

**Methods** We describe the case of a 19-year-old male who was hospitalized after a suicide attempt in April 2015. He had been diagnosed of different psychiatric disorders such as mixed anxiety-depressive disorder, adjustment disorder and probable borderline personality disorder. During his stay at the hospital, we observed that he had schizoid personality traits. In the initial anamnesis, he denied ever having psychotic symptoms, but a few days later he admitted that the previous year he suffered through a period of brief self-limiting psychotic symptoms.

**Results** Prophylactic treatment was started with oral aripiprazole 15 mg/day, which was well tolerated by the patient. He has been free of psychotic symptoms for the last 17 months (from April 2015 to September 2016). No relevant side effects were detected.

**Conclusions** Oral aripiprazole 15 mg/day can be a good therapeutic option in patients at ultra-high risk of developing a psychotic episode.

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

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#### EV1006

### Relationship between affective temperaments, traits of schizotypal Personality and early diagnosis in a sample of Italian healthy subjects

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**Introduction** Akiskal et al. [1] examined the relationship between affective temperaments and characteristics of schizotypal personality disorder. Schizotypal personality disorder is becoming increasingly important both in itself as a significant personality disorder and as a condition that can provide important insights into the origins of schizophrenia. Perceptual and interpersonal cognitive disorders, behavior and disorganized speech do the schizotypal personality disorder a kind of mild form of schizophrenia, a premorbid or prodromal phase of this serious disorder.

**Aims** To analyze, in an Italian sample of healthy subjects, the correlation between affective temperaments and schizotypal traits.

**Methods** We recruited 173 healthy subjects aged between 18 and 65 years who have completed the following tests:

- BIS-11;
- SPQ;
- SDS;
- SAS;
- HCL-32;
- TEMPS-A.

**Results** At linear regression analysis between TEMPS-A scores and other rating scales are observed highly significant associations between increasing scores of cyclothymic and depressive temperament, subjective anxiety and depression with scores pertaining to the schizotypal personality disorder.

**Conclusions** Clinically, a better understanding of the mechanisms that lead to a schizotypal personality could lead to the development of effective preventive and curative treatments in an early stage of symptoms in addition to the identification of subgroups at risk for the development of schizophrenic pathology.

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

#### Reference

- [1] Morvan Y, Tibaoui F, Bourdel M-C, L o H, Akiskal KK, Akiskal HS, et al. Confirmation of the factorial structure of temperamental autoquestionnaire TEMPS-A in non-clinical young adults and relation to current state of anxiety, depression and to schizotypal traits. *J Affect Disord* 2011;131:37–44.

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#### EV1007

### Forgiveness and armed conflict in a Colombian Caribbean region: Differences between genders

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The forgiveness within the framework of social-political conflict is a factor that affects the coexistence and welfare. In the Colombian Caribbean, there are a significant number of people who have been victims of land dispossession and/or forced displacement.

The aim of this study is to compare the forgiveness ability between men and women who have been displaced and are in the process of lands restitutions. Displaced and in restitutions process people were participated ( $n = 38$ ), which 20 of them were women and 18 were men (Mean = 57.81; SD = 13.86). The CAPER Scale, was administered. A cross sectional and comparative design was carried out. The comparison was performed using a  $t$ -test for independent samples (Table 1).

**Conclusions** A greater tendency was observed in women for forgiveness himself, nonetheless a statistically significant gender difference was not identified. It was a greater tendency in men toward forgiveness to others, however there are no statistical differences between the two groups. In forgiveness situations, a similar trend is evident in gender. As for beliefs, it was observed that men scored higher, this allowed statistically significant differences were observed [ $F(1, 38) = 6.271$ ;  $P > 0.05$ ].

Table 1

Means and SD – Capser Scale	1. Women; 2. Men	<i>n</i>	Mean	SD	Standard error of mean
Forgiveness himself	1	20	28.00	4.899	1.095
	2	18	26.00	4.229	0.997
Forgiveness to others	1	20	28.35	5.402	1.208
	2	18	29.11	4.129	0.973
Forgiveness situations	1	20	28.00	5.016	1.122
	2	18	28.00	3.757	0.886
Beliefs	1	20	11.80	2.821	0.631
	2	18	13.33	1.188	0.280

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#### EV1008

### Psychiatric Risk Assessment Scale (PRAS)

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**Introduction** The aim of psychiatry is the prediction of risks.

**Objectives** Creation of the Psychiatric Risk Assessment Scale (PRAS) (Table 1).

**Aims** To assess psychiatric inpatients for risk to self and others. **Methods** The PRAS comprises 20 risk items that rate five probabilities of occurrence: 0% (nil), 25% (low), 50% (moderate), 75% (high) and 100% (severe). Cut-off score indicates “moderate” risk = 50. The mathematical formulas for the risks are as follows: