr. A. F., aged 38, with a personal history of AVP and a shooting wound following a terrorist attack. He had presented a psychomotor instability and an exaltation of the mood in the immediate aftermath of an ambush.

Behavioural problems were identified by the psychiatric team during the group debriefing conducted at the HMPIT emergency room. During his hospitalisation, a chemotherapy based on thymoregulators, neuroleptics and anxiolytics was introduced.

The evolution was marked by a significant regression of the manic syndrome after ten days, and the installation of a post-traumatic stress condition (PTSD). At the end of eight months, the patient was able to resume his work with long-term thymoregulatory treatment, a ban on weapons and safety posts.

Conclusion Manic episodes are rarely observed as an immediate post-traumatic reaction. Their occurrence does not prevent the subsequent installation of PTSD. Has psychic trauma revealed a latent psychosis? Is it a trauma-induced mood disorder?