

¹ Faculty of Psychology, Department of Clinical Psychology, Bergen, Norway

² Faculty of Medicine, Institute of Clinical Medicine, Oslo, Norway

³ Solli District Psychiatric Centre DPS, Department of Comprehensive Treatment Programs, Nesttun, Norway

⁴ Faculty of Psychology, Department of Psychosocial Science, Bergen, Norway

* Corresponding author.

Introduction Seventy percent of patients with panic disorder (PD) have sleep impairment. Cognitive behavior therapy (CBT) effectively treats PD, but the concomitant effect on sleep is understudied. Physical exercise (PE) improves sleep, but this has not been investigated in patients with PD.

Objective To compare the effects of CBT or PE on sleep in PD-patients, and to determine potential mechanisms of action.

Methods Thirty-six PD-patients were randomized to either group CBT for PD or regular PE. Sleep was assessed pre/post with the Pittsburgh sleep quality index. Effects were investigated with repeated measures ANOVA and t-tests. Expected mediators were added to the general linear model to assess mediation.

Results The effect of time was significant, $F(1.33)=10.11$, $P=0.003$, but not the interaction (Time \times group), $F(1.33)=.48$, $P=0.49$. Symptoms were significantly reduced from pre- to post-treatment: PE, $t(16)=3.03$, $P=.008$, and CBT, $t(17)=2.18$, $P=0.044$. CBT-patients changed significantly ($P<0.05$) on Sleep quality, $t(17)=2.47$ and Sleep disturbance, $t(17)=2.38$. PE-patients changed significantly on sleep duration, $t(16)=2.58$ and sleep disturbance, $t(16)=2.58$. A significant interaction with change in fear of bodily symptoms, $F(1.16)=5.53$, $P=.032$, and with change in depression-level, $F(1.16)=12.13$, $P=0.003$ was only found for CBT. A significant interaction with change in physical fitness, $F(1.15)=5.01$, $P=.041$, was only found for PE.

Conclusion Both interventions improve sleep in PD-patients, but differently. The findings also suggest that these changes are related to different mechanisms for PE and CBT.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1875>

EW0007

Explanatory and confirmatory factor structure of beck anxiety inventory in college sample

S. Kareemi*, B.M. Alansari

Kuwait University, Faculty of Social Sciences, psychology, kifan, Kuwait

* Corresponding author.

Introduction The Beck anxiety inventory (BAI) is a widely used 21-item self-report inventory used to assess anxiety levels in adults and adolescents in both clinical and non-clinical populations. The values for each item are summed yielding an overall or total score for all 21 symptoms that can range between 0 and 63 points. A total score of 0–7 is interpreted as a “Minimal” level of anxiety; 8–15 as “Mild”; 16–25 as “Moderate”, and; 26–63 as “Severe”. There is no study until this date that examines the Explanatory and confirmatory factor structure of BAI in college student in Kuwait.

Objectives The current study investigated the original four-factor structure of the (BAI) in non-clinical sample of college students.

Methods Sample one consisted of 540 males and females while sample two consisted of 600 males and females from Kuwait University undergraduates. The Arabic version of BAI was administered to participants. Explanatory factor analysis based on sample one and conformity factor analysis based on sample 2.

Results The results revealed four factor structures of BAI in the two samples of Kuwaiti students. Which included neuro-physiological, subjective, autonomic, and panic factors.

Conclusions The results of both confirmatory and exploratory factor analysis indicated that the original four-factor structures of the BAI do provide the best fit for the college sample.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1876>

EW0008

Playing video games – Psychological threat to adults?

M. Toś¹, E. Wilk¹, A. Myszczyk¹, A. Bratek², K. Krzysztof^{1,*}

¹ Medical University of Silesia, Department of Rehabilitation Psychiatry, Katowice, Poland

² Medical University of Silesia, Department of Psychiatry and Psychotherapy, Katowice, Poland

* Corresponding author.

