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#### EV0503

### Mental health and human rights in Morocco: The urgent need for new policy

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**Introduction** All over the world, there is global emergency when it comes to respecting human rights in providing good mental health services. Morocco as an African and a developing country has always had a mental health policy defined by several glitches and failures, which had not helped him improve its mental health services quality. Nevertheless, huge improvements were achieved through time.

**Objectives** This report, aims to draw attention on how compulsory it is to think and act all together to promote mental health and provide patients with better health services in Morocco.

**Methods** The National Human Rights Council conducted an information and investigation mission in Morocco's main mental health hospitals and facilities between March 27 and July 6, 2012.

**Results** Structures are insufficient and inadequate in terms of geographical distribution, architecture and equipment. There is a big shortage of medical and paramedical staff and little interest is given to vulnerable groups. Nevertheless, huge improvements have also been achieved through time with mental health issues becoming a cornerstone of the ministerial program, the involvement of the NGOs, the construction of newer facilities, the implementation of an information gathering system and the presence of a substance use policy.

**Conclusion** Psychiatry in Morocco has come a long way since it was firstly implemented in the country as a medical specialty. Undoubtedly, a lot has been done but much more remains to be achieved. The current situation requires relevant actions and that clearly includes the implementation of a new mental health policy and the update of the legal framework.

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#### EV0504

### Epidemiological study of disability from mental disorders in children and adolescents population in Saratov region in 2000–2014

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**Introduction** Children and Teenager's disability is an extremely important medical and social problem, being very characteristic of the state of public health in the country and the level of social well-being of society.

**Objectives** An epidemiological study of the structure of disability due to mental disorders in children and adolescent population of the Saratov region for the period from 2000 to 2014.

**Methods** The analysis of the statistical data reporting forms "Information on the health care system" and "Information on the groups of the mentally ill" in the Saratov region in 2000–2014 by epidemiological, demographic and mathematical-statistical methods.

**Results** Number of children and adolescents (0–17 years), recognized as disabled by mental illness, increased both in absolute numbers (growth rate-12.86%), and the intensive indicators (49.88%). Increasing the number of disabled children and adolescents registered in schizophrenia, schizoaffective psychosis, schizotypal disorder, affective psychosis with delusions incongruent the affect. The most significant increase is observed in the group of chronic nonorganic and childhood psychoses. In epilepsy and mental retardation in the analyzed period was a slight decrease in total disability.

**Conclusions** The most significant increase in disability in the group of chronic nonorganic and childhood psychosis, most likely due not only to a true increase in morbidity and disability, but also with a great attention of both the public and the country's health services to the problems of childhood autism and, as a consequence, greater detection of children with this category of disorders.

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#### EV0505

### The psychiatric services of Saratov region and directions of its' improvement (Clinical, statistical and epidemiological aspects)

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**Introduction** The determining of the actual number of people with mental disorders and their spreading by nosology still remains actual, especially according to different regions.

**Objectives** The determining of the psychiatric services effectiveness in Saratov region on the basis of comprehensive analysis of its' clinical, statistical and epidemiological characteristics.

**Methods** The analysis of mental state indicators based on the example of adults' schizophrenia Saratov region in dynamics for 10 years (2005–2015) in comparison with Russian Federation.

**Results** Over the past 10 years the number of clinically supervised patients with schizophrenia decreased at 0.9% in the city and 2.2% in region population. This is consistent with the tendency of schizophrenia morbidity in Russian Federation over the same period. The number of supervised adult patients with primary diagnosed schizophrenia in Russia remained at the same level and amounted to 10.8 per 100 thousand population. At the same time the noticeable fluctuations in the number of this patients' category were observed in Saratov and Saratov region. Over the past 10 years, the proportion of patients with primary diagnosed schizophrenia disability in the class structure of mental disorders is quite high, averaging of 41.1% in Saratov region. Analyzing the number of patients with re-confirmed disabilities the gradual decline from 1846 to 755 people (at 59.1%) was found.

**Conclusions** The mental health analysis of Saratov region population allows to suggest the long-term forecast of mental disorders' morbidity, to analyze the level of disability due to schizophrenia, to develop recommendations for the optimal regional model of psychiatric services.

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#### EV0506

### Prevalence of depression in psychiatry trainees in 22 countries: Findings from the international burnout syndrome study (BoSS)

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**Aims** The Burnout Syndrome Study screened for burnout in psychiatric trainees in 22 countries, along with associated factors. This paper reports the results of the PHQ-9 depression screen that formed part of the study.

