

Results A total of 175 patients was randomized. At 3-month follow-up, patients randomized to intervention reported more days abstinent and less drug use severity than patients randomized to treatment as usual. In addition, patients randomized to intervention were at lower risk of dropout after intervention. In addition, patients randomized to intervention were more likely to report having received help for antisocial personality disorder at follow-up interviews.

Conclusions A brief psychoeducational intervention may improve outcomes for outpatients with antisocial personality disorder.

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

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0006

Childhood parental childrearing differently influences on adulthood fears, agoraphobia and navigation strategy selection in females and males

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Introduction Using self-report assessment methods, the present study examined affective factors that influenced the gender specific use of a survey-based orientation strategy and landmark-based route-finding strategy in an unfamiliar environment. First, we analyzed the role of early navigation experiences and the influence of early parental attachment (emotional warmth, overprotection and rejection) on way finding strategy. Second, the study analyzed the intercorrelations between way finding strategies and fear-related avoidance behavior and anxiousness.

Methods Three hundred and sixteen male and female students were recruited in a study to analyze the relationships between navigation strategies, fears, early parental childrearing behavior and navigation experiences. We proposed that use of navigation strategy depends on not only the physical features of the current environment and the participants' gender, but also fears of closed and opened spaces and types of perceived parental childrearing behavior.

Results We found that when exploring strange places, females used a route-finding strategy in contrast to males who used an orientation strategy for exploring a strange environment. Fear enhanced the preference for a route-finding strategy in both females and males. A route-finding strategy was associated with agoraphobic scores in females and with social fears in males. Perceived rejection from father and emotional warmth from mother together induces usage of route-finding navigation strategy.

Conclusion The family background influence on the capability to have personal experiences in unfamiliar environment and to cope with fears and behavioral avoidance in strange opened and closed places.

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0007

Reasons for acute psychiatric admissions and psychological interventions for patients with borderline personality disorder

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Introduction NICE guidelines advise to consider admission for patients with borderline personality disorder (BPD) for the management of crises involving significant risk to self or others. Furthermore, to consider structured psychological interventions of greater than three months' duration and twice-weekly sessions according to patients' needs and wishes.

Objectives We aimed to assess reasons for admission and access to psychological interventions in an acute inpatient BPD population.

Methods Case notes of patients with a diagnosis of BPD (ICD-10 F60.3 and F60.31), discharged from four acute general adult wards in Sheffield during a period of twelve months were studied retrospectively, using a structured questionnaire based on BPD NICE guidance.

Results Of the 83 identified BPD patients, seventy-eight percent were female and 82% between 16–45 years old. Eleven patients had four or more admissions. Eighty percent reported suicidal ideation at admission, with 50% having acted on it (70% by overdose, 50% cutting, 10% hanging). Of this cohort, 58% reported they intended to die. Psychosocial factors at admission were identified in 59 cases, including relationship breakdown (47.5%), alcohol/drug use (30.5%) and accommodation issues (17%). Disturbed/aggressive behaviour was documented in 27.1% of these cases. Sixty-eight percent of patients had psychology input in the 5 years preadmission: 38% (21 patients) received structured therapy, whilst 62% received only one assessment or advise to teams.

Conclusions Patients were mainly admitted for risk management. A high proportion received unstructured psychological interventions. Services offering structured psychological interventions should be supported, as hospitalisations only temporarily address BPD patients' suicidality and psychosocial difficulties.

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0008

Assessing the role of weight suppression (WS) and weight loss rate (WLR) in eating disorders

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Introduction and aims In this study, we aim to assess the role of weight suppression (WS) in eating disorders, not only from a quantitative point of view but also assessing the speed of the weight loss by using a new parameter: the weight loss rate (WLR). We analysed the role of these two indexes in different eating disorders domains, considering both eating behaviours and outcome profiles.

Methods The sample consisted of 414 patients, including 62 with AN binge purge subtype (ANBP), 146 with AN restrictive subtype (ANR) and 206 with bulimia nervosa (BN). Data about response to treatment were available for a subsample of 201 patients. A cross-sectional design was used for the clinical symptoms detected during the initial assessment and a longitudinal design was adopted for the response to treatment analysis.

