

treatment modalities used per patient was 2.07 for all patients and 3.23 for inpatients.

Conclusions In our department, polytherapy including non-pharmacological modalities is applied widely across all settings and patient categories. However, psychotropic medication clearly dominates as the most frequently applied treatment.

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

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EW0800

H-index may influence more than methodological variables for publication in high impact psychiatry journals – A systematic review

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Objectives The scientific community assumes that rigorous methodology research is more likely to be published in high impact psychiatry journals (HIJ). We aimed to test which methodological variables could predict publication in HIJ.

Methods We conducted a systematic review of the MEDLINE and EMBASE databases from 2013, January 1st to 2015, June 15th. Inclusion criteria were studies that were RCTs whose at least one arm of the study should be fluoxetine regarding adult patients (>18 years old) with MDD. We performed logistic regression regarding the number of participants, intention-to-treat analysis, blinding, multicenter study, sample losses, positive result, sponsorship of pharmacy's industry, and h-index of the last author. A HIJ was considered if journal impact factor was above the median or 3rd quartile of our sample.

Results Forty-two studies were considered for the final analysis. The results of the univariate logistic regression found no differences between HIJ and low impact psychiatry journals for all methodological variables, except the h-index of the last author. By considering HIJ when impact factor was above the mean, h-index had an odds ratio = 1.09 (1.01–1.17), $P=0.02$; considering HIJ when impact factor was above the 3rd quartile, h-index had an odds ratio = 1.07 (1.01–1.14), $P=0.02$.

Discussion Our results indicate that the author productivity may be a relevant predictor for publication in a HIJ in the psychiatry/psychology field. Our study proposes that journals focus on identifying what are the relevant criteria for publication approval in the peer-review process.

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

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EW0801

Psychoeducational family intervention for people with eating disorders: Rationale and development

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Introduction Family members of patients with EDs report high levels of burden, psychological distress and the need to receive information on the disease of their ill relative. There is the need to provide family members and patients with psychoeducational family intervention in order to satisfy their care needs.

Objective To develop a new psychoeducational approach for patients with Eating Disorders (EDs) and their relatives according to the Falloon model.

Aims (1) To develop a family psychoeducational intervention for patients with EDs. (2) To implement the experimental intervention in the clinical routine care. (3) To evaluate efficacy of the approach in terms of reduction of family burden and improvement of relatives' coping strategies.

Results The Department of Psychiatry of the University of Naples SUN has developed a new psychoeducational family intervention for patients with EDs and their family members. The intervention consists of 6 sessions, scheduled weekly. The sessions deal with several topics such as information on EDs (e.g., causes, symptoms, clinical characteristics), communication skills (e.g., how to express an unpleasant feeling) and problem solving skills. The intervention is led by trained mental health professionals, such as psychiatrists, psychologists or rehabilitation technicians.

Discussion This is the first example of psychoeducational intervention for families of patients with EDs developing according to the Falloon approach.

Conclusions Family intervention represents an essential tool to provide to patients with EDs and their family members in order to promote a global recovery.

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

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EW0802

Impact of communication on family satisfaction and anxiety in critical care

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Objective The objectives of this study were to explore the impact of a communication course for doctors on family satisfaction and anxiety in an Australasian ICU and to elucidate the determinants of family satisfaction and anxiety.

Design Prospective observational study. Pre- and post-study design.

Participants One hundred and three consecutive family members of patients staying in the ICU for more than 48 hours were identified. Eighty-six subjects were evaluated and analysed.

Methods Ten-point Likert scale (FS-ICU Questionnaire) used to measure satisfaction. Hospital Anxiety and Depression Scale was used to measure anxiety. Study performed over a 12-week period (9 weeks pre- and 3 weeks post-course) in a 34-bed intensive care unit before and after a communication course for junior medical officers.

Results Fifty-six subjects were approached for the purpose of this study. Forty-three family members were included, 40 of patients who survived, and 3 whose relative died in ICU. Overall family satisfaction was high (mean scores 9.44 ± 0.91). Post-course, 47 subjects were approached for the purpose of this study and 43 family members consented to participate. Overall family satisfaction was high (mean scores 9.84 ± 0.97). There was a statistically significant difference in the frequency of doctors' communication before and after the course ($P < 0.01$) and anxiety levels ($P = 0.0001$)

Conclusion The majority of families are happy with their care in the ICU. A communication course aimed at junior medical officers was effective in improving satisfaction and reducing anxiety among family members.