**Background** It is well documented that physicians have higher rates of mental illness compared to the general population. Post-graduate medical trainees may work long hours and be exposed to stressful or saddening situations regularly. Their environment and workload means they may not exhibit appropriate help-seeking behaviours and be at significant risk of depression.

**Methods** The study used a cross sectional, multi-country online survey. Participants were asked to participate via an email invitation. The participants were asked to complete the PHQ-9 questionnaire, which is validated as a primary care self-administered screen for depression. Mixed methodology was used when recruiting trainees to obtain the most representative sample possible from each country. Statistical analysis was performed using SPSS.

**Results** Complete data was obtained from 1980 trainees with an average age of 31.9 years and with 2.8 years of training. The prevalence of depression in psychiatric trainees varied by country from 50% in Latvia to 7.1% in Belarus. The average rate of depression was 20.8%.

**Conclusions** Prevalence of depression in the US general population is estimated at 6.7%, making the prevalence of depression in trainees of 20.8% a sign that action needs to be taken to reduce depression rates in trainees.

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#### EV0507

### Paranoidism and memory deficits: An epidemiological study

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**Background** The Green et al. Paranoid Thought Scales (GPTS) was developed to fulfill a need for a tool that was adapted to the current dimensional definition of paranoia, capable to assess dimensions of preoccupation, conviction, and distress, valid and

reliable for the assessment of both clinical and healthy populations, and precise enough to detect subtle clinical change. It has recently been validated for the Spanish population (S-GPTS) with very good psychometric properties. Numerous studies suggest that patients with severe psychiatric disorders have impaired sustained attention and memory. A wide spectrum of executive deficits have also been described (goal-oriented tasks, recognizing priority patterns, planning, etc.) Very few studies have attempted to identify whether these same relationships between neuropsychological deficits and psychotic symptoms also occur in general population.

**Methods** This is a cross-sectional study. We undertook a multi-stage sampling using different standard stratification levels and out of the 5496 eligible participants finally approached, 4507 (83.7%) agreed to take part in the study, completed the interview and were finally included in the study ( $n = 4507$ ).

**Results** Individuals with high cut off S-GPTS scores showed lower scores in working memory subtest verbal statistically significant ( $P > .05$ ). While no significant difference was found among for immediate verbal learning subtest and high S-GPTS scores ( $P > .05654$ ).

**Discussion** This information can improve the clinician's understanding of patient's cognitive strength and weaknesses, put patients' cognitive abilities into perspective for their diagnosis, and facilitate multidisciplinary treatment decisions as we improve our ability to distinguish clinical cases from non-clinical population.

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#### EV0508

### Risk factors of self-injury behavior among psychiatric inpatients

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**Background** Self-injury behavior among mental patients has been recognized for several years, yet our understanding of its mechanisms and its risk factors remains limited.

**Objectives** This study aimed to assess the prevalence of deliberate self-harm (DSH) among psychiatric inpatients and to identify its association with personal and clinical factors.

**Methods** It was a descriptive and analytic study. It included 87 psychiatric inpatients followed in the psychiatry department "C" at the Hedi Chaker University Hospital of Sfax in Tunisia. Barratt Impulsivity Scale (Bis11) and the 28-items Childhood Trauma Questionnaire (CTQ) were used to assess respectively impulsivity and child maltreatment.

**Results** The average age of patients was  $29.32 \pm 8$  years. Most of them were male (75%) and single. Fifty-nine percent of patients had previously attempted suicide. A history of DSH was found in 60.9% of cases. The most frequent trauma types were emotional abuse and physical neglect with respectively 58.7% and 69.8%. Factors positively correlated with DSH were: male gender ( $P = 0.026$ ), father alcoholism ( $P = 0.024$ ), history of suicide attempts ( $P = 0.017$ ), borderline personality ( $P = 0.00$ ) and history of emotional abuse ( $P = 0.008$ ) or physical abuse ( $P = 0.04$ ) or neglect ( $P = 0.004$ ). Score "Bis11" was significantly correlated with suicide attempts ( $P = 0.00$ ) and presence of childhood abuse ( $P = 0.00$ ) or neglect ( $P = 0.01$ ).

**Conclusion** DSH seems to be a prevalent problem among psychiatric inpatients. It concerns mainly patients with a history of child abuse and impulsive behavior such as suicidal attempts underlying borderline personality disorder. Patients with these risk factors warrant specific attention in mental health services.