

special role in society. Presented behaviours, reactions to stressful situations, unaccepted emotional states that appear to be maladaptive, are often intensified by the rules of monastery life.

**Objectives** The aim of this investigation was to uncover the most significant issues in terms of the specificity of therapeutic work with nuns.

**Methods** The subjects were 12 patients (nuns) with the diagnosis of depressive-anxiety disorder (F41.2 according to ICD-10 criteria). Over the course of the last 10 years (since 2005) we observed the therapy processes of 12 nuns. The psychotherapy group consists of 12 patients at our ward. Every time there was only one nun in the group.

**Results** This study gives an overview of issues and problems reported by the nuns: their sex significantly determines their position in the community of consecrated sociality, their obligations to perform specific work, the rules to follow as well as the resulting consequences for the functioning of mental health.

**Conclusions** In the process of psychotherapy is important and necessary to distinguish between theological and psychological aspects, between what is secular and what is spiritual. The psychotherapy group's as well as the therapist's perception of a nun is of special importance as it is sometimes difficult to distinguish between her social role and her needs, desires, difficulties and conflicts as a human being.

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#### EV1156

### Outcomes assessment: Psychometric properties of the Spanish adaptation of the outcome questionnaire (OQ-45)

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**Introduction** The outcome questionnaire (OQ-45) has been one of the most frequently used instrument to measure clinical outcomes in psychotherapy. Probably due to its subscale structure, its applicability for a variety of disorders and life struggles, its sensitivity to change by repeated measurements and its predictive ability. Given its popularity, OQ-45 has been translated into several languages.

**Objective** As the Spanish version has not been published, through this poster it is going to show the reliability and the dimensional structure of the OQ-45.

**Method** One hundred and thirty-nine patients in clinical settings have completed the Spanish version. Three different confirmatory factor analysis have been calculated to analyze the construct validity.

**Results** The Cronbach Alpha of the instrument was adequate .92, but also, in the three dimensions: symptoms distress (.90), interpersonal relations (.78) and social role (.66). Through the CFA was proved that the Four-factor bi-level model structure [ $\chi^2_{(900)} = 3930.47, P < .001, AGF = .86, CFI = .91, RMSEA = .061 (.049 \text{ to } .073)$ ] suited appropriately, in fact, more properly than the three-factor correlated or the three-factor with a second order factor models.

**Discussion** The three-factor bi-level model structure of the OQ-45 is confirmed indicating an empirically and clinically relevant measure of client functioning. In this model each item loaded on one of the three subscales originally created. Besides, each item also captures common variance represented by the general factor of overall maladjustment, where this factor may indicate the degree to which respondents are functionally impaired. Thus, OQ-45 is an instrument that could be used for monitoring treatment efficacy and for making informed decisions about clinically significant changes.

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#### EV1157

### A prospective intervention in patients with complicated grief

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**Introduction** Most reactions to grief are adaptive. However, there is the possibility that some individuals present a complicated grief disorder, where there is a pathological intensification of symptoms lasting more than 6 months, deserving special treatment.

**Objectives/aims** Evaluate the effectiveness of two types of intervention in complicated grief: group intervention (GI) and cognitive-narrative (CN) therapy.

**Methods** Patients in a complicated grief process were selected ( $n = 70$ ), and distributed in three groups: cognitive-narrative therapy group (CNTG), group intervention group (GIG) and a control group (CG). Inclusion criteria: adults, with a reference to mourning situation, with personal meaning, for over six months and results in ICG  $\geq 30$  points (cutoff). The Inventory of Complicated Grief (ICG), the Center for epidemiologic studies depression scale (CES-D) and the trauma questionnaire (ICD-11) were used. Follow-up was performed 3 months after the end of each intervention. Data analysis was performed using the statistical package from social sciences (SPSS 20).

**Results** With respect to complicated grief symptoms (CGx) and depression symptoms (Dx) there were statistically significant differences between the CNTG and the CG, but not with the GIG. There was no statistically significant effect in post-traumatic symptoms (PTx), even though both interventions had a slight decrease. When the CNTG and the GIG were directly compared, there was only a statistically significant difference between PTx.

**Conclusions** In our single center cohort, CNTG was a more effective intervention in complicated grief patients for CGx and Dx reduction. For PTx, no intervention was superior. Larger multi-center studies are needed to validate these results.

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

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#### EV1158

### Cognitive behavioral therapy and acceptance and commitment therapy as augmentation treatment for paediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS): A case report

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**Introduction** Paediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS) are a subgroup of conditions including obsessive-compulsive disorder (OCD), tic disorders, pre-pubertal and sudden onset, temporal association between streptococcal infections and associated neurological abnormalities. Some strategies were developed, including the use of antibiotic prophylaxis to prevent streptococcal-triggered exacerbations, and immunomodulatory interventions for the man-