

employment, socioeconomic state, psychological-emotional state, and family.

Objectives The purpose of this study was to identify influence of childbirth experience and postpartum depression on QOL.

Methods This is a descriptive cross-sectional study regarding 150 postpartum women receiving cares in the hospital of Sfax and examined during the first and the sixth week post-delivery. Data collection tools in this study were demographic questionnaire, Edinburgh Postnatal Depression Scale (EPDS), and world health organization quality of life-bref (WHOQOL-bref). Data were analyzed using SPSS.

Results The mean age of our sample ($n=150$) was 29.61 years. During the sixth week study period, 126 of 150 were examined. A personal psychiatric history of depression was found in 9.3% of cases.

The current pregnancy was undesired in 15.3% of cases.

The prevalence of postpartum depression in the first week was 14.7% and 19.8% in the sixth week after delivery.

The mean score of quality of life was 81.62 ± 9.09 .

Scores of quality of life and all its dimensions were significantly lower in depressive women.

Conclusion Because enormous changes develop in postpartum women, we suggest supportive measures for mother by her mother-in-law family, and caregivers to improve the QOL and health status of the mother and her child and to prevent postpartum depression.

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

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EV1515

The psychological effects of unmarried women “a field study on a sample of unmarried women in Algeria”

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Background The present research was designed to determine the psychological stress as experienced by unmarried women in the education sector, and how to help them to discover the meaning of their presence in the framework, innovation and achievement, art, science, comprehension, love and adaptation in life.

Aim This research aims to identify the various problems and mental disorders that unmarried women suffering from, and to determine the differences between unmarried women in terms of the psychological problems resulting from “unmarried” in: ages, kind and professional status.

Method The method used in this research is purely descriptive following the collected data from the sample of 200 unmarried women. The tools that were used in this research as follow: Self-Confidence Scale, Psychological Stress Scale, “List of Information Collection for unmarried women”; we proceeded with some statistical techniques.

Results The findings of this research were:

- emotional problems are the most common problems experienced by unmarried women;
- the present study indicates the presence of depressive symptoms in 17%, which can evolve toward psychotic depression as dysthymia (loss of interest in daily activities, hopelessness, low self-esteem, self-criticism, trouble concentrating and trouble making decisions, effectiveness and productivity, avoidance of social activities, feelings of guilt and worries over the past, insomnia. . .);
- the impact of unmarried on late stages have more negative impact, and psychological effect on them was more severe and the greatest harm.

Conclusion The advancement of women in the age without marriage or “unmarried women” is origin of psychological stress and low self-confidence.

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

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EV1516

Gender differences on mental health distress: Findings from the economic recession in Portugal

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Introduction Evidence from past economic recessions shows that increased risk of mental distress is likely to occur. Until now, little is known whether distress levels differ by gender in countries highly hit by the economic recession.

Objectives The aim of the study was to characterize and analyze the differences in mental health distress in men and women during the current economic recession in Portugal.

Methods A subsample of 911 participants from the 2008 national mental health survey, were re-interviewed in 2014/2015. Sociodemographic data was collected and mental health distress was evaluated using the 10-item Kessler's Psychological Distress Scale (K10). Chi-square statistics were used to investigate differences between men and women in mental distress as a categorical variable.

Results Mean mental distress differed significantly according to gender, $\chi^2(1) = 13.716, P = 0.001$. The results showed that a much higher proportion of women (18.5%) revealed to be under psychological distress compared to men (9.9%).

Conclusions Distress levels during the economic crisis in Portugal differ significantly by gender. More women reported to be distressed compared to men. There are several hypotheses for a differential expression of psychological distress between women and men during the recession, such as different gender roles which asserts that differences are due to gender and country based coping resources but also due to several determinants of mental health such as income, employment and social status. Further research is needed to better predict a variety of characteristics that are important for this outcome.

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

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Complementary and integrative medicine approach for climacteric disorders

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Introduction Menopausal symptom clusters of vasomotor symptoms (VMS), sleep and mood symptoms may last for years and might lead to an increased risk of depression.

While hormone replacement therapy is still the most effective therapy for reducing VMS, which are the most prominent symptoms of menopause, the majority of women prefer to choose nonhormonal therapies, either because of medical contraindications or personal beliefs and turn to complementary and integrative medicine (CIM).