

Methods The activities developed are: administrative actions; institutional strengthening for social inclusion initiative through work; and the Carnival Block organization.

Results This study work on constituting a social inclusion initiative through workshop that generate employment, e.g.: sale material production, financial management, material replacement. Although we do all the preparative to the Carnival Block–“Loucura Suburbana”.

Conclusion The relationship with the psychiatric patients shows that social inclusion through carnival workshop practice is the primary means for the identity of people suffering from mental disorders and contribute to reduce community social stigma.

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

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EW0369

Differences in baseline demographics, presentation, pathways to care and duration of untreated psychosis (DUP) in the ethnically diverse population of Lancashire, UK

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Introduction DUP is the time from the emergence of first psychotic symptom to the commencement of adequate antipsychotic treatment. Psychopathological and sociocultural factors influence patient's treatment seeking behavior. Better understanding of DUP could help in development of improved therapeutic strategies and public health initiatives. Emphasis on early detection of psychosis and reduction of DUP has led to a huge interest in pathways to care. **Objectives** To understand the differences in baseline demographics, presentation, care-pathways and DUP in ethnically diverse population of Lancashire, UK.

Methods Our cross-sectional study involved a subset analysis of National EDEN data for Blackburn and Preston in Lancashire.

Results Of the 183 patients, 78% were Whites and rest belonged to BME population. Median DUP was 188 days. Whites were significantly younger at onset of both non-specific symptoms and psychosis and at acceptance into EIS. Whites were significantly less likely than non-whites to be married, more likely to be in paid work and to have used illicit drugs. There were no significant differences with respect to other demographics/delays in help seeking or DUP. Non-White group had shorter DUP of 95 days (but not statistically significant, $P=0.060$).

Conclusions Better understanding of mental illness and local services in White patients could have led to early help seeking. Having a supportive family may have promoted early help seeking and thus shorter DUP in BME group. Further studies are needed exploring socioenvironmental variables, substance misuse and knowledge of local psychiatric services amongst the BME population and the influence of these variables on DUP.

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e-poster walk: Consultation liaison psychiatry and psychosomatics–Part 1

EW0370

Somatoform symptoms' influence on the rubber hand illusion: Additional analysis

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Introduction In the rubber hand illusion (RHI) [1], sense of body ownership is changed by synchronous touches to the hidden participant's hand and a visible rubber hand. It was previously shown [2] that medically unexplained symptoms were associated with the weaker RHI ($n=40$).

Objectives We used data from our previous research [3] and supplementary questionnaires to test the hypothesis that somatoform symptoms would be associated with the decreased response to RHI. **Methods** Subjects ($n=78$) voluntarily undergo the following procedures: RHI experiment with measurement of proprioceptive drift and self-reports, Screening for Somatoform Disorders (SOMS-2) and Symptom Check List-90-Revised (the “somatization scale”).

Results Robust regression was used to evaluate predictors influence: Drift/Self-reports~SOMS-2 + somatization. SOMS-2 was a significant predictor for proprioceptive drift with positive coefficient ($P<0.05$, adjusted), both predictors were insignificant for self-reports.

Conclusions Thus, the results of [2] were not reproduced. We demonstrated on the larger sample, that the higher somatoform symptoms (scores of SOMS-2) predicted the stronger RHI. Since our research and [2] had been conducted on non-clinical groups, it is necessary to conduct the critical experiment on the clinical population.

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References

- [1] Botvinick M, Cohen J. Rubber hands «feel» touch that eyes see. *Nature* 1998;391(6669).
- [2] Miles E, Poliakoff E, Brown RJ. Medically unexplained symptom reports are associated with a decreased response to the rubber hand illusion. *Journal of Psychosomatic Research* 2011;71(4).
- [3] Perepelkina OS. Rubber hand illusion psychosomatic pathology. IMRF2016 Abstract Book 2016.

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EW0371

Psychiatric symptomatology and health-related quality of life in children with epilepsy

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Introduction There is a limited amount of data regarding the relationship between epilepsy and psychiatric symptoms and quality of life (QoL) in children and adolescents.

Objectives The aim of this study was to determine the levels of depression, anxiety and attention-deficit hyperactivity disorder symptoms and health-related quality of life (HRQL) in children and adolescents with epilepsy.

