

Methods Systematic review of the literature in English (Pubmed). Keywords: “adult ADHD”; “bipolar disorder”; “substance abuse”; “personality disorders”.

Results Adult ADHD has a prevalence in Europe of 3.4% and it seems to appear more frequently in developed countries. In adults, the clinical presentation differs from children. There often are symptoms of impulsivity, attention deficit, restlessness, and emotional dysregulation and risk behavior, causing difficulties in everyday functioning. The coexistence of substance abuse and the similarity between bipolar disorder and personality disorders with ADHD, translate in a difficult diagnosis, especially for patients with mild presentations.

Conclusions So far, the authors conclude that a detailed clinic history plus the validated scales for adult ADHD are the most reliable tools for diagnosis. Neuroimaging and EEG studies do not provide conclusive data to consider them as diagnostic methods.

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

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EV1372

Leganés Psychiatric Hospital in the early twentieth century (1900–1931): An approach to healthcare activity

R. Candela Ramírez^{1,*}, A. Conseglieri Gámez², P. Vázquez de la Torre Escalera¹

¹ Fuenlabrada Hospital, Psychiatry, Fuenlabrada, Madrid, Spain

² Parla Hospital, Psychiatry, Parla, Madrid, Spain

* Corresponding author.

Introduction Leganés Psychiatric Hospital has been the subject of several studies about its institutional history and clinical activity. The first decades of the twentieth century are the less explored years; however, important events for the development and establishment of the discipline of psychiatry happened in Spain during this period.

Objectives/aims To describe the clinical and therapeutic management of inpatients admitted to Leganés National Asylum between 1900 and 1931.

Material and methods This is a retrospective case series study. We reviewed medical records found in the Historical Archives of Psychiatric Institute, Germany ($n = 1043$) of inpatients admitted between 1900 and 1931. We analyzed clinical care variables, mainly related to diagnosis and treatment, of the patients who were admitted during this period ($n = 1043$) with SPSS v21. We consulted bibliography, such as asylum documents and diverse primary and secondary literature.

Results The diagnosis of mania was very common in the early twentieth century. Lypemania nearly disappeared after 1910 and monomania was not observed in any patient. Delusions decreased after 1905. The first patient diagnosed with schizophrenia was admitted on 19th November 1921. From that moment, the use of this term increased significantly. Only 4.4% of patients admitted underwent treatment.

Conclusions We confirmed the predominance of French nosology in the early twentieth century. From 1920, an increase in German nosography was observed. The application of treatments was rare.

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

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Characteristics of inpatients admitted to National Asylum of Leganés in the early twentieth century (1900–1931)

R. Candela Ramírez^{1,*}, P. Vázquez de la Torre Escalera¹, A. Conseglieri Gámez²

¹ Fuenlabrada Hospital, Psychiatry, Fuenlabrada, Madrid, Spain

² Parla Hospital, Psychiatry, Parla, Madrid, Spain

* Corresponding author.

Introduction Leganés Psychiatric Hospital has been the subject of several studies about its institutional history, clinical activity and demography of its institutionalized population. The first decades of the twentieth century are the less explored years; however, important events for the development and establishment of the discipline of psychiatry happened in Spain during this period.

Objectives/aims To describe the sociodemographic and hospitalization characteristics of the patients who were admitted to Leganés National Asylum between 1900 and 1931.

Methods This is a retrospective case series study. We reviewed medical records found in the Historical Archives of Psychiatric Institute Germain ($n = 1043$) of inpatients admitted between 1900 and 1931. We analyzed sociodemographic and hospitalization related variables of medical records with SPSS v21. We consulted bibliography, such as asylum documents and diverse primary and secondary literature.

Results Most inpatients were male, single, with an average age of 38 years, came from home and were admitted as fee-paying boarders. Circa 64% of them remained in the institution until death and the average stay was 7.92 years.

Conclusions Even though the Leganés Asylum was born amidst debate on the asylum model, it did not meet the expectations. Among other reasons, it presented serious architectural deficiencies and was unable to classify inpatients according to the French tradition (agitated, dirty, quiet) or to separate populations, such as minors or criminal inpatients, thus becoming a charity institution asylum instead of a therapeutic mental hospital.

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Cyclic vomiting syndrome

P. Cano Ruiz*, S. Cañas Fraile, A. Gómez Peinado, M.D. Sánchez García

HNSPS, Psiquiatría, Albacete, Spain

* Corresponding author.

Introduction Cyclic vomiting syndrome (SVC) is a functional gastrointestinal disorder characterized by paroxysmal episodes of vomiting, recurrent and cyclical presentation. Although this disorder was first described in children, recently it has increasingly been recognized in adults.

Objective To know the pathogenesis of the syndrome and the optimum approach.

Method Theoretical review and cyclic vomiting syndrome brief statement of a case. This is a man of 51 years for 7 months has repeated episodes of vomiting often