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(15%). 25% of the perpetrators didn't have a psychiatric diagnosis and 70% had a history of self-harm and suicidal ideation. Substance use was prevalent (60%). Half of the homicides involved children. **Conclusions:** This report describes the demographic and mental health characteristics of a sample of perpetrators of domestic homicides. Further research is needed into the patterns of mental health service use by DVA perpetrators in order to improve identification and risk management.

Conflict of interest: No significant relationships.

EPP0691

Elderly criminal patients in Razi psychiatric hospital of tunis

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Introduction: Criminality has become of increasing concern in the practice of psychiatry. However, violence among elderly psychiatric patients is an underestimated and understudied phenomenon.

Objectives: The aim of the study is to identify differences in the socio-demographic, clinical and criminological profiles between elderly criminals under treatment for psychiatric disorders and those not known to have mental disorders prior to the criminal offense in Tunisia.

Methods: We present a retrospective study on twenty male criminal mental patients, aged sixty years or older, who were hospitalized in the Forensic Psychiatry Department of Razi Hospital during 18 years, following a dismissal for insanity under Article 38 of the Penal Code and Article 29 of Law 92/83 on Mental Health.

Results: Prevalence was higher among elderly criminals without a known psychiatric history (2.42% versus 1.98%). The average age was roughly the same, around 73 years old. Neurological and cardiovascular histories were the most common in both groups. The criminal act was indicative of dementia in 8 cases. Criminal history was more frequent in elderly patients with a personal psychiatric history (55.5% versus 18.2%). Patients whose act was revelatory of their mental disorder committed more violent crimes (63.7% versus 44.4%) using blunt objects (71.4% versus 0%). The victim most often belonged to the aggressor's family, particularly the spouse (87.5%).

Conclusions: Screening for criminal risk factors in the elderly, early diagnosis of mental disorders and a comprehensive therapeutic project are necessary to prevent the risk of violent behaviour.

Keywords: Elderly; forensic psychiatry; criminality

EPP0692

Tidier. e-sport; a recovery oriented intervention in forensic psychiatry.

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Introduction: Recently video gaming, have attracted considerable attention for its possible beneficial therapeutic effects, the possibility for testing behavior in safe artificial environments and as a tool for professionals and patients to build specific competencies for the everyday life. Also, a substantial amount of research suggests that videogaming might improve the participants social and cognitive skills and emotional regulation. There is little or no evidence that videogaming increases long term aggression or leads to physical aggression. At a medium secure forensic psychiatric in-patient ward, the patients and staff engage in weekly E – Sport sessions (primarily counterstrike) to further the recovery process.

Objectives: To provide a standardized description of how E-sport is organized and used in the recovery process among forensic psychiatric patients.

Methods: The Template for Intervention Description and Replication (TIDieR) checklist and guide is widely used to in health research to describe interventions in clinical trials and other health research contexts. By use of TIDieR we describe a newly developed E-sport intervention, in which staff members and patients in a medium secure forensic psychiatric ward engage in weekly E-Sport sessions (primarily counterstrike) to improve patient–staff relationship.

Results: The E-sport intervention is detailed by use of the 12 TIDieR items and practical experiences and insights will be described.

Conclusions: This standardized and detailed description of how is used in a recovery-oriented process in forensic psychiatry can be used for future studies that wishes to implement the intervention or for research studies replicating the treatment.

Conflict of interest: No significant relationships.

EPP0693

Factors related to the dangerousness of psychiatric inpatients

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Introduction: Mental illness may explain some acting outs, but it does not necessarily lead to a dangerous attitude.

Objectives: Describe the socio-demographic, clinical and therapeutic characteristics of patients considered dangerous and to identify the determinants of psychiatric dangerousness.

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S380 **E-Poster Presentation**

Methods: We carried out a descriptive and analytical crosssectional study during six months including patients hospitalized in the psychiatric department at the University Hospital of Mahdia. The data was collected using a 47-item pre-established questionnaire. The assessment of general psychopathology was carried out using the Brief Psychiatric Rating Scale (BPRS) and that of dangerousness using the Historical Clinical Risk-20 scale (HCR-20).

