Objectives: The aim of the study was to assess the relation between the internet usage for communication and the quality of the social adaptation in men with mental disorders.

Methods: 82 male patients with schizophrenia spectrum disorder (F20) were involved into the study (mean age 22±4.3). Methods: SCL-90R, "social circle" inventory (Susan L., Phillips), semi-structured interview of "internet usage" ("communicative internet usage" consists of communication in on-line games, use of the internet social networks for communication, use the internet to find new friends, maintaining relationships with relatives, friends, colleagues.

Results: Two groups of patients were considered: those who use internet for communicative purposes (N=61) and those who do not (N=21).According to the analysis (Mann-Witney U-test, hereinafter significance level *p<0.05), those who use the internet for communication have lower levels of psychotic symptoms (PSY) (U=446*), lower levels of "depression" (U=453*). Those who use the internet for communication have more people in social circle to spend free time (U=910,5*), having the same occupation (U=860*), having the same interests (U=867,5*) and sharing the same values (U=873*).They have more friends (U=804*), peers (U=814*), more women among friends (U=793*), more people to provide instrumental support (U=761,5*).

Conclusions: Patients, who use the internet for communications, have a lower levels of psychopathological symptoms and higher quality of social adaptation. This indicates a possible potential of the internet for mental health rehabilitation.

Disclosure: No significant relationships.
Keywords: Internet; social adaptation; communication; Mental disorders

EPV0579

Predictors of psychosocial adaptation and mental wellbeing among people with chronic illness and disabilities in a chinese context

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Introduction: The process of adjustment to disability and illness among people with chronic illness and disabilities (CID) impacts on motivation for rehabilitation illness self-management, and psychological well-being. It involves a complex interplay of biopsychosocial factors, and was seldom examined in the Chinese context.

Objectives: Identify the predictors of mental well-being of people with from a set of variables including illness and social support, functional abilities, coping strategies, resilience. Examine how these factors interact in determining psychosocial adaptation and mental well-being by structural equations modelling (SEM).

Methods: We conducted a survey of people with CID, who were recruited from community-rehabilitation settings and self-help groups (N = 244). The research questionnaire collected basic demographic information, illness-related variables (e.g. pain, fatigue, functional limitations), and RIDI), social support, measures of resilience, coping, psychosocial ad as predictors, and mental well-being.

Results: Of General Linear Model (GLM) revealed that males have better adaptation than females. Resilience, social coping, & active problem solving are significant predictors of adaptation (Table 1), while age, breathing, pain, resilience, avoidance coping, are predictors of maladaptation (Table 2). A SEM was tested to examine the interaction among the predictors and outcome of adaptation and mental well-being (Figure 1), and the model fit was fair (CFI = 0.89; RMSEA = 0.09)

Conclusions: The results indicated that there are gender differences in adaptation. While all the hypothesized groups of variables contributed to mental well-being of people with CID. Resilience, illness variables, and some forms of coping are closely linked to adaptation and maladaptation.

Disclosure: No significant relationships.
Keywords: mental well-being; Chronic illness and disability; Psychosocial adaptation; Chinese

EPV0580

Translation and validation of the reaction to impairment and disability inventory in a chinese ccontext

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Introduction: People with chronic illness and disabilities (CID) often need to adjust to changes in self-concept, cope with their grief from the loss of functional abilities, and to "live with the illness". Emotional adjustment to disabilities is a major challenge in rehabilitation, but there is no validated Chinese instrument for assessing psychosocial adaptation of people with CID.

Objectives: This study translated the Reaction to Impairment and Disability Inventory (RIDI) into Chinese and validated the Chinese version (C-RIDI), for assessing emotional adjustment in people with CID. We examined the factor structure, internal consistency, convergent validity, and criterion-related validity of the C-RIDI.

Methods: We conducted a survey of people with CID who were recruited from community-rehabilitation settings and self-help groups (n = 244). The research questionnaire collected demographic information, illness-related variables, the C-RIDI, and measures of resilience and well-being.

