

mation gathered by the Ministry of Health, the programme was implemented to a small extent. The number of large psychiatric institutions and the number of in-patient beds were reduced, the numbers of day wards as well as psychiatric wards in the multi-disciplinary hospitals were increased. The training of the staff for the new system began. A serious challenge for the continuation of the reforms being carried out is the provision of the sufficient number of mental health professionals, particularly in the face of economic migration. A short duration of the proposed NPOZP implementation period did not allow for a full application of the new mental health care solutions, however the awareness that its implementation may be at risk led to a public and media discourse which definitely will have an impact on the improvement of the execution of the programme.

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## Migration and Mental health of Immigrants

### EW335

#### Gender and immigrant status differences in the treatment of substance use disorders among US Latinos

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US Latinos have higher rates of substance use disorders (SUDs) than Latinas, but Latinas face substantial barriers to treatment and tend to enter care with higher SUD severity. Immigrant Latinas may face greater barriers to care than native-born despite lower overall SUD prevalence. This study aimed to identify how SUD treatment needs of Latinos are addressed depending on patient gender and immigrant status within an urban healthcare system serving a diverse population.

**Methods** Data from electronic health records of adult Latino/a primary care patients ( $n = 29,887$  person-years) were used to identify rates of SUD treatment in primary and specialty care. Treatment characteristics and receipt of adequate care were compared by gender and immigrant status.

**Results** Tobacco was the most frequently treated substance followed by alcohol and other drugs. Forty-six percent of SUD patients had a comorbid psychiatric condition. Treatment rates ranged from 2.52% (female non-immigrants) to 8.38% (male immigrants). Women had lower treatment rates than men, but male and female immigrants had significantly higher treatment rates than their non-immigrant counterparts. Receipt of minimally adequate outpatient care varied significantly by gender and immigrant status (female non-immigrants 12.5%, immigrants 28.57%; male non-immigrants 13.46%, immigrants 17.09%) in unadjusted and adjusted analyses.

**Discussion** Results indicate overall low prevalence of SUD treatment in the healthcare system. Low rates of minimally adequate care evidence the challenge of delivering integrated behavioral

healthcare for Latinos with SUD. Results also demonstrate gender and immigrant status disparities in an unexpected direction, with immigrant women receiving the highest rates of adequate care.

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

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### EW338

#### Psychiatric evaluation Ezidi Iraqi refugee children who settle in refugee camp in Turkey

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**Objective** We aimed to review the distribution of diagnoses in children and adolescents evaluated by a child psychiatrist, in refugee camps in Diyarbakır, Cizre and Silopi province of Turkey.

**Methods** Sociodemographic data, psychiatric complaints and distribution of psychiatric diagnoses of 38 children and adolescents living in refugee camps in Diyarbakır, Cizre and Silopi were evaluated. Psychiatric diagnoses were made according to DSM-5 criteria but some diagnoses as conversion disorder were also mentioned even though they were not included in DSM-5.

**Results** The sample consisted of 22 female and 16 male children and adolescents. The mean age was  $12.1 \pm 4.5$  and the range was 2–18 years. The mean duration of residency in the camp was  $23.2 \pm 3.9$  days. The most common symptom was sleep problems. The most frequently seen psychiatric disorder was depressive disorder (36.8%) and at least two comorbidities were detected in 50% of children and adolescents. This diagnosis was followed by conversion disorder (28.9%), adjustment disorder (21.8%), acute stress disorder (18.4%), enuresis nocturna (18.4%), post-traumatic stress disorder (10.5%), separation anxiety disorder (10.5%), somatization disorder (7.8%), selective mutism (2.5%) and night terror (2.5%) respectively.

**Conclusion** The study revealed that in refugee children and adolescents, starting from the early days of the migration period, various psychiatric symptoms and disorders might be seen. Therefore, it is essential to integrate psychosocial support units into the aid and support programs for refugees and quite important to observe and treat children in terms of psychiatric disorders, starting from the early days of the migration period.

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

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### EW340

#### Clinical features of neurotic disorders in internally displaced persons

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**Introduction** According to the Guiding Principles on Internal Displacement, internally displaced persons are persons who have been forced or obliged to leave their homes, in particular as a result of extreme situations, and who have not crossed an state border. As of May 21, 2015 UNHCR has information about 1,299,800 IDPs.

