EPP0184

Prevalence and severity of Anxiety and Depression among Primary caregivers with correlation to their Psychiatric outpatients diagnostic entity according to ICD-10

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Introduction: The impact of psychiatric patients on their primary caregivers is important. Outcome of different psychiatric disorders may also depends open the mental health of their caregivers. Therefore assessment of the prevalence and severity of Anxiety and depressive disorders may help to improve the wellbeing the caregivers as well as their sufferers.
Objectives: To assess the prevalence and severity of Anxiety and Depression among primary caregivers of psychiatric outpatients. To correlate the psychiatric diagnosis according to ICD-10, of the patients with their caregivers anxiety and depression.
Methods: The study was carried out in private Psychiatric Hospital with primary caregivers of psychiatric outpatients. One hundred and eighty consecutive and consenting participants were selected. Besides, applying semi-structured preform, designed for this purpose, anxiety and depression levels of these individuals were assessed using the locally validated version of HOSPITAL ANXIETY AND DEPRESSION SCALE (HADS). For the diagnostic categorization ICD-10 of WHO was used. Data was tabulated and analyzed using SPPS 17 version.
Results: Among the 180 caregivers, between the age range of 18 to 92 years, 44% were found to be suffering from anxiety, and 68.56% were suffering from depressive disorders. Anxiety and Depression (combined) existed among 74.85% of the caregivers of psychiatric outpatients. Frequency of depressive disorder was found higher among the brothers (19.08%) as caregivers, followed by mother (18.32%), relatives (16.03%), and in spouses (15.26%).
Conclusions: Caregivers of psychiatric patients, especially females, are more vulnerable to anxiety and depression irrespective of the type of their patients' illness.

Disclosure: No significant relationships.
Keywords: Anxiety; Depression; Caregivers; Outpatients

EPP0185

Anxiety in Multiple Sclerosis Patients: A Preliminary Examination of the Effect of Fatigue, Physical Disability, and Low Self-Compassionate Attitude

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Introduction: Multiple Sclerosis (MS) is a demyelinating, neuro-degenerative, and immune-mediated disease that affects the central nervous system. Usually co-occurs with difficulties in emotional regulation and psychopathology. Anxiety is one of the most common psychiatric manifestations in patients with MS. Nonetheless, empirical evidences on the joint predictive effect of MS clinical conditions and emotion regulation processes on the development of anxiety in MS patients are scarce.
Objectives: This preliminary study aimed to explore whether fatigue, physical disability (MS clinical conditions) and a low compassionate attitude (maladaptive emotion regulation process based on self-judgment, over-identification, and isolation) predict anxiety symptoms in MS patients.
Methods: A convenience sample of 107 patients with MS diagnosis and without other neurological disorders was used in this cross-sectional study. Participants completed the Anxiety Subscale of the Depression, Anxiety and Stress Scales-21, the Analogic Fatigue Scale, the World Health Organization Disability Assessment Schedule, and the Self-judgment, Isolation and Over-identification Subscales of the Self-Compassion Scale.
Results: All potential predictors showed significant correlations with anxiety symptoms and predicted this symptomatology through simple linear regressions. Therefore, they were selected as covariates of the multiple linear regression model, which explained 32% of the variance of anxiety symptoms. This model revealed that fatigue, physical disability, and low compassionate attitude are significant predictors.
Conclusions: The results support the relevance of psychological interventions for MS patients to implement effective strategies to regulate anxiety associated with fatigue and physical disability. Helping patients to adopt a more compassionate attitude toward the self can reduce their anxiety.

Disclosure: No significant relationships.
Keywords: multiple sclerosis; anxiety symptoms; predictive model

EPP0186

Comorbidities and treatment of somatoform disorders before switching to DSM-5 and ICD-11: what to consider

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Introduction: Somatoform disorders, previously diagnosed according to DSM-IV-TR and ICD-10, are shifting towards somatic symptom disorder in DSM-V and bodily distress disorder in ICD-11.
Objectives: Before using the current criteria, because the new diagnostic entities can identify a larger pool of patients with various physical complaints and diagnoses, it is essential to consider the