

Results/conclusions A retrospective study has already shown that this therapeutic patient education program, like others before, presented better results than dietary consultations. A prospective study is currently being carried out to validate these results in the long term and to demonstrate the benefit associated to this program.

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

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EV0211

Prevalence of depression among patients with tuberculosis at Perundurai TB hospital, Tamilnadu–depression, a comorbidity of TB

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Introduction Tuberculosis is one of India's major public health problems. According to WHO estimates, India has the world's largest tuberculosis epidemic. Many research studies have shown the effects and concerns revolving around TDR-TB especially in India, where social and economic positions are still in progression. **Materials and methods** Seventeen questionnaires were administered to the consented participants regarding the demographic data and awareness, also Hospital Anxiety and Depression Scale (HADS) was recorded to analyse the level of depression. The average age was 32.3 years (STD = 12.7), and the age range was from 13 years to 71 years. The data collected was analysed with SPSS 19.

Results The patients who were in the intensive phase had a considerably higher depression rate (42%) than the patients who were in the continuous phase (22%). However, the variations were not enough for the statistical significance. The patients with TB only (35%) showed a higher depression rate than the patients with TB/HIV (28%).

Conclusion According to this study, it can be found that the prevalence of depression was lower for patients who were old, female, college educated, married, and earned the highest, compared with their counterparts. Most of these findings might agree with a general perception that social and financial stabilities would provide a less likelihood of being depressed.

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EV0212

Prevalence and predictors of metabolic syndrome in a sample of Italian psychiatric inpatients

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Introduction Psychiatric population is characterized by a higher prevalence of cardiovascular events compared to general population. This difference might be due, in part, to the metabolic adverse effects of psychotropic agents, and, in part, to common risk factors such as smoking, sedentary lifestyle and unhealthy diet. Another potential risk factor is represented by the presence of metabolic syndrome (MetS).

Objectives We aimed to evaluate the prevalence of MetS and to identify the baseline predictors for the longitudinal development of MetS in a sample of Italian psychiatric inpatients.

Methods Medical records of 343 patients admitted to our psychiatric ward between 2007 and 2012 were retrospectively reviewed. **Results** Prevalence of MetS was 21.5%. MetS appeared directly associated with age and number of medication assumed. ROC curves showed HDL as the best predictor of metabolic syndrome in our sample.

Conclusions Our results confirm previous data on the association between metabolic syndrome and exposure to complex polytherapy. Additionally, our findings support the notion of psychiatric patients as an at-risk group for metabolic abnormalities, which should be carefully monitored.

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EV0213

New horizons of dual pathology, report of a case

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Introduction Pathological gambling, as behavioural addiction, is always related with psychosocial important problems. In this case, everything is even more difficult due to grave mental disease associated, Paranoid Schizophrenia. Man, 26 years old, single. He was diagnosed of psychotic disease at the beginning due to his grave addiction to THC and others stimulant drugs. His outpatient treatment was complicated and he needed to be hospitalised once (being diagnosed of Schizophrenia). After that, he improved till he got a standardised job. He was able to have his medical treatment (Aripiprazol 15 mgs per day and Biperidene 4 mgs per day) although he kept his isolation. Then, the patient could talk about his pathological gambling. He suffered from slot machine addiction, and he also suffered from depression symptoms closely related to family and economic problems due to pathological gambling. This patient was in contemplation state and he accepted to start with antidepressant (Mirtazapine 15 mgs per day) and psychological treatment. We agreed to make a record of his gambling uses (with regular self-reports). His salary would be administered by his parents and he only could take a little money every week. The treatment was useful; it increased the capacity of economic self-management and the recovery of depression disease related.

Conclusions In our opinion, he used gambling as filling a need for activity, and as a way of connecting with society/world. These findings suggest the need for improved prevention and treatment efforts related to problem/pathological gambling in individuals with psychotic disorders.

