

The judiciary enquiring *suomotu* into deaths following an oncology trial in central India opened a can of worms. Searching investigation suggested that informed consent was only a cosmetic exercise and the victim was usually illiterate, poor and for a monetary reward and without being informed of the consequences of the intervention, subjected to a drug trial. Further, the process of informed consent was dispensed with and “patient” was asked to sign at the bottom of the document, no questions asked. The ‘patient’ in these trials usually is from the urban poor or deeply patriarchal, poorly literate rural hinterland. This led to a media outcry, a witch-hunt, indictments, penal action and the regulatory body now insisting on a video filmed informed consent. The wheel has truly turned full circle. The regulators while seeking idealistic regulation seem to live in a utopian world. The patriarchal and illiterate populace of rural India is far removed from the rarefied world of videotaped informed consent and presents an ethically quixotic situation.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.974>

EV0645

When it's the time to switch the therapeutic approach on electroconvulsive therapy for residual positive symptoms in schizophrenia?

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Introduction Schizophrenia is clearly one of the most debilitating diseases. Luckily, in the past 20 years, there has been a wide and good change in symptomatology due to the new atypical antipsychotics. Still, there are patients who are treatment resistant after different adjustments like switching or adding antipsychotics. Most of the clinicians consider Clozapine the “last resort”. But what if it doesn't work so well on some patients?

Objective To determine the point when it's time to try electroconvulsive therapy in schizophrenia treatment-resistant patients or remain on conventional approach.

Aims The aim of this work is to determine whether it's better for those patients who have residual positive symptoms to use oral/depot antipsychotics or to switch on electroconvulsive therapy.

Methods This work presents the case of the patient C.D., 35 years, diagnosed with paranoid schizophrenia since 2008. Risperidone, Olanzapine, Aripiprazole were introduced during time, with some improvement on the positive symptomatology, but the patient developed several side-effects. At his last admission in our hospital, he came after a suicidal attempt caused by high anxiety and depression due to his false beliefs. Clozapine was introduced, but after one month of treatment, the patient still had the belief that his neighbours want to harm him somehow.

Results The patient and his mother definitively refused electroconvulsive therapy because of their personal beliefs. He affirmed that he can live with this “low-dose” of suspiciousness which, unfortunately, had a negative impact on his social life.

Conclusions We still recommend electroconvulsive therapy in these situations, even though, there are many misconceptions regarding this approach.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.975>

EV0646

The effects of personality traits of university students in their romantic relationships

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Introduction Most people will have romantic relationship in different periods of their life and sometimes this relationship can contain abuse. The abuse which is perceived in romantic relationships can be an important problem for university students.

Objective This study was conducted to determine the effects of personality traits of university students in the abuse which is perceived in their romantic relationships.

Methods The study was descriptive and analytical. The students of Marmara University Faculties of Law, Pharmacy, Nursing and Midwifery, Cinema and Television department comprised the sample. The measuring instruments consisted of a personal information form, the Basic Personality Traits Instrument (BPTI) and Romantic Relationship Assessment Inventory (RRAI). The data were analyzed with the SPSS 11.5 programme, using the “Mann–Whitney U Test”, “Kruskal–Wallis Test”, “Spearman's Correlation Test”.

Results RRAI mean score was 102.41 ± 33.79 ; subscale of BPTI's mean scores were; extraversion 28.60 ± 5.97 ; conscientiousness 28.30 ± 5.91 ; agreeableness 33.73 ± 4.29 ; neuroticism 26.09 ± 6.48 ; openness to experience 21.91 ± 3.83 ; negative valence 9.82 ± 3.36 . There was a low level negative significant relation was obtained between subscale of conscientiousness ($r = -0.196, P = 0.000$), agreeableness ($r = -0.168, P = 0.000$), a low level positive significant relation was found between subdimensions of neuroticism ($r = 0.168, P = 0.000$), negative valence ($r = 0.255, P = 0.000$) and abuse.

Conclusion In conclusion, there is a relation between personality traits and perceived abuse. Therefore, education programmes should be prepared about abusive behaviour and its risk factors and consequences.

Keywords Personality traits; Romantic relationships; Abuse of romantic relationships; Dating violence; Partner abuse

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.976>

EV0647

Community based mental health care in Bosnia and Herzegovina – an overview of the last six years

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Introduction Mental health care in Bosnia and Herzegovina (BH) is changing and shows the new trends more than 20 years. In last 6 years is established strong network of community mental health centers (CMHC) as a most important service in the prevention, treatment and rehabilitation of mental illnesses.