Results No significant relationship emerged between both WS and WLR and variables collected at baseline assessment. We

observed, on the contrary, a significant association between WS and weight gain at the end of treatment. High WLR predicted remission of binge eating and compensatory behavior in BN patients. We further analyzed our data to identify threshold values of both WS and WLR of clinical utility.

Conclusions The role of WS and WLR as predictive factors in the outcome of eating disorders is of great interest and these initial results remark the usefulness of collecting these data during the initial assessment in order to plan a tailored therapeutic intervention.

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0009

Interaction between oxytocin gene variants and perceived parenting in relation to social anxiety in adolescents: Evidence for differential susceptibility effects

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Introduction Adolescence is a period of increasing demands in independent social functioning where parenting style may have an impact on social anxiety. A context-dependent effect of oxytocin on human social behavior has been suggested, however research on the gene coding for oxytocin (OXT) has mostly been reported without considering contextual factors.

Aim This study investigated interactions between parenting style and polymorphic variations in the OXT gene in association with social anxiety symptoms in a community sample of adolescents.

Methods The study group consisted of 1359 adolescents. Two single nucleotide polymorphisms located near OXT, rs4813625 and rs2770378, were genotyped. Social anxiety and perceived parenting style were assessed by behavioral questionnaires.

Results Significant joint effects in line with the differential susceptibility framework were observed for rs4813625 with parenting style. The levels of social anxiety among C allele carriers were conditional on the level of supportive parenting style whereas homozygote G carriers' levels of social anxiety were unaffected by supportive parenting style. The nature of the interactions between rs2770378 and parenting style was in line with the diatheses-stress model. However, associations of rs2770378 and parenting style with social anxiety became nonsignificant in nonlinear models.

Conclusions The study provides preliminary evidence for a modifying effect of supportive parenting style on the relationship between rs4813625 and social anxiety symptoms in adolescents, independent of sex. The findings may be interpreted from the perspective of the social salience hypotheses of oxytocin, with rs4813625 affecting social anxiety levels along a perceived unsafe-safe social context dimension.

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0010

An investigation of the coupling of temperament traits with major depression

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A diversity of neurochemical hypotheses related to major depression (MD) suggests that further investigation is needed for uncovering the neurophysiological nature of MD. Since both temperament and mental illness have been linked to varying degrees of the same neurotransmitter imbalances in neurophysiological systems of behavioral regulation, the analysis of temperament traits as weak forms of neurochemical imbalances might give new insights into symptoms and nature of MD. This study analyzed the predictions of the opioid receptor hypothesis within the neurochemical model of functional ensemble of temperament proposing that a dysregulation of the opioid receptors acting on monoaminergic systems gives rise to the symptoms of major depression (MD). The study investigated the coupling of sex, age and temperament traits with MD across four age groups (17–24, 25–45, 46–65, 66–85) by reviewing the records of testing in 423 patients and volunteers with (210) and without (213) the MD. The records included testing with the personality assessment inventory, structure of temperament questionnaire, structured clinical interview and other diagnostic measures. In line with the hypothesis, patients with MD had significantly lower physical endurance, social-verbal endurance, mental endurance, plasticity, physical tempo, sensation seeking and self-confidence, and higher impulsivity and neuroticism than non-depressed individuals. Other sex- and age-related effects are reported. The results suggest that new versions of the DSM should consider an increase of impulsivity and a decrease in plasticity of behavior as criteria symptoms of MD.

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0011

An investigation of the coupling of temperament traits with anxiety

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Temperament traits and anxiety have been linked to varying degrees of neurotransmitter imbalances in neurophysiological systems of regulating behaviour. The diversity of neurotransmitters implicated in anxiety symptoms raises questions as to whether the multiple neurotransmitter systems secondarily express dysfunction in a higher-level system, which modulates their activity. This study analyzed the predictions of the neurochemical functional ensemble of temperament (FET) model that proposes that a dysregulation of the opioid receptors acting on monoaminergic and GABA systems gives rise to the symptoms of GAD. The study investigated the coupling of sex, age and temperament traits with generalized anxiety disorder (GAD) across three age groups