

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.865>

#### EV0536

### The impact of the economic crisis on the use of psychotropic medication in Portugal: Preliminary results of the national mental health survey follow-up

M. Silva\*, A. Antunes, D. Frasilho, G. Cardoso, J.M. Caldas-de-Almeida

Nova Medical School, Faculdade de Ciências Médicas UNL, Chronic Disease Research Center Cedoc, Lisboa, Portugal

\* Corresponding author.

*Introduction* Economic crises can contribute to a worsening of mental health problems and, consequently, to a possible increase of the use of psychotropic medication.

*Objectives* To assess the use of psychotropic medication in Portugal before and after the onset of the economic crisis, and to better understand the impact of the economic crisis in this highly hit country.

*Methods* This 2015 follow-up epidemiological study re-interviewed a probability sub-sample of respondents to the 2008 national mental health survey, the first nationally representative study of psychiatric morbidity and treatment patterns in Portugal. Socio-demographic and clinical variables were assessed using a structured interview in 2008 ( $n=2060$ ) and 2015 ( $n=911$ ). All participants were questioned about the last 12 month use of psychotropic medication for mental health problems. Descriptive analysis was conducted to assess the use of psychotropic medication by group and gender in 2008 and 2015.

*Results* Between 2008 and 2015 there was an overall increase in the use of the main groups of psychotropic medication (22.5% to 28.6%), with a particularly relevant increase in the consumption of anti-depressants and anxiolytics. The use of psychotropic medication was higher among women in 2008 and 2015 (31.1% and 36.7%) compared to men. However, the increase in consumption was more relevant in men (13.3% to 20.0%), particularly in relation to anxiolytics (6.0% to 11.6%).

*Conclusions* The economic crisis was associated with a substantial increase of psychotropic medication's use in Portugal, consistent with the increased prevalence of mental health problems that this study also found.

*Funding* EEA Grants Programa Iniciativas em Saúde Pública.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.866>

#### EV0537

### Services utilization for mental health problems in Portugal during the economic crisis: Preliminary results of the national mental health survey follow-up

M. Silva<sup>1,\*</sup>, A. Antunes<sup>2</sup>, D. Frasilho<sup>2</sup>, G. Cardoso<sup>2</sup>, J.M. Caldas-de-Almeida<sup>2</sup>

<sup>1</sup> Nova Medical School, Faculdade de Ciências Médicas, Chronic Disease Research Center Cedoc, Lisboa, Portugal

<sup>2</sup> Nova Medical School, Faculdade de Ciências Médicas UNL, Chronic Disease Research Center Cedoc, Lisboa, Portugal

\* Corresponding author.

*Introduction* During economic crises additional mental health risks emerge and social inequalities in health can widen. In order to

ensure universal coverage of mental health care and to reduce the impact of the crisis, it is crucial to assess the needs of the population to be able to reorganize mental health care accordingly.

*Objectives* To analyse the use of services for mental health problems in Portugal during the economic crisis.

*Methods* In this follow-up epidemiological study, a probability sub-sample of respondents to the 2008 national mental health survey ( $n=911$ ) was re-interviewed in 2015. Socio-demographic variables and treatment patterns were assessed using a structured interview, and psychological distress was measured using the Kessler-10 Scale. Descriptive analysis was conducted to characterize the use of services for mental health problems.

*Results* In total, 27.9% of the respondents sought treatment for mental health problems in the previous 5 years, and GPs were the most contacted professionals. Only 57.7% ( $n=119$ ) of the respondents with moderate or severe psychological distress ( $n=197$ ) reported recognizing they needed treatment. Among people with moderate or severe psychological distress who recognized their need for treatment, most received treatment (80.5%,  $n=105$ ), which was minimally adequate for 74.4% ( $n=81$ ). Low perceived need and structural barriers were the main obstacles for access to care.

*Conclusions* Under-treatment, low continuity of care and low adequacy of treatment are problems that the Portuguese health system must address in order to meet the mental health challenges of the economic crisis.

*Funding* EEA Grants: Programa Iniciativas em Saúde Pública.

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

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.867>

#### EV0538

### A biopsychosocial look on the violence in Colombia. Understanding violence to understand the role of psychiatrist in the post-peace agreement era

M.J. Suelo

Colombian Institute of nervous system, Clinical Montserrat, Bogota, Colombia

*Introduction* The armed Colombian conflict is one of the bloodiest and most extensive in the contemporary history of Latin America, with multiple factors and causes implicated.

*Objectives* Determine the factors involved in the emergence of Colombian political violence from neurobiological, anthropological, social and psychoanalytic models.

*Methods* We revised the report Basta Ya! of The National Center for Historical Memory, which approximates the casualties and victims of the armed conflict in Colombia. In addition, we conducted a rigorous review of current scientific and clinical literature on the neurobiology of violent behavior, social psychiatry and psychoanalytic papers about war, death, and survival instincts.

*Results* Violent behavior can be explained by the neurobiological model of aggressive response as an imbalance between the prefrontal cortex and the limbic system. There is evidence to support a geographically-based violence in Colombia with a fragmentation of the territory, the State, and the Colombian identity. Moreover, we found the psychological component raised by Freud and in psychoanalysis, about war, and life and death instinct, as antagonistic manifestations of life-present in acts of violence.

*Conclusions* The violence from the armed Colombian conflict has been one of the longest in modern history, determining its causality has been complex. However, understanding violence multifactorially allows us to improve social psychiatry and our role as clinicians in this new post-agreement era, in order to better estab-