

P03-79

HOW DO EUROPEAN PSYCHIATRY TRAINEES PRESCRIBE WHEN TREATING DEPRESSION, AND WHAT INFLUENCES DECISION-MAKING? (SURVEY OF THE EUROPEAN FEDERATION OF PSYCHIATRIC TRAINEES RESEARCH GROUP)

S. Jauhar¹, S. Guloksuz², J.G. Marques³, A. Nawka⁴, C. Roventa⁵, R. Psaras⁶, O. Andlauer⁷, G. Lydall⁸, N. De Vriendt⁹, L. Mendonca¹⁰, J. Van Zanten¹¹, I. Dumitrescu¹², I. Nwachukwu¹³, F. Riese¹⁴, European Federation of Psychiatric Trainees Research Group

¹Psychiatry, Sackler Institute of Psychobiological Research, Southern General Hospital, Glasgow, UK, ²Psychiatry, Istanbul University Cerrahpasa Medical Faculty, Istanbul, Turkey,

³Psychiatry, Lisbon's Psychiatric Hospitalar Centre, Lisbon, Portugal, ⁴Psychiatry, Prague

Psychiatric Center, Prague, Czech Republic, ⁵Psychiatry, Bucharest University, Bucharest,

Romania, ⁶Psychiatry, Athens University Medical School -Attikon Hospital, Athens, Greece,

⁷Psychiatry, CHU, Besancon, Université de Franche-Comté, Besançon, France, ⁸Psychiatry,

University College London, London, UK, ⁹Universitair Psychiatrisch Centrum K.U.Leuven,

Campus Kortenberg, Korstenburg, Belgium, ¹⁰Lisbon's Psychiatric Hospitalar Centre, Lisbon,

Portugal, ¹¹Vrije Universiteit Amsterdam Dept. of Psychiatry, Amsterdam, Amsterdam, The

Netherlands, ¹²Bucharest University, Bucharest, Romania, ¹³University College Dublin,

Dublin, Ireland, ¹⁴University Psychiatric Hospital, Zurich, Switzerland

Objectives: Despite recent evidence and subsequent guidelines that have suggested factors such as side-effect profile and cost should be taken into account when prescribing antidepressant medication, relatively little evidence exists on decision-making in clinical practice.

Our Pan-European Research Group looked at clinical practice regarding antidepressants amongst Psychiatry trainees, treatments trainees would desire themselves, and factors influencing decision-making.

Methods: A semi-structured survey was constructed from recent literature, was piloted, and a homogenous sample size of at least 50 agreed upon from each country, with 50% the minimum response rate. It was distributed via web-link, questioning preference of antidepressant for patients, and factors influencing choice. Trainees were asked for their preference should they develop a moderate to severe depressive episode, and require medication.

Results: Treatment choices are summarised in Table 1. 79% of trainees would prescribe similar antidepressants for themselves as for patients.

Factors influencing decision-making mapped onto three main domains: cost, efficacy and side-effect profile (5% other reasons). 86% (n=548) of those who responded felt efficacy most important, 38% (n=237) felt side-effect profile most important and 6% (n=33) considered cost of most importance.

Conclusions: Some differences exist in choice of antidepressant for European trainees and their patients, and factors affecting choice conflict with evidence base and guideline suggestions.