ISSN 0924-9338

March 2018
Vol. 48 – pp. S1–S766

EUROPEAN PSYCHIATRY

THE JOURNAL OF THE EUROPEAN PSYCHIATRIC ASSOCIATION

Abstracts of the 26th European Congress of Psychiatry - 2018

ELSEVIER

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THE JOURNAL OF THE EUROPEAN PSYCHIATRIC ASSOCIATION

European Psychiatry (ISSN 0924-9338) 2018 (volumes 47–54) One year, 8 issues. See complete rates at http://www.europsy-journal.com
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Subscriptions begin 4 weeks after receipt of payment and start with the first issue of the calendar year. Back issues and volumes are available from the publisher. Claims for missing issues should be made within 6 months of publication. Includes air delivery.
Subscriptions – Tel.: (33) 01 71 16 55 99. Fax: (33) 01 71 16 55 77. http://www.europsy-journal.com
Publisher – Agnieszka Freda. Tel.: 0031612252117. E-mail: a.freda@elsevier.com
Journal Manager – Kheira Jolivet. Tel.: 33 (0) 1 71 16 50 21. E-mail: EURPSY@elsevier.com
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Dépôt légal à parution

Simplified joint stock company with sole shareholder, with a capital of 47 275 384 €. - Registered office: 65, rue Camille-Desmoulins, 92130 Issy-les-Moulineaux. - RCS Nanterre 542 037 031

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ELSEVIER

Vol. 48, Supplement March 2018

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Contents lists available at ScienceDirect

European Psychiatry

journal homepage: http://www.europsy-journal.com

26th European Congress of Psychiatry

Ask the Experts

Ask the Experts I

ATE0001

Person-centered psychiatry

G. Stanghellini
University "G. d'Annunzio" – Chieti Italy and University "D. Portales" – Santiago Chile, Department of Psychological– Humanistic and Territorial Sciences, Chieti, Italy

Most of our current, supposedly humanitarian or dialogic therapeutic practices are based on the ideal of establishing some form of consensus between patients and carers. Yet consensus is a woolly kind of dialogic value. While it looks for agreement and harmony, it implicitly holds that some values are better than others and builds on the metaphysical belief that conflict of values is just a stage on the way to sharing universal values. In this vein, conflicts of values are signs of imperfection, rather a constitutive part of human life. This unrealistic idea promotes pseudo-dialogic practices that downplay the person's subjectivity and surreptitiously endorse one-sided values. Examples of this are social rehabilitation (which endorses prevailing social values), or potentially intolerant techniques to enhance compliance (which endorse the distinction illness/health based on the clinician's values)–both taking for granted that "good" values are on the side of the clinician. Coexistence with mental sufferers and with the values each of them embodies is better practice. This practice is produced in dialogue, which is contact across a distance. It aims to acknowledge, understand, and respect different ways of life, enlighten our ethical conflicts, honor conflicting values–and ultimately negotiate reciprocal recognition.

Person-centered practice is much more than assessing operationalized symptoms and eliminating them, or reducing their intensity through some kind of therapeutic technique. Rather, it is *a quest for meaning and reciprocal recognition*. It seeks for meaning, order, and value within and throughout ordinary experience and the patient's everyday life. It is a meeting of forms of life–the patient's and the clinician's–each with its system of relevance and meaning structure, stemming from different and sometimes conflicting values. It is the occasion to initiate a shared project of reciprocal understanding between the vulnerable person and the mental health carer.

Disclosure of interest.– The author declares that he has no competing interest.

Further reading

G. Stanghellini, M. Mancini (2017) The therapeutic interview in mental health. Cambridge University Press.

ATE0002

Why eating disorders being in adolescence

J. Treasure
Institute of Psychiatry, Eating Disorders, London, United Kingdom

Over 30 years ago it was found that involving the family reduced relapse following inpatient treatment in adolescents with a short duration of illness (less than 3 years). This has been replicated, and has since been used as a standalone treatment, with various family permutations (separated parent/individual, multifamily therapy). The treatment is cost effective. For example the length of inpatient stay can be reduced if family therapy is added. Furthermore elements of the intervention have been delivered in self-help forms, sharing skills and information for carers. However 20-30% of cases fail to respond. In particular those who have been ill for over 3 years do not benefit. Non responders may be identified early in the course of treatment. Therefore work to develop new interventions to manage this group of patients is in progress.

Both family therapy and guided CBT are of benefit for binge eating disorder and bulimia nervosa but the evidence base is smaller. In this lecture I will review past evidence and consider new approaches.

Disclosure of interest.– The author declares that he has no competing interest.

https://doi.org/10.1016/j.eurpsy.2017.12.010
0924-9338/

Introduction.– Drug use has become a concern that affects society worldwide, posing an important threat to health, well-being and social development.
Objective.– To describe and analyze patterns of consumption of drug use and abuse among first and fifth year undergraduate nursing students and to investigate their attitudes and beliefs regarding drugs and users.
Method.– A quantitative, descriptive and analytical cross-sectional study with 160 students from the Universidade Federal do Estado do Rio de Janeiro, who answered the instruments: ASSIST and NEADA FACULTY SURVEY. Statistical analyzes were performed with a significance level of $P < 0,05$.
Results.– Alcohol was the most prevalent drug in the last three months, in the first and fifth years, respectively (69,4% and 80,0%). Students believe they have adequate basic education about drugs, however, they present a prejudiced view and negative attitudes toward users.
Conclusion.– The pattern of drug use among students and the lack of preparation to care users reinforce the need to review and reformulate contents and practices on the subject.
Disclosure of interest.– The authors have not supplied their declaration of competing interest.

