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Introduction Suicide rates among patients with cancer are higher than ones in the general population.

Objective This meta-analysis aims to estimate the suicide risk in patients with cancer.

Methods We searched Medline, PsycINFO, and the Cochrane library to identify articles published before July 1, 2016, examining the association between suicide [death (SD), attempt (SA), ideation (SI)] and any form of diagnosed cancer.

Results We initially identified 4880 records and after unsuitable studies were removed, our search yielded 102 publications of which 14 were used in the meta-analyses. Patients with cancer had higher risk of SD (seven studies, 247.869 participants; odds ratio [OR]= 1.52, 95% CI= 1.22–1.89, $P=0.0002$) compared with those without cancer (among case-control studies focused on SD versus living controls). Among studies focused on SD versus other deaths, patients with cancer had higher risk of SD (two studies, 23.839 participants; OR= 1.53, 95% CI= 1.03–2.27, $P=0.03$). No difference has been detected for risk of SA (four studies, 8.147.762 participants) and for SI (two studies, 37.879 participants).

Since publication bias was detected, the “trim and fill” method was applied. The majority of the included studies have a high quality at the STROBE statement.

Conclusion The assessment of suicide risk in this population is crucial.

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

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EW0544

Profile socio-demographic and clinical of suicide victims in Brusque County, Santa Catarina, Brazil, between 2012 and 2015

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Introduction Among the main causes of mortality in the world stands out approximately 1 million deaths due to suicide. In Brazil, this is the third cause of death due to external factors, being 5.3 the average rate per 100,000 inhabitants. The state of Santa Catarina ranks second in the national ranking with an index of 8.6. According to WHO, it is necessary to detect probable suicide risk factors once information can prevent deaths.

Aim Identify socio-demographic and clinical profile of suicide victims in Brusque County, State of Santa Catarina, Brazil, between 2012 and 2015.

Methods Observational, descriptive and quantitative study, with analysis of 60 police investigations with suicide records, occurred from January 2012 to December 2015, in Brusque County.

Results The suicide was 15.29 per 100,000 inhabitants. The victims had an average age of 46.51, and ± 2.12 (SD). Among them, 67.5% suffered from depression and 88% received pharmacological treatment. Regarding marital status, 59% were married or living in a stable union. Men accounted for 78% of the sample. Death by hanging occurred in 65% of cases and 22% previous attempts were recorded, and in 15%, it was mentioned suicidal intent. Among the reasons for the act, it was highlighted family member's death. Given the underreporting, such data may be even more significant.

Conclusions The observed rates were significantly higher than the state and national rates. Prevention strategies can be focused on early diagnosis and treatment of depression in middle-aged men, and who had recent loss of a family member.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0545

Victimization in childhood as a suicide risk factor in adults

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Objective Little is known about the predictive association between victimization among children and adolescents with depression and suicidal ideation in adults. The aim of our study was to examine whether victimization in childhood and early adolescence increases the likelihood of self-harming in adults.

Method The sample consisted of 82 patients, 65 females and 17 males, aged 38.02 ± 11.05 years on average, hospitalized in Daily hospital. The juvenile victimization questionnaire (JVQ), defense style questionnaire (DSQ) and Beck depression inventory were applied in 48 patients following suicide attempt and in 34 patients who were on psychotherapeutic treatment due to various life crises not resulting in suicide attempt. According to indication, we excluded patients with psychosis, substances abuse and dementia. The examinees of both groups were matched by age, education, professional and marital status. Comparison of the patient groups was done by *t*-test.

Results The suicide attempters were depressed (Beck depression inventory 19.13 ± 10.20), using immature defense mechanisms ($P < 0.005$). The JVQ established statistically differences in two general areas: Peer and Sibling Victimization ($P < 0.001$) and sexual victimization ($P < 0.05$).

Conclusion Even after controlling for lifetime factors known to increase the risk of suicidal behavior, adults who reported peer and sibling and sexual victimization in childhood were still more likely than other adults to attempt suicide later in life. Psychotherapists must understand that history of childhood victimization is important to put suicide attempt in a psychodynamic context which can help them in their work with patients' psychotherapeutic crisis intervention following suicide attempt.

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EW0546

Decision making under ambiguity and under risk in depressed suicide attempters, depressed non-attempters and healthy controls

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Introduction Study results on decision-making (DM) abilities in suicidal individuals are conflicting. Most studies have focused on DM under ambiguity and included patients with a lifetime history of suicide attempts.

Objective To assess DM abilities with two different instruments in recent suicide attempters.

Methods The study sample consisted of three groups. Group 1 (SA) were currently depressed inpatients having attempted suicide within the previous six months. Group 2 (NSA) consisted of depressed inpatients without a lifetime history of suicide attempts. Group 3 (CG) was a healthy control group. Besides depression severity, impulsiveness and suicidal intent (SA group only) DM was