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EV0214

The link between developmental psychiatry and dual disorders from early attachment to first drugs abuse

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Since Dual Disorders expression was used for the first time, the old dilemma between categorical and dimensional grew again as a main issue because many authors wondered about its utility. The question was how far we can speak about two different entities, because doing so we are assuming comorbidity instead of a complex syndrome, with different clinical presentations (i.e. Talking about fever and cough instead of pneumonia). Child and adolescence psychiatry uses developmental psychiatry as a very useful tool to understand patients. Syndromes are seen as dynamic as patients. At the same time that patients grow their clinical presentations, evolves new symptoms or signs. We have reviewed retrospectively a group of twenty patients that were named as dual disorders, with different substance abuse but a common path in their childhood; all of them were diagnosed of ADHD and Conduct Disorder. We chose them because of the differences that DSM, ICD and main researchers have about this group, which some consider better described as a Disocial hiperkinetic disorder (ICD) than a ADHD with a conduct disorder associated (DSM), comorbidity again. We agreed with ICD opinion and will discuss how in some way we are somehow as those blind people describing different parts of the same elephant when we talk sometimes about dual. Truth is that opposite dual view or its syndromic treatment developmental psychiatry has all the time underlined the role of reward circuits/executive functions as epigenetic issues, both modulated by gene and environment.

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EV0215

Factitious disorder in a patient with Arnold-Chiari malformation: A case report

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Introduction The factitious disorder is characterized by simulation or exaggeration by the subject of his/her physical or psychological symptoms to take a sick role. This disorder may be associated with a real disease, used to simulate other symptoms and receive treatment. Our case is represented by a 49-year-old man, affected by Arnold Chiari Malformation Type I (ACM-I), a structural defect in the cerebellum with extension of the cerebellar tonsils into the foramen magnum, without involving the brain stem. The patient had three surgical operations involving the complete resolution of the disease. However, the subject reported a worsening of all symptoms, with the outcome of a severe self-limitation, with admission to a residential care and taken over by the multidisciplinary equipe of the district. Symptoms, which mainly consisted in pain, motor functional impairment, headaches, slurred speech were not evaluated due to the ACM-I. This diagnosis was confirmed when there was the complete resolution of the symptoms in a date pointed by the patient.

Methods To make an appropriate differential diagnosis, in addition to the neurological examination, the subject had psychiatric interviews and completed an MMPI evaluation.

Results Neurological examinations revealed no residual outcome of the ACM-I. At MMPI there were not significant peaks. Regarding to the attitude towards this test and its validity, it appears an obvious attempt to lie from the patient, which tries to present himself in a favourable unrealistically way.

Conclusion This case shows that appropriate diagnosis can help health services in a better management of their resources in such situations.

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EV0216

Does comorbid depression and alcoholic dependence influence cognition in Bulgarian women?

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Introduction Previous research on the impact of alcohol intake on human behavior and cognition has revealed the detrimental effects of alcohol dependence. Especially in women, depression is often associated with the initiation of alcohol abuse that provokes new episodes of depression and this cycle tends to chronify.

Objective Although the co-occurrence of depression and alcoholism is well documented, there is still scarce data on the cognition of depressed alcohol-dependent women. The aim of the present study is to examine the cognitive function in women who demonstrate both depression and alcohol dependence.

Method A group of fifty-three Bulgarian women with a formal diagnosis of alcohol dependence (Mage = 43.89, SDage = 9.48; level of education: all with high school education) and varying levels of depressive symptomatology were examined at the Municipal Council on Drug Addiction Blagoevgrad. Information were collected from personal history taking (anamnesis), self-reports and the Lesch Alcoholism Typology-Questionnaire (LAT online program). The women were grouped according to their age (27–45 and 46–71).

Results Results indicated that there is a significant influence of depression ($P = .032$), a slightly above the statistical significance level non-influence of age ($P = .056$), and an interaction of the influence of depression*age ($P = .048$) on self-reported cognitive performance.

Conclusions The present research suggests that future researchers should further clarify in a more systematic way the factors that influence cognition in this special population with comorbid depression and alcoholic dependence.

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EV0217

The relationship between personality disorders and substance abuse disorders

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Introduction A frequently observed fact in clinical practice is the relationship between Substance Abuse Disorders and Personality Disorders (PD). Epidemiological investigations have found that diagnoses of PD seem to increase vulnerability to other pathologies, including substance abuse and addiction, and it is possible to speak of comorbidity or dual pathology.