

EV819

Psychiatry trainees in Turkey considers leaving the countryO. Kilic^{1,*}, E. Sonmez², S. Guloksuz³, M. Pinto da Costa⁴¹ Beykent University, Psychology, Istanbul, Turkey² Marmara University School of Medicine, Psychiatry, Istanbul, Turkey³ Yale University Medical School, Psychiatry, New Haven, CT, USA⁴ Hospital de Magalhaes Lemos, University of Porto, Psychiatry, Porto, Portugal

* Corresponding author.

Introduction The brain drain of mental health professionals is an important issue especially for developing countries with inadequate recruitment rates. The European Federation of Psychiatric Trainees (EFPT) investigated the extent of migration among trainees across Europe by Brain Drain research project. Results from a non-EU country, with the lowest number of mental health professionals per 100 000 population across OECD countries might provide important clues.

Objective To identify attitudes towards and behaviors towards international migration among psychiatry trainees from Turkey.

Method An online survey was conducted among psychiatry trainees from Turkey in 2013, as part of the EFPT Brain Drain Research Project.

Results Of 107 trainees surveyed, 74% considered living abroad. However, the rate of having even short mobility experience was just 13%, and these were mainly educational visits. More than half of those who visited a foreign country reported to have a satisfactory experience, which might explain the positive influence of these visits on attitudes towards migration. Responders perceived academic conditions as the most important aspect of training that needs to be improved, in line with the fact that inadequate training programs were important reasons for migrating.

Conclusion Overall, psychiatry trainees in Turkey tend to remain in their country of origin, which may protect healthcare system against the detriment of workforce loss. The relatively low rate of migration may also reflect the legislative barriers (e.g. being a non-EU country) impeding migrating. Our findings also suggest that the unmet educational needs of trainees require immediate attention.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1804>

EV820

The onset of psychotic disorders and the immigration status – A look into a growing realityL. Maia^{1,*}, I. Carvalho², D. Silva², L. Carneiro²¹ Vila Nova de Gaia, Portugal² Hospital Center of Vila Nova de Gaia e Espinho, Mental Health Service, Vila Nova de Gaia, Portugal

* Corresponding author.

Introduction Recent studies point for an increased incidence of psychotic disorders among immigrants when compared to non-immigrant population, with a substantial risk variation being observed among different ethnic minority groups and diverse host countries/societies.

Objective This communication explores the relation between immigration and the onset of psychosis disease, namely the individual and socio-environmental factors implicated in this association.

Aims Accessing the implications of immigration in the establishment of psychotic disorders.

Methods The authors conducted a literary search on Medline and PsychInfo databases regarding the subject immigration and psychotic disorders, elaborating a bibliographic review of the topic.

Results A greater incidence of psychotic disorders in immigrants (in comparison to non-immigrant population) has been established. In actuality a range of studies carried out in different socio-demographic contexts and with different ethnic groups (of immigrants) identify ethnicity, neighbourhood characteristics (namely level ethnic density), discrimination and refugee status, as some of the probable factors that modulate the rate of psychotic disorder and influence its incidence in immigrants.

Conclusions With regard to the relationship between immigration and the development of psychosis, much is still to be understood. Future studies with focuses on different individual, social, cultural and demographic aspects need to be developed in order to better understand and addressed this phenomenon.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1805>

EV821

Peculiarities of depressive disorders in emigrants and re-emigrantsN.O. Maruta^{*}, O.P. Venger, T.V. Panko, I.O. Yavdak

Institute of Neurology, Psychiatry, and Narcology of the NAMS of Ukraine, Department of Neuroses and Borderline Conditions, Kharkov, Ukraine

* Corresponding author.

Introduction Emigration and remigration are one of the greatest modern problems and considered as a factor provoking manifestation and exacerbation of mental disorders as well as pathocharacterological personality changes. In emigrants and re-emigrants peculiarities of course of depressive disorders with different genesis are not investigated, that impedes a development of adequate therapeutic methods.

Aim To study clinical-psychopathological peculiarities of depressive disorders in emigrants and re-emigrants patients with psychogenic (F43.21, F43.22) (69 non-emigrants, 68 emigrants, 67 re-emigrants), endogenous (F31.3, F31.4, F32.1, F32.2, F33.1, F33.2) (65, 66 and 63 patients, respectively) and organic depressive disorders (F06.3) (64, 62 and 61 patients, respectively) were examined.

Methods A clinical-psychopathological investigation, Standardized Personality Examination Method, Lusher's Method of Color Choices, HDRS, HARS, MADRS, and SCL-90-R.

Results The highest level of severity of depressive disorders in re-emigrants and the lowest level in non-emigrants were registered. Re-emigrants had predominantly depressive, asthenic-depressive and apathic-depressive forms, whereas emigrants had mainly anxious-depressive ones. According to SCL-90-R data, emigrants had higher indexes of somatization, obsessive-compulsive disorders, anxiety, whereas re-emigrants had higher indexes of depression and interpersonal sensitivity as well as an index of distress expression. In patients examined it was determined a predomination of dysthymic personality traits manifested in the frameworks of the leading depressive of anxious-depressive syndromes. An influence of emigration and remigration factors was the greatest in psychogenic depressions and the lowest in organic depressive disorders.

Conclusions The abovementioned regularities should be taken into account in pharmacotherapy and a social-psychological support for such patients.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1806>