Results: We have collected 143 patients. The average age was 35 years. The majority of patients were single (70.6%). More than half of the population had addictive behaviors (60.1%). Personal psychiatric and criminal histories were present in 81.1% and 11.9% of cases respectively. More than three-quarters of patients (81.8%) were hospitalized without their consent. Hetero-aggressiveness was the main reason for hospitalization (67.8%). The diagnosis was schizophrenia and bipolar disorder type 2 in 21% of cases for each. The evaluation of psychiatric dangerousness by the HCR-20 scale revealed a mean score of 20.6 with an HCR-20 > 20 in 58.7% of cases indicating a high risk of violence. Factors contributing to violent or criminal behavior in psychiatric inpatients were marital status, presence of personal psychiatric history, presence of criminal history and hospitalization modalities.

Conclusions: The results of our study were generally consistent with the data in the literature.

Keywords: dangerousness; factors; psychiatric; inpatients

Psychiatric treatment of mentally ill persons in custody - legal, medical and ethical issues

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Introduction: The most recent legal regulations in the Republic of Croatia govern the process of criminal procedure for persons in pre-trial detention who have a temporary mental disturbance for which psychiatric treatment is needed. The Prison Director is in this case obliged to seek psychiatric treatment for such persons who are then hospitalized in a psychiatric institution instead of a prison hospital or prison that meets the requirements prescribed by law for the accommodation of pre-trial detainees. Forensic departments of the five psychiatric hospitals in Croatia accept mentally incapable persons subject to court order, but not persons in custody, i.e. in pre-trial detention. Pre-trial detention is a measure imposed in the previous proceedings to ensure that the person to whom the measure is imposed is present during the pre-trial stage and the hearing stage, i.e. after the final judgment has been rendered until it becomes final. According to Croatian laws, a person who has been sentenced to pre-trial detention and who has mental disorders is entitled to a range of rights that must be respected, and at the same time, there are strict restrictions in exercising those same rights for the reason of sentencing to pre-trial detention.

Objectives: The article points to several problems that have arisen in practice due to the under-regulation of pre-trial detention measures. Methods: Perspective, opinion, and commentary article.

Results: Perspective, opinion, and commentary article.

Conclusions: The authors discuss legal, medical, and ethical issues, but also the financial framework of such a process.

Keywords: forensic psychiatry; pre-trial detention; Mental Health Act; hospital mental health services

EPP0695

A descriptive study of fratricide in tunisia

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Introduction: Violence between brothers and / or sisters is one of the most important forms of violence within families. To understand homicides between them, the hypothesis of rivalry has been put forward. But how is it really in reality?

Objectives: To construct both the clinical and medicolegal profile of perpetrators of fratricide and sororicide.

Methods: This is a retrospective study of 12 cases of fratricide, which were examined in the context of criminal psychiatric expertise in the psychiatry department of Hedi Chaker University Hospital in Sfax (Tunisia), between January 2002 and December 2018.

Results: The mean age of offenders was 31.9 years; they were all male. Eight fratricide perpetrators were unmarried and had an irregular occupation. They had a psychiatric follow-up prior to homicide in 5 cases. Previous criminal records were noted in one third of the cases. Three perpetrators of fratricide were using psychoactive substances. History of violence against the victim was presented in 7/12 of cases, and the victim was younger than the perpetrator in 5 cases. Aggression was premeditated in 4 cases. The knife was the most used weapon (11/12). Seven offenders suffered from a major mental illness. The most common diagnosis was schizophrenia (6/12). The experts had concluded that 8 cases were in a state of insanity at the time of the offense.

Conclusions: Our data indicates that fratricides are lack preparation and most often preceded by violence. It seems to be important to do other researches to assess psychopathology and assess risk factors for fratricide.

Keywords: fratricide; violence; perpetrators of fratricide and sororicide

EPP0696

Personality variables among sexual offenders with and without diagnosis of paraphilic disorders

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Introduction: Sexual offenders are classified in terms of the act they

have committed, diagnosis of sexual preference disorder (paraphilic disorder), and the potential motives behind the act. The typology that is often used in forensic-sexological practice is the division into preferential and non-preferential perpetrators, i.e. perpetrators showing or not showing a sexual preference disorder.