Results: The C-RIDI has good content validity and no major changes to the translated items were needed for the use with Chinese population. For factor structure, we replicated the results of Livneh, Martz, & Boder (2006). The C-RIDI has two second-order factors of adaptive and non-adaptive scales, which interact with the two denial subscales. Internal consistency of the subscales is satisfactory except for the 3-item denial subscales. Correlations of the C-RIDI subscales with illness-related variables, resilience, and

mental well-being are consistent with our hypotheses and provide support for the convergent and criterion-related validity of the scale.

Conclusions: The C-RIDI has satisfactory psychometric properties. The study results support its internal consistency, convergent validity, criterion-related validity, and factorial validity.

Disclosure: No significant relationships.
Keywords: Chronic illness and disability; emotional adjustment; Psychosocial adaptation; Chinese

Research methodology

EPV0582

The use of big data in psychiatry – the role of pharmacy registries

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Introduction: Administrative databases (AD) are repositories of administrative and clinical data related to patient contact episodes with all sorts of health facilities (primary care, hospitals, pharmacies,…).The large number of patients/contact episodes with pharmaceutical facilities available, the systematic and broad register and the fact that AD provides Real-world data are some of the pros in using AD data.
Objectives: To perform a narrative review on the role of Big Data pharmaceutical registries in Mental Health research.
Methods: We conducted a narrative review using MEDLINE and Google Scholar databases in order to analyse current literature regarding the role of BigData pharmaceutical registries in Mental Health Research.
Results: Administrative variables like drug names and prices may be used and linked to other clinical variables such as patients disease, in-hospital mortality, length of stay,(…). The use of electronic medical records may also contribute to systematic surveillance approaches like local or national pharmacovigilance strategies, identification of patients at risk of developing complications and software pop-up warnings related to medication dosage, duplication and lateral effects. The use of Big Data pharmaceutical registries allows to create predictive epidemiological models regarding drugs lateral effects or interactions and may help to perform pharmacovigilance phase 4 clinical trials. Its use may be applied to the optimization of clinical decision, monitoring of drug adverse events, drug cost and administrative monitoring and as surrogate measures of quality care indicators.
Conclusions: Big Data use in pharmaceutical registries allows to collect large and important clinical and administrative data that may be later used in Mental Health care and research.

Disclosure: No significant relationships.
Keywords: Big Data; Psychiatry; Pharmacy; Database

EPV0584

Efficacy of armodafinil on reducing excessive sleepiness in patients with shift work disorder: A systematic review protocol

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Introduction: Previous studies have demonstrated that night-shift work is associated with adverse effects impacting physical and psychological health, including the Shift Work Disorder (SWD). SWD is a circadian rhythm disorder characterized by sleepiness and insomnia, resulting from working a shift other than the traditional daytime-shift. Armodafinil, a modafinil longer-lasting R-isomer, is approved for SWD treatment. Due to its pharmacodynamic profile, it may result in more sustained wakefulness during night-shifts than Modafinil.
Objectives: To conduct a systematic review and meta-analysis of randomized controlled trials (RCTs) comparing the efficacy of Armodafinil vs Modafinil and/or placebo on reducing SWD excessive sleepiness.
Methods: Will follow PRISMA guidelines. A systematic search will be conducted on PubMed, Web of Science, Scopus and Clinical-Trials.gov databases. RCTs comparing Armodafinil with Modafinil and/or Placebo for SWD treatment will be included. No language nor date restrictions will be applied. Outcomes of interest are prespecified as follows: the primary endpoint will be objective sleepiness; secondary endpoints will include subjective sleepiness, adverse effects, awareness, reaction time, memory and cognition. Retrieved studies will be independently screened for eligibility by two reviewers. Disagreements will be solved by consensus or by a third reviewer. Primary studies methodological quality will be assessed and data extracted independently using a standardized extraction-form.
Results: Data will be described and reported as narrative text and summary tables. Heterogeneity of the included studies will be assessed and, if possible, a meta-analysis will be conducted.
Conclusions: It is expected that this systematic review and meta-analysis favours Armodafinil over Modafinil and placebo in the treatment of SWD.

Disclosure: No significant relationships.
Keywords: Armodafinil; Shift Work Disorder; Sleepiness; Sistematic Review

Schizophrenia and other psychotic disorders

EPV0585

Paraphrenia phantastica. A case report

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