Background Video games become increasingly popular form of spending free time, therefore they are often a research subject. Researchers focus mainly on video games influence over children's psyche and their social interactions, although video games can also have an impact on adult's behaviour.

Objectives Incidence of social anxiety disorder and impulsiveness among video game players and non-players.

Material and methods An anonymous online survey included 263 students of medical university of Silesia (112 M and 151 W). In study group, 142 people (54%) declared to be players. Questionnaire contained questions about playing time, Barratt Impulsiveness Scale and Liebowitz Social Anxiety Scale. Statistical analyses were performed using the statistical software package Statistica 12.

Results Using Liebowitz Scale in 168 (64.86%) all studied people lack of phobia was found, moderate social phobia 39 (15.06%), marked social phobia 26 (10.03%), severe social phobia 17(6.56%) and very severe social phobia 9(3.47%). There was no statistical significance between players and non-players (test χ^2 $P=0.6521$). Also in Barratt Scale statistical significance was not found in attentional impulsiveness (test U M-W $P=0.3267$) and in Motor impulsiveness (test U M-W $P=0.3140$). Statistical significance was observed in Non-planning impulsiveness (players: 23.68 V non-players: 22.02; test U M-W $P=0.0036$).

Conclusions The study did not show clear influence adult's video games playing over social phobia and impulsiveness occurrence.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1877>

EW0009

Utilization unspecialized care of patients with anxiety disorder

M. Marachev*, A. Avedisova

V. Serbsky Federal Medical Research Centre for Psychiatry and Narcology- of the, Therapy of Mental & Behaviour Disorders, Moscow, Russia

* Corresponding author.

Introduction The greatest social and economic burden is divided between the three main anxiety disorders: social phobia (SF), generalized anxiety disorder (GAD) and panic disorder (PD).

Objectives To examine the pathways of patients with PD, SF and GAD since the beginning of the first anxiety symptoms and before the first course of a standardized treatment in a specialized mental health facility.

Aims To evaluate the period of delay in seeking specialized care and to identify the main ways of seeking medical/non-medical care.

Methods Retrospective study ($n = 80$). Structured interview were based on WHO instruments: WHO WMH CIDI and WHO Pathways to care encounter form.

Results Average age was 38 years, more females (72.5%). The delay period was 7 years ($GAD = 8.7$; $SF = 8.2$, $PD = 5.9$), during which at least 2 episodes of the disease. The most popular specialists were: neurologists (19%), psychiatrists (17%) (one-time visits to which were not accompanied by the appointment of a standardized course of treatment for an adequate period of time) and therapists (15%). Non-medical care was 10% of all studied (psychologists–5%, healers–3%, priests–2%). SF–psychiatrists (43%), therapists (14%), psychologists (14%); GAD–psychiatrists (22%), neurologists (19%), psychotherapists (11%), ambulance doctor (11%); PD–therapists (22%), neurologists (22%), ambulance doctor (17%), cardiologists (9%).

Conclusions The findings suggest that patients with anxiety disorders have a long period of delay in receiving specialized care that causes the value of the social and economic burden of anxiety disorders in the community.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1878>

EW0010

(Re)examining the factorial structure of the generalized anxiety disorder-7 in a college students sample

S. Monteiro^{1,2,*}, A. Bártolo¹, A. Torres^{2,3}, A. Pereira^{1,4}

¹ University of Aveiro, Department of Education and Psychology, Aveiro, Portugal

² CINTESIS, Center for Health Technology and Services Research, Faculty of Medicine- University of Porto, Porto, Portugal

³ ESEnCVPOA, Portuguese Red Cross Nursing School of Oliveira de Azeméis, ESEnCVPOA, Portuguese Red Cross Nursing School of Oliveira de Azeméis, Oliveira de Azeméis, Portugal

⁴ CIDTFF, Didactics and Technology in Education of Trainers, Department of Education and Psychology, University of Aveiro, Aveiro, Portugal

* Corresponding author.