EV0883

Problem video game playing scale portuguese version

H. Espírito Santo[1,2], J. Tomázio[3], I. Massano Cardoso[3*], F. Daniel[1,4]
[1] *Miguel Torga Institute, Departamento de Investigação & Desenvolvimento, Coimbra, Portugal;* [2] *Universidade Coimbra, Centro de Investigação do Núcleo de Estudos e Intervenção Cognitivo-Comportamental, Coimbra, Portugal;* [3] *Instituto Superior Miguel Torga, Departamento de Investigação & Desenvolvimento, Coimbra, Portugal;* [4] *Universidade Coimbra, ceisuc, Coimbra, Portugal*
* Corresponding author.

Background.– DSM-5 proposed Internet Gaming Disorder as a condition for future research. Given the existence of one available assessment instrument - the Problem Video Game Playing scale (PVP) - it is relevant and timely to verify its psychometric properties in Portuguese adults.
Objectives.– To reexamine the psychometric properties of PVP in Portuguese adult gamers.
Method.– One hundred and eleven adult gamers completed an online evaluation comprising PVP, type and number of games played, and presence of other dependencies, namely substance abuse.
Results.– Removing two of the items, PVP reliability values were similar to previous studies (Cronbach's alpha = .66). A one-factor structure analysis was confirmed through a principal components analysis (KMO = .73; Bartlett's Test of Sphericity: P < .001) explaining 33.6%, of the variance. Statistically significant associations between the PVP and other measures supported the construct validity.
Conclusions.– Results confirm that problematic video gaming can be measured reliably and validly through the Portuguese version of PVP. It is proposed to test PVP using a wider national sample and to analyze it with clinical samples to determine a cutoff value.
Disclosure of interest.– The authors have not supplied their declaration of competing interest.

EV0884

Women addictions in montenegro

N. Matkovic*, M. Roganovic, B. Cizmovic, R. Perisic, M. Vukotic
Special Psychiatric Hospital, Special Psychiatric Hospital, Kotor, Montenegro
* Corresponding author.

Researches in Europe have shown that in whole population there are 3 to 5% women addicted to alcohol, while the number of women addicted to drugs is higher, rising up to 20%.
In Special hospital for psychiatry in Dobrota, Kotor, from 2012 to 2017, 56 female patients were treated for psychoactive substances addiction. 42 of them were female drug addicts (90% heroin addicts), and 14 were alcohol addicts. Addictions in females are a socio-medical problem, which constantly increases in our environment.
Woman's organism is less tolerant to alcohol and psychoactive substances because of monthly hormonal changes and less water quantities, and this that leads to faster physical decay and developing liver diseases. There is also fetal alcohol syndrome, which occurs in children whose mothers consumed alcohol while pregnant. Heroin can slow down the growth of the baby, as well as development of baby's brain. Also, this can cause problems with breathing after baby's birth. One of the most serious problems is that using heroin causes in babies are symptoms of addiction, so these babies need to be monitored after birth and receive special care in hospitals. Disorders of heart rhythm are often, high blood pressure, and damages on body.
Conclusion.– The number of addicts in women in Montenegro constantly increases and consequences are immense. Not just for the addicts and their families, but for the society as well. Since there is no department for treating women as an addict in Montenegro, this results in special problem that needs to be resolved.
Disclosure of interest.– The authors have not supplied their declaration of competing interest.

EV0885

The role of pharmacotherapy on smoking cessation

S.F. Nascimento[1*], M. Bernardo[2], S. Viveiros[3], A. Alves[3], J. Pereira[3], E. Freire[3], A. Lopes[3], I. Carvalho[3]
[1] *Department of Psychiatry and Mental Health, University Hospital Center of Algarve, Vila Nova de Gaia, Portugal;* [2] *Department of Psychiatry and Mental Health, Hospital Garcia Orta, Almada, Portugal;* [3] *Department of Psychiatry and Mental Health, Hospital Center of Oporto, Oporto, Portugal*
* Corresponding author.

Introduction.– There are currently several effective pharmacological options that are approved to help with smoking cessation. However, many patients are reluctant to use drugs to quit smoking, relying on their motivation and being open only to a psychotherapeutic approach.
Objectives.– To access the efficacy of the pharmacological approach and compare the impact of different medications on smoking cessation.
Methods.– A retrospective analysis was conducted using data from the patients that attended smoking cessation consults provided by the liaison psychiatry service of a central hospital, between 2006 and 2016. The data concerned demographic parameters, smoking habits as well as the results from the Richmond Motivation Test. Data concerning medications and their results was also collected.
Results.– Of the 1248 patients evaluated, 330 (25,9%) were medicated, 71 were on polypharmacy, ranging from two to four different types of drugs. However, we did not find a statistical signifi-

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Editors in Chief: ***Andrea Fiorillo, Sophia Frangou, Reinhard Heun***

Indexation: *BIOSIS/Biological Abstracts, Current Contents/ Clinical Medicine and Social and Behavioral Sciences, Science Citation Index, Embase/Excerpta Medica, Medline/Index Medicus, Pascal/INIST-CNRS, Psychological Abstracts, PsycINFO, PsycLIT, Research Alert, SciSearch, Scopus.*

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