

ner. And furthermore, unlike physical diversities, often increasingly celebrated, mental and psychological diversity are – with notable exceptions, increasingly problematic.

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EV0969

Relations between Minkowski and Levinas, a look beyond the phenomenology in the construction of the psyche

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Introduction Both Minkowski and Levinas introduced in France phenomenological thinking, psychopathology and metaphysics, respectively.

Objectives It is in this context that interested raise the similarities and differences in relation to the study of time these authors in their link to the construction of the self (soi-même).

Aims Both authors take up the relevance of temporality in the construction of the psychic, overtaking Husserl's phenomenology, the distinction between thinking and intuition discursive and theoretical thinking and sensitivity.

Methods Comparative analysis of the problem of time and its relation to the psyche, Le temps vécu of Minkowski, Autrement qu'être of Levinas.

Results You can set a break with Husserl's phenomenology, inspired by the philosophy of Bergson, based on the living back in the studio. At the same time, among the authors reviewed, there is an irreconcilable discrepancy in the notions of activity and passivity in relation to the construction of the self (soi-même).

Conclusions Phenomenology applied to the psychic needs to return to its original inspiration to go beyond a methodological rigid reading, which ends up betraying its spirit, which leads her to forget the living world in its complexity.

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Three forms of intuition in Eugène Minkowski

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Introduction Eugène Minkowski is one of the great authors of structural phenomenological psychiatry. However, it has stressed only its influence on the study of schizophrenia, however, the scope of its investigations is much coarser, while addresses issues that attempt to illuminate the way they are set life and humans.

Objectives It is interesting to pose as the author emphasizes the importance of intuition, on more than one level, giving an epistemologically worthy rank in the constitution of the self (soi-même), in psychopathology and even in the ontology.

Aims It is shown that in Minkowski research on intuition it appears as a study of a symptom called autism, as a psychopathological diagnostic method called empathy, and even as an ontological understanding that purpose of the study time.

Methods Reconstruction of the uses of the notion of intuition in the work of Minkowski.

Results Three ways clearly appear in different planes but complementary, pointing not only to a clinical trial, but take a glimpse metaphysical aspects.

Conclusions The conclusions aimed are highlighting how Minkowski think intuition not only as a dignified way to understand the suffering, or establish a knowledge, but necessary for a clinic and even an approximation of what we are.

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e-Poster Viewing: Post-traumatic stress disorder

EV0971

Alexithymia in war veterans with post-traumatic stress disorder

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Introduction Alexithymia consider a cluster of cognitive and affective characteristics that include: inability of recognizing and describing emotions, difficulties in distinguishing feelings and physical sensations during emotional arousal, narrowed capacity for imagination and externally oriented cognitive style. Several studies links alexithymia with increased risk for physical and mental damage. Symptoms of alexithymia are documented in persons who develop PTSD in response to different types of traumatic events.

Objectives To examine alexithymia in war veterans.

Aims To determine whether alexithymia is significantly more present in war veterans with PTSD.

Methods Cross-sectional study of 205 war veterans tested by Harvard Trauma Questionnaire and by Toronto Alexithymia Scale (TAS-20).

Results Out of 205 war veterans 89 (43.4%) of them have alexithymia. Significantly more veterans with PTSD (78 or 75%) than without PTSD (11 or 10.9%) has alexithymia ($\chi^2 = 88.955$, $P < 0.001$) was found a statistically significant difference between the two groups in the total score of alexithymia (t -test = -10.676 , $P < 0.001$) statistically significant difference was found in all three domains of alexithymia.

Conclusions Alexithymia is significantly often in war veterans with than without PTSD.

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EV0972

Residual sleep disturbance in Tunisian military patients with post-traumatic stress disorder

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Introduction Sleep disorders such as nightmares and insomnia are among the most frequently reported symptoms in patients with post-traumatic stress disorder (PTSD).

Objective To assess the prevalence of residual sleep disorders in military personnel with PTSD.

Methods A cross-sectional study was conducted and included 25 military consultants meeting the criteria of DSM-5 for PTSD. Sleep disorders were assessed using the insomnia severity index (ISI).

Results The mean score of the ISI was 14. Fourteen percent of the participants ($n=21$) reported difficulty falling asleep. All patients reported difficulties staying asleep. Nightmares were reported by 48% of the sample ($n=12$). All patients were under hydroxyzine at dosages ranging from 25 to 50 mg per day. More than half of the sample ($n=18$) was under a combination of benzodiazepine and hydroxyzine. Seventy-one percent of patients ($n=15$) considered that their sleep difficulties significantly disrupted their daily lives.

