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Explorations of cooperation and recalcitrance in secure mental health hospitals

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This paper reports on the findings of three qualitative research studies undertaken within, respectively, medium and low secure units in one UK region, and a high secure mental health hospital in England (UK). The first study investigated alliance based involvement practices. The second explored service user and staff views and sense making of the notion of recovery. The third study is ongoing into service user and staff experiences of extreme coercive measures, such as forms of restraint and long-term seclusion or segregation. All studies utilised either semi-structured interviews or focus groups. All data was subject to thematic analysis. Selected and emergent themes include:

- the importance of relationships and communication; security first; involvement as pacification;
- different understandings of recovery; the importance of meaningful occupation; staff-service user relationships; recovery journeys and dialogue with the past; and recovery as personal responsibility;
- good and bad coercion; cooperation, resistance and recalcitrance; and alternatives to coercion.

Findings suggest that cooperation is largely framed by services in terms of compliance with a bio-medical model. The impact of the secure environment, whilst ever-present, is not an absolute constraint on the realisation of recovery or involvement objectives. The availability of extreme coercive measures raises some seemingly paradoxical understandings from both service user and staff perspectives. Critical social theory is drawn on to illuminate the tensions between cooperation and recalcitrance and suggest further exploration of their respective legitimacy.

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Effectiveness of paliperidone depot in seriously violent men with comorbid schizophrenia and dissocial personality disorder in a UK high-security hospital

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Introduction High-security hospital patients are often complex in presentation characterised by treatment resistance, medication non-concordance and history of violence. Paliperidone is licensed as both an oral and depot antipsychotic for the treatment of schizophrenia. Whilst there is data for the effectiveness of paliperidone palmitate (PP), there are no studies involving patients in forensic settings or those with comorbid personality disorder.

Objective To determine the effects of PP on violence, aggression and personality pathology.

Aim To evaluate the clinical effectiveness of PP.

Methods This was a retrospective service evaluation involving 11 patients. Medical records and interviews with the treating psychia-

trist were used to formulate clinical global impression (CGI) and to identify incidents of violence. The effect on personality symptom domains; cognitive-perceptual, impulsive-behavioural dyscontrol and affective dysregulation was ascertained, as well as engagement with occupational and psychological therapies.

Results Six patients were being prescribed PP. All 6 showed improvement in the CGI score with benefits in the symptom domains. Two patients demonstrated a reduction in violence risk and 2 remained incident-free. There was improvement in engagement with therapies. Benefits were also seen in aspects of personality for those who had discontinued PP.

Conclusions This pragmatic study of a small but complex patient group demonstrated that PP was effective in reducing symptoms of schizophrenia. Additionally and for the first time, it was shown that PP was also effective in reducing violence as well as improving personality pathology dimensions in a comorbid patient. This could have significant implications for management of high-security patients.

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The characteristics of alcohol pharmacokinetics of Korean female

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Introduction The systematized and proper sized research of alcohol pharmacokinetics in Korean has not reported ever.

Objectives and aim Aim of this study is to measure the β value and alcohol pharmacokinetic factors in Korean adult female and the relationship between the β value and some variables including age, smoking, total body water, drinking capacity, BMI, blood cholesterol, body fat and body fat ratio.

Methods Ninety-one subjects were randomly divided into two groups. One group was provided as much as 0.35 mg/mL/kg of alcohol and the other as much as 0.70 mg/mL/kg, and blood alcohol concentration was measured 15, 30, 45, 60, 90, 120, 180, and 240 min after the women finished drinking.

Results The subjects' mean alcohol elimination rate (β) was -0.002379 mg/100 mL·h, and there was no statistically significant difference in elimination rate between the two groups. The mean time to reach maximum blood alcohol concentration was 45 minutes, alcohol absorption rate was 0.1123 ± 0.1799 g/L/min, and the area under the concentration curve was 109.15 ± 62.95 . Among the factors that correlated with alcohol metabolism, alcohol absorption rate and follicle-stimulating hormone were statistically significant, but age, body mass index, and body fat percentage were not significantly correlated with alcohol metabolism.

Conclusions These results suggest that the β values for healthy Korean females can differ from the cut-offs that are currently used in Korea, which suggests that the legal limit for driving under intoxication should be adjusted.

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