

clinical services across Italy. A part of the sample was also assessed for psychopathology through the use of DASH-II, PDD-MRS and clinically diagnosed in accordance to DSM-IV-TR and DSM-5 criteria.

Results SPAID internal consistency, inter-rater reliability and concordance with DASH-II and PDD-MRS resulted to be good. Around 40% of the sample was assessed to have a cluster of psychopathological symptoms that could be consistent with a psychiatric diagnosis. Autism, impulse control disorder and personality disorder resulted to be the most frequent over threshold scores.

Conclusions The SPAID-G seems to be a valid and cost-effective screening tool for the psychiatric assessment within the Italian population with ID.

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

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0068

Traumatic experiences affect negative emotion processing in bipolar disorder

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Introduction Patients affected by bipolar disorder type I (BD-I) show a significant emotional impairment during both acute and euthymic phases of the illness, but the influence of negative life experiences is not yet fully understood.

Objectives Aim of the present study was to investigate the role of previous traumatic events on negative emotion processing in euthymic BD-I patients.

Methods Eighteen euthymic BD-I patients, 7 reporting past traumatic events (T-BD-I), but free of post-traumatic stress disorder (PTSD) symptoms at the moment of the evaluation and 11 never exposed to traumas (NT-BD-I), were compared to 24 not traumatized controls (NC). All participants performed a IAPS-based emotional task: they were required to identify vegetable items (targets) among neutral or negative pictures. Accuracy (percentage of correct responses) and mean reaction times (RT) were recorded.

Results T-BD-I performed similarly to NC and significantly better than NT-BD-I in terms of accuracy (Fig. 1). No significant between-group effects were observed for mean RT.

Conclusions A previous history of traumatic events, without current PTSD symptoms, may significantly impact the negative emotion processing in euthymic BD-I. Interestingly, traumatized patients showed a better accuracy when processing both neutral and negative images, thus suggesting that paying more attention to external stimuli may be a successful compensatory mechanism to cope with potential environmental threats.

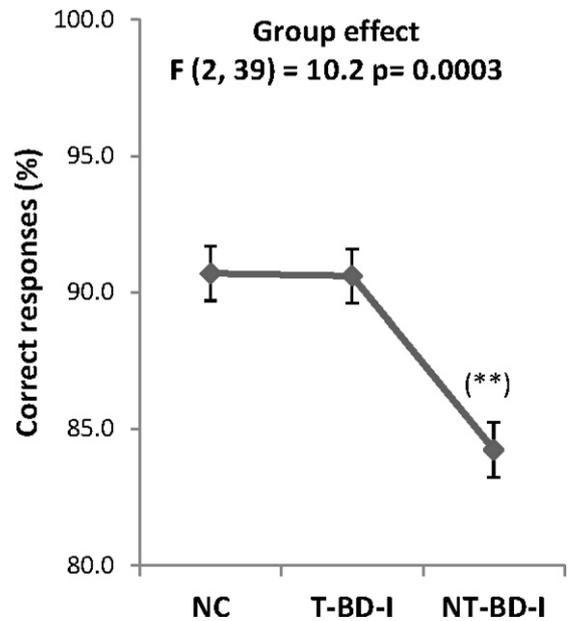


Fig. 1

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0069

A simple composite dynamic digital tool to communicate complex physical and mental health needs and measure outcomes: The Cornwall health radar

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Introduction Clinician-patient communication is a major factor in influencing outcomes of healthcare. Complexity increases if an individual has multiple health needs requiring support of different clinicians or agencies.

Aim To develop and evidence a simple dynamic computerised tool to capture and communicate outcomes of intervention or alteration in clinical need in patients with multiple chronic health needs.

Method A MS Excel algorithm was designed for swift capture of clinical information discussed in an appointment using pre-designed set of evidenced based domains. An instant personalized single screen visual is produced to facilitate information sharing and decision-making. The display is responsive to compare changes across time. A prototype was conceptually tested in an epilepsy clinic for people with Intellectual disability (ID) due to the unique challenges posed in this population.

Results Evidence across 300 patients with ID and epilepsy showed the tool works by enhancing reflective communication, compliance and therapeutic relationship. Medication and appointment compliance was 95% and patient satisfaction over 90%.

Conclusion To discuss all influencing health factors in a consultation is a communication challenge esp. if the patient has multiple health needs. A picture equals 1000 words and helps address the cognitive complexity of verbal information. The radar offers an evidenced based common framework to host care plans of different health conditions. It provides individualised easy view person centred care plans to allow patients to gain insight on how the dif-

ferent conditions impact on their overall well being and be active participants. The tool will be practically demonstrated.