**Aim** To study clinical features of neurotic disorders in IDPs.

**Methods** We have a complex psychopathological and psychodiagnostic research 97 IDPs in volunteer center, located at the central train station in Kharkiv.

**Results** In total, 75.9% of IDPs observed have violations of adaptation: long-term depressive reaction ( $F 43.21$ ) and predominant disturbance of other emotions ( $F 43.23$ ). The men reactive alarm indicators (average –  $37.7 \pm 3.0$ ), were higher than trait anxiety (average –  $32.6 \pm 2.9$ ). On the contrary, women figures trait anxiety (average –  $38.6 \pm 2.9$ ) were higher than reactive anxiety (average –  $34.7 \pm 3.0$ ). Severity of depressive symptoms also slightly prevailed in women. The mean score on the Hamilton scale for men was  $17.0 \pm 2.3$  points, women –  $18.0 \pm 2.3$  points. Test results on a scale of quality of life showed no significant differences between men and women. We have developed a medical and psychological support system to correct the neurotic disorders in IDPs.

**Conclusions** The majority of people who left the ATO zone have emotional disorders of different severity and require a further correction in the specialized medical institutions.

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

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## Neuroimaging

### EW342

#### Prefrontal cortical thickness related to negative symptoms in antipsychotic-naive, first-episode psychotic patients

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**Introduction** A significant cortical thinning has been repeatedly observed in adult-onset first-episode schizophrenia patients compared to healthy controls, mostly in medial and inferior prefrontal cortices. However, it is yet unclear whether all these replicated alterations are related to any particular clinical feature.

**Objectives** This study aimed to investigate differences of cortical thickness in a sample of first-episode, drug-naive psychotic patients and age- and gender-matched healthy controls and explore clinical correlates of these parameters regarding negative symptoms.

**Methods** High-resolution T1-weighted images were acquired from 23 antipsychotic-naive, first-episode psychotic patients and 26 age-matched healthy comparison subjects. Clinical features were measured with the negative subscale of the Positive and Negative Syndrome Scale (PANSS) at baseline and after a 2-month follow-up period.

**Results** No differences were found regarding age or gender when comparing patients and controls. We found a significant cortical thinning in the left medial orbitofrontal cortex and in the right lateral orbitofrontal cortex in patients compared to healthy age- and gender-matched controls. Regarding clinical performance, no correlation was found at baseline between left medial orbitofrontal nor right lateral orbitofrontal cortical thickness and scores of the

negative subscale of the PANSS. However, at the 2-month evaluation clinical performances were significantly associated to the left medial orbitofrontal cortical thickness values.

**Conclusions** Cortical thickness alterations in prefrontal cortex appear to be present at disease onset and these alterations may relate to clinical outcome. However, our findings must be considered just as exploratory. Larger longitudinal studies may help characterize, replicate and consolidate these findings.

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

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### EW344

#### Decreased interhemispheric functional coordination underlying the cognitive impairment in late-onset depression

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**Background** The intuitive association between cognitive dysfunction in late onset depression (LOD) and the aberrant functional activity in the brain's default-mode network (DMN) has prompted interest in exploring the role of the DMN in LOD. The altered pattern of resting state voxel-mirrored homotopic connectivity (VMHC) in cognitive processes is not yet well understood in LOD.

**Methods** The study was designed to examine the implicit coupling between the alteration of interhemispheric functional coordination and cognitive impairment in LOD. Thirty-one LOD patients and 37 matched healthy controls (HC) underwent neuropsychological tests and functional magnetic resonance imaging (fMRI) in this study.

**Results** Compared to HC group, attenuated VMHC in superior frontal gyrus, superior temporal gyrus, posterior cerebellar lobe, postcentral and precentral gyrus was observed in LOD. Neuro-behavioral relevancy approach revealed that the imbalanced interhemispheric functional coordination in bilateral cerebellum was positively correlated with the performance of trail making test in LOD ( $r = 0.367$ ,  $P = 0.040$ ).

**Conclusion** Altered linkage pattern of intrinsic homotopic connectivity and cognition was firstly investigated in LOD, and it would provide a novel clue to reveal the neural substrates underlying the cognitive dysfunction in LOD.

**Keywords** Late-onset depression; Voxel-mirrored homotopic connectivity; Functional magnetic resonance imaging; Cognitive function; Cerebellum

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

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### EW347

#### The inattentive and hyperactive brain: Significant links between corpus callosum features and ADHD symptoms in adulthood

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