Introduction Generalized anxiety in young adults during college career is a serious public-health problem that untreated has a chronic course. Research has shown that the self-report questionnaire generalized anxiety disorder-7 (GAD-7) is a reliable and valid measure to assess generalized anxiety symptoms severity in heterogeneous psychiatric samples. However, GAD-7 is not available for non-clinical populations and their factor structure has not been re-examined.

Objectives Our objective was to examine factor structure and measurement invariance of the GAD-7 among college students testing two alternatives models.

Aims The original model fit of single-factor was compared to two-factor model that considered in comprehensive approach of generalized anxiety the assessment of cognitive-emotional nature and somatic symptoms.

Methods In this cross-sectional study the GAD-7 was administered to college students ($n = 1031$) recruited in the six schools which compose the Polytechnic Institute of Coimbra, Portugal. Confirmatory factor analysis was used testing two models.

Results Among college students, 32.8% reported significant generalized anxiety symptoms. The original unidimensional structure of GAD-7 was confirmed but the two-factor model comprising cognitive-emotional and somatic factors presented better fit to the data ($\chi^2(1) = 21.01$, $P < 0.001$). This latent factor were positively associated ($r = 0.51$, $P < 0.001$) and presented a good internal consistency ($\alpha = 0.85$ and $\alpha = 0.86$ for cognitive-emotional and somatic items, respectively). The invariance factor of two-factor model across gender was also confirmed.

Conclusions Results indicate that within college communities the GAD-7 integrates two stable generalized anxiety factors related but independent structure. The GAD-7 can be an adequate measure to detected generalized anxiety symptoms in this population.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1879>

EW0011

An investigation of childhood trauma in patients with panic disorder

S.B. Ölmez*, A. Ataoglu, Z. Başar Kocagöz

Duzce University School of medicine, Psychiatry Department, Konuralp, Turkey

* Corresponding author.

Introduction It is widely known that childhood traumatic life situations are associated with most of the adult life psychiatric disorders such as disassociative disorders, mood disorders, anxiety disorders and so on.

Objectives and aims The purpose of this study to examine the relationship between childhood traumatic experiences and panic disorder development.

Methods The sample of this study consists of 59 outpatients who applied to the department of psychiatry in addition to 61 healthy individuals serving as the control group. These 59 individuals, located within the range of 18 to 65 years, were selected from outpatients who had been diagnosed with panic disorder based on DSM-V diagnosis criteria who did not have any other mental disorder. The 61 healthy individuals in the control group were selected from hospital attendants who had not received any psychiatric diagnosis. The participants were administered the childhood trauma questionnaire (CTQ) and a socio-demographic form.

Results The participants in the panic disorder group were found to have significantly high scores in comparison to the control group with respect to CTQ subscales (i.e., the emotional neglect and the emotional abuse subscale) and the total CTQ score. Hence, there exists a strong relationship between childhood traumatic experiences and panic disorder development.

Conclusion The results revealed that childhood traumatic experiences play an active role in the development of panic disorder. Moreover, it was found that the type and quality of trauma experienced during the childhood period is one of the predictors for the psychiatric disease that can occur in the future years.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1880>

EW0012

Could deficits in the recognition of emotions that indicate social approval be associated with musical performance anxiety?

F.L. Osório*, A.D. Sabino, C.M. Camargo

Medical School of Ribeirão Preto - São Paulo University, Neuroscience and Behaviour, Ribeirão Preto, Brazil

* Corresponding author.

Introduction Proper recognition of facial expressions of emotion is crucial for human social relationships. Impairments in the capacity to process facial information may play an important role in the etiology and maintenance of certain mental disorders, especially music performance anxiety (MPA).

Objective To assess the recognition of facial expressions of emotion in musicians compared to a group of subjects from the general population, considering also the presence/absence of MPA.