Objectives Project of mental health in BH (PMH) is the largest reform project, supported by the Swiss Government and it is planned to be implemented in whole BH emphasizing importance of community mental health care and putting patients in the focus of the reform.

Aims and method To show positive trends and practices in BH as well as obstacles in some fields of the reform.

Results For the last six years are made positive national mental health policies, established case management model in work with people with severe mental disorders, broad spectrum of services recognized by health insurance (validation of the work for all team members), user initiatives (organization), active role of primary mental health care, reduction of hospitalization, etc. On the other way, yet are not established protected housing, early interventions services and universal methodology or team structure in all CMHC.

Conclusions Community based mental health care shown as a good choice in the reform of the mental health in BH, confirming positive results from other countries. That is a reason to continue with improvements based on daily practices of the teams in CMHC.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.977>

EV0648

Access to mental health services among internally displaced persons in Ukraine: Results from a nationwide survey

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Background There are an estimated 1.4 million internally displaced persons (IDPs) in Ukraine as a result of the armed conflict in Ukraine.

Objectives (i) Measure the burden of key mental disorders (PTSD, depression and anxiety); (ii) examine rates of utilization of health and psychosocial support services; (iii) examine the patterns of utilisation of services.

Methods The study used a cross-sectional survey design and was conducted throughout Ukraine between March and May 2016 with 2203 IDPs aged 18 years and over. Time-location sampling was chosen as a probabilistic sampling method. Outcome measures were the PCL-5 for PTSD, the PHQ-9 for depression and the GAD-7 for anxiety. Descriptive and multivariate regression analyses were used.

Results Of the 2203 respondents, 703 reported experiencing a mental health or emotional problem over the previous 12 months and were also screened positive with PTSD, depression or anxiety. Of these 703, 180 had sought care (with sources of care to be given in the presentation). Therefore, 523 respondents did not seek care, equating to an overall treatment gap of 74%, (74% for PTSD, 71% for depression and 70% for anxiety). Key reasons for not utilising treatment included preferring to use their own medications ($n = 176$); unaffordability of health services ($n = 118$) or medications ($n = 140$); poor understanding by health care providers ($n = 123$); poor quality of services ($n = 78$) and stigma/embarrassment ($n = 41$).

Conclusions The findings support the need for a scaled-up, comprehensive and trauma informed response to provision of the mental health care of IDPs in Ukraine.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.978>

EV0649

Taking care of people suffering from neuropsychiatric illness living at home

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Content background People suffering from neuropsychiatric illness are often in need of caring and nursing over a long period of time. Research shows that patients suffering from such illness do not very often get enough care in practice.

Aim To gain knowledge about nurses experiences from taking care of older people living at home and suffering from chronic and neuropsychiatric illness.

Method Qualitative analysis: fieldwork and qualitative interviews with 11 nurses who worked in four units in two different municipalities in Norway.

Results Challenges in clinical nursing explain the process nurses work in when they take care of people with neuropsychiatric illnesses living at home. This is caring for patients, taking care of family members, managing complex patient situations and the need for coaching and cooperation.

Conclusion To gain a good cooperation with other health personnel to strengthen the competence is important, especially when the goal is caring. Nurses with education in neuropsychiatric care can strengthen the competence maybe and reach a better patient care. The organization of the community health system needs to be studied.

Keywords Home care; Nursing; Elderly; Neuropsychiatric illness

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.979>

EV0650

Linguistic validation of a battery for measurement of affirming attitudes about mental illness

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Introduction Stigma restrains the life opportunities of individuals with serious mental illness. This study aimed at performing a linguistic validation of a battery for measurement of affirming attitudes; a battery that might be used to test the impact of anti-stigma and socially inclusive programs.

Methods Three measures were considered: the Recovery Scale, Empowerment Scale and Self-Determination Scale. Two native Arabic speakers, bilingual in English, independently translated the original measures into Arabic. A collaborative pooled version of the questionnaires was then obtained from the two translations. The pooled version was back-translated into English by a professional translator. A draft Arabic version of the battery was obtained from the comparison between the original questionnaires and the back-translation and was tested on 30 Arabic-speaking medical students. We also discussed the existence of other wording that enables the meaning of statements to be expressed clearly.

Results The test of the different items allowed the detection of three typing errors. It also highlighted mistranslating two terms to one term that does not distinguish between them in term of the meaning: "Goal" and "Purpose". Comments were reported on the wording of certain items in the questionnaire. These comments referred to the problems related to the grammatical and syntactical construction of certain expressions. The translation from English into Tunisian dialect is different from our dialect.