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0070

The efficacy and safety of lurasidone in adolescent patients with schizophrenia: Results of functional and quality of life measures from a 6-week, double-blind, placebo-controlled study

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Introduction Lurasidone, an atypical antipsychotic, demonstrated efficacy and safety in adults with schizophrenia.

Objective/Aims To evaluate the efficacy and safety of lurasidone in adolescent patients with schizophrenia.

Methods Adolescents (13–17 years old) with schizophrenia were randomly assigned to six weeks of double-blind treatment with lurasidone 37 mg/day, 74 mg/day or placebo. An ANCOVA using an LOCF approach was performed to assess change from baseline on secondary study endpoints: Pediatric Quality of Life Enjoyment and Satisfaction Questionnaire (PQ-LES-Q) and Children's Global Assessment Scale (CGAS).

Results Patients were randomized to lurasidone 37 mg/d ($n=108$), 74 mg/day ($n=106$), or placebo ($n=112$). Placebo-adjusted LS mean improvement at week 6 on the PQ-LES-Q was 5.3 ($P=0.001$) and 5.8 ($P<0.001$) for the 37 mg/day and 74 mg/day groups, respectively; and, on the CGAS was 4.6 ($P=0.002$) and 4.9 ($P<0.001$) for the 37 mg/day and 74 mg/d groups, respectively. The most common adverse events occurring at $\geq 5\%$ in either lurasidone group and at least twice the rate of placebo were: nausea, somnolence, akathisia, vomiting and sedation. Mean change in weight at week 6 for placebo, 37 mg/day, and 74 mg/day groups was 0.05 kg, 0.17 kg, and 0.49 kg, respectively. Lurasidone treated patients did not show clinically meaningful differences from placebo on laboratory measures of cholesterol, triglycerides, glucose, and prolactin.

Conclusions Adolescent patients with schizophrenia treated with lurasidone demonstrated significant improvement in quality of life and function. Lurasidone was generally well-tolerated and associated with minimal changes in weight and metabolic parameters. Sponsored by Sunovion Pharmaceuticals Inc. ClinicalTrials.gov identifier: NCT01911429.

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man, Cucchiaro, Deng, and Loebel are employees of Sunovion Pharmaceuticals Inc.

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0071

Clinical characteristics associated with suicide attempt in patients with bipolar disorder

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Introduction Bipolar disorder (BD) is a chronic, highly disabling condition, associated with a high burden of morbidity and mortality, often secondary to suicidal behaviors. In previous reports, different variables have been associated with a higher risk of suicidal acts, with variable effect.

Objectives To evaluate which socio-demographic and clinical variables correlate with suicide attempts in bipolar patients.

Aims To enrich literature data about suicidal behaviour in BD.

Methods A sample of 362 BD patients (DSM IV-TR) was retrospectively collected and divided in two subgroups, in relation to the presence of a previous suicide attempt. Socio-demographic and clinical variables were compared between attempters and non-attempters using Corrected multivariate analysis of covariance (MANCOVA).

Results A total of 26.2% of analyzed patients attempted suicide in their lifespan, and approximately one third of them had multiple suicide attempts (i.e. ≥ 2 ; 31%). Depressive polarity at index mood episode, higher number of psychiatric hospitalizations, comorbidity with alcohol abuse, eating disorders and psychiatric poly-comorbidity were significantly associated with suicide attempt. Additionally, treatment with lithium, poly-pharmacotherapy (≥ 4 current drugs) and higher recurrence of psychosocial rehabilitation were significantly more frequent in patients who attempted suicide.

Conclusions The present paper reported a correlation with some specific clinical variables and the lifetime presence of suicide attempt in patients with BD. Although these retrospective findings did not address the causality issue, they may be of clinical relevance in order to better understand suicidal behavior in BD and to adopt proper strategies to prevent suicide in higher risk patients.

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0072

What is the relationship between the levels of work-stress and burnout?

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Objective Burnout is constantly becoming more exhaustively researched topic. It is assumed there is strong relationship between burnout and work-stress. The aim of this study was to investigate the relationship between burnout and work-stress in order to test the hypothesis that there is an association between these two variables.

Method The study sample comprised of economically active Czech population, that was a representative sample. Data was gained through combination of interviews and questionnaires