Conclusion Insomnia is one of the most frequent and persistent symptoms in PTSD patients. These sleep disorders can impede remission and may be due in part to co-morbid depression.

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EV0973

Assessment of chronic pain in military patients with PTSD

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Introduction Patients with post-traumatic stress disorder (PTSD) presents often with several concomitant physical and mental health problems. Recent evidence suggests that pain is one of the most commonly reported symptoms in patients with PTSD, regardless of the nature of their traumatic experience.

Aim of the study To evaluate chronic pain in patients with PTSD in a Tunisian military sample.

Methods Transversal descriptive study of a sample of 22 patients treated for PTSD in the Principal Military Hospital of Instruction of Tunis during the period between August and October 2016.

The PTSD Checklist for DSM-5 (PCL-5), Hospital Anxiety and Depression scale (HAD), and the Brief Pain Inventory Short Form (BPI-SF) were administered for patients.

Results All the patients of the study were male. The mean age of the sample was 29.6 years. Fifty percent presented with a co-morbid major depression and 59.1% with chronic pain symptoms. Locations of chronic pain were as follow: limb pain (69.23%), back pain (38.46%), headache (30.76%) and torso pain (7.69%). Sequelae from combat-related trauma were present in 31.8% of cases.

Conclusion The results of this study illustrate a high rate of chronic pain symptoms among PTSD patients. This suggests that closer attention should be given to the interaction of medical problems, especially pain, with PTSD symptomatology in clinical management and in future research.

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EV0974

Self-esteem in military patients with post-traumatic stress disorder

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Introduction Maintaining self-esteem is a fundamental human motivation. Trauma may lower self-esteem, which contributes to the development and maintenance of Post-Traumatic Stress Disorder (PTSD).

Objectives Assessment of self-esteem in Tunisian military patients suffering from PTSD. Study of correlation between the severity of the PTSD symptoms and the rate of self-esteem.

Methods Transversal descriptive study of a sample of 22 patients treated for PTSD in the Tunisian Military Hospital during the period between August and October 2016.

The PTSD Checklist for DSM-5 (PCL-5), Hospital Anxiety and Depression scale (HAD), and the Rosenberg Self-Esteem Scale were administered for patients.

Results All the patients assessed were male. The mean age of the sample was 29.6 years. Fifty percent of the patients presented with a co-morbid major depression. Based on the score of the Rosenberg Self-Esteem Scale, patients had a self-esteem, which was very low in 45.45% of cases, low in 45.45% of cases, average in 4.54% of cases and high in 4.54% of cases. The results also showed that lower levels of self-esteem are significantly correlated to the severity of the PTSD symptoms as measured by the PCL-5 score.

Conclusions This study highlights the magnitude of self-esteem deficiency among patients suffering from PTSD. It remains unclear as to whether the relationship between trauma and depression is consistently mediated by a negative cognitive schema, such as low self-esteem, or whether trauma influences mood independently of low self-esteem. Further studies are required.

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EV0975

Post-traumatic stress spectrum and adult autism subthreshold spectrum in parents of children with epilepsy: Correlations and gender differences

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Introduction Data that assess the co-morbidity between post-traumatic stress symptoms and autism spectrum are scarce. Nevertheless, some authors suggested that subjects with autism spectrum disorder (ASD), due to their difficulty in understanding the codes of communication, empathy, expression, are lower resilience to traumas.

Objectives The aim of this study was to explore in a sample of parents of children with epilepsy, the presence of correlations between the symptoms of post-traumatic stress and adult autism subthreshold spectrum.

Methods Seventy-seven parents completed the Trauma and Loss Spectrum Self-Report (TALS-SR), specifically modified for one's son epileptic disease, and 72 parents completed the AdAS Spectrum (Adult Autism subthreshold Spectrum).

Results Eight subjects (11.1%) presented a total score ≥ 45 at the AdAS Spectrum, corresponding to the satisfaction of a symptomatic ASD criteria and indicative of the Adult Autism Spectrum subthreshold. More specifically, a total score ≥ 45 was found in 7 (15.9%) of mothers and 1 (3.6%) of the fathers, with no statistically significant differences between the two groups ($P=0.139$).

Noteworthy correlations between TALS and AdAS, emerged only in the subgroup of the fathers. In particular, a relevant number of moderate to good correlations emerged between the Domain II (reactions to the events of loss) of the TALS-SR and the AdAS Domain III (non verbal communication), Domain VI (restricted interests and ruminations) and total score.