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Introduction Auditory hallucinations are perceptual experiences that occur in schizophrenia, schizoaffective disorder and bipolar disorder with psychotic features. Characteristic of these hallucinations may have relation with cultural factors.

Aim We have done this study to understand more about content and characteristic of auditory hallucinations in Schizophrenia, schizoaffective and bipolar disorder with psychotic features in Qazvin, a state in north-center of Iran.

Methods We used the questionnaire that prof. Romme and Escher developed in 1987 for research purposes. Sixty patients diagnosed with schizophrenia, schizoaffective and bipolar disorder with psychotic features that admitted or attended at clinic of Qazvin medical science university hospital, psychiatry ward, were interviewed.

Results The 45 men and 15 women in three groups were interviewed. The most were men, single, and in fourth decade of their life. Most patients mentioned that they heard one voice. Mean age of appearing voices in patients were 19 to 29 years old. Most patients in the schizoaffective and bipolar group heard male voices and in schizophrenia were both sexes. Eighty-five percent of bipolar patients, 65% of patients with schizoaffective disorder heard friendly voices. It was 30% in patients with schizophrenia. Fifteen percent of bipolar patients, 75% of schizophrenia and 45% of schizoaffective stated that voice was hostile.

Conclusion Our study has revealed that culture affected content and characteristic of auditory hallucinations. We suggested that some complementary studies will be done in future from different Iranian cultures not just people of Qazvin.

Keywords Auditory hallucination; Schizophrenia;

Schizophrenia; Bipolar disorder; Cultural factors

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Depression

EV473

A study of mood status in children with type I diabetes mellitus: Relationship with parental stress and metabolic control

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Introduction It has been widely recognized that DM can result in psychological, social and physical problems. Parents of children with DM are likely to be highly distressed.

Objective The study of the relationship between mood status of children with type I DM and some factors that might be implicated in its determination.

Aims To evaluate the presence and degree of depression in a sample of children with type I diabetes and how much it might be affected by their metabolic control and the level of their parents' stress.

Methods Ninety-three children were diagnosed with DM type I. They were clinically interviewed and examined. They went through Childhood Depression Rating Scale (CDI), Family Attitudes Questionnaire and HbA1c% assessment. An age and sex matched control group was taken.

Results The age range of diabetic children was 7–18 and two thirds of them were females. Thirty-five patients (37.6%) were

depressed according to CDI results. Diabetic children had significantly higher CDI total score and total parenting stress index (PSI) compared to the control group. CDI total score was positively and significantly correlated with indicators of poor diabetes control (frequency of DKA and HbA1c%) and with duration of diabetic illness. CDI total score was also positively and significantly correlated with PSI score.

Conclusions Depression was highly present in this sample of diabetic children. The degree of their mood impairment was positively correlated with duration of diabetic illness, indicators of poor metabolic control of DM and to the level of their parents' stress.

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Recent and childhood adversities in patients with depressive disorders

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Introduction A strong association is believed to exist between stressful life events and the development of depressive disorders. Childhood adverse experiences contribute to person's vulnerability to such disorders.

Objective The study of the complex interplay between child abuse, stressful life events and the development of depression.

Aims To study the effect of type and severity of child abuse and magnitude of pre-onset stress on the severity and duration of adulthood depression.

Methods Seventy-five patients with depressive disorders not having a comorbid mental illness were studied using Social Readjustment Rating scale (SRRS) and Childhood Trauma Questionnaire (CTQ).

Results The mean age of the patients was 34.96 ± 12.32 years, 69.3% of patients were females, duration of the illness ranged from 2–288 weeks with a mean of 30.94 ± 54.61 and 36% of the sample had severe depression. There was a statistically significant relationship between urban residence and magnitude of stress ($P = 0.049$), married patients suffered less severe depression than unmarried ones ($P = 0.02$) and a positive and significant correlation was found between magnitude of stress and severity of depression ($P \leq 0.001$). Duration of depressive illness was positively and significantly correlated to the raw score of SRRS and to the severity of emotional neglect as measured by CTQ ($P = 0.02$ and 0.04 respectively).

Conclusions The development of depression in adulthood is significantly associated with past exposure to child abuse and stressful life events. Childhood history of emotional neglect and magnitude of pre-onset stress may be contributing factors to duration of depressive illness.

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

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Longitudinal effect of depression on glycemic control in patients with type 2 diabetes: A 3-years prospective study

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