Methods The sample consisted of 75 children with epilepsy and 50 healthy controls aged 8–18 years. Questionnaires were used to evaluate the psychiatric status and HRQL of the patients.

Results Patients had lower child-rated psychosocial and total area HRQL scores, and lower parent-rated psychosocial, physical and total area HRQL scores than the controls did. Inattention scores of the epilepsy group were significantly higher compared to controls. No significant differences were found between patients and controls in terms of anxiety and depression scores. Regarding determinants of HRQL, severity of depression and anxiety had a decreasing effect on child-rated HRQL total scores; and severity of anxiety had a decreasing effect on parent-rated HRQL total scores.

Conclusions Epilepsy is associated with poor QoL in childhood and severity of depression and anxiety are among the determinants of QoL. Clinicians should be more aware of accompanying psychiatric symptoms in epileptic patients and take the necessary precautions in the early period of the illness in an effort to improve QoL.

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EW0372

The new great imitator – neuropsychiatric symptoms of Lyme disease

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Introduction Lyme disease, caused by the spirochete *Borrelia burgdorferi* as recognized as a possible cause of multisystemic signals and symptoms, including symptomatology of the central as well as the peripheral nervous system.

Objectives Identification of neuropsychiatric symptoms associated with Lyme disease.

Methods Literature review in the light of researched articles published in Pubmed/Medline as well as related bibliography.

Results Since the identification of the etiology of syphilis in the early twentieth century, mental health professionals consider the fact that serious psychiatric symptoms can be caused by infections of the central nervous system and that early antibiotic treatment can prevent permanent neurological/psychiatric damage. Syphilis was known as “the great imitator” because its multiple manifestations mimic other known diseases. In recent years, a new epidemic, also with multiple manifestations emerged—Lyme disease, also known as the “new great imitator”. Like syphilis, Lyme disease may be associated with neuropsychiatric symptoms, which means that often these cases are initially referred for psychiatric services, before another diagnosis is made. The incorrect assessment of these patients as individuals with functional psychiatric disease can result in a delay in the start of antibiotic treatment and may cause serious neurological and psychiatric damage.

Conclusions According to the review, the authors propose that in the evaluation of acute psychiatric disease or atypical chronic disease, with poor therapeutic response, Lyme disease should be considered and ruled out, especially if there is epidemiological context and absence of psychiatric family antecedents.

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EW0373

Attention, vigilance and visuospatial functioning in hospitalised elderly medical inpatients – relationship to delirium syndromal status and motor subtype profile

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Objective The early and efficacious detection of neurocognitive disorders poses a key diagnostic challenge. We examined how bedside cognitive tests perform across the spectrum of delirium and motor subtypes.

Methods The performance on a battery of bedside cognitive tests were compared in elderly medical inpatients with DSM-IV delirium, subsyndromal delirium, and no neuro cognitive disorder and in motor subtypes.

Results One hundred and ninety-eight patients (mean age 79.14 ± 8.26) were assessed with no delirium ($n=43$), subsyndromal delirium ($n=45$), and full syndromal delirium ($n=110$). The ability to meaningfully engage with the tests varied from 59% for vigilance B test to 85% for Spatial Span forward test and was found to be least in the full syndromal delirium group. The no delirium group was distinguished from the delirium groups for all the tests and from the full syndromal delirium group for the vigilance B test and global visuospatial function test. The subsyndromal delirium group differed from the full syndromal delirium group in respect of global visuospatial function test, spatial span backwards and vigilance A tests. Patients with full syndromal delirium were best identified using the interlocking pentagons test and clock drawing test whereas those with subsyndromal delirium were best identified using interlocking pentagons test and months backwards test. Those with subsyndromal delirium were significantly better in their ability to engage than those with full syndromal delirium.

Conclusions Simple bedside tests of attention, vigilance, and visuospatial ability are useful to help to distinguish neurocognitive disorders namely subsyndromal delirium from other presentations.

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EW0374

The effects of bariatric surgery on pharmacokinetics of antidepressants: A systematic review

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Introduction Morbid obesity (BMI ≥ 35) has been associated with mood and anxiety disorders. Regular use of antidepressants is common among patients who are candidate for bariatric surgery. The Roux-en-Y gastric bypass (RYGB) is one of the most common techniques used in bariatric surgery for reducing nutrient absorption. This type of surgery may however result in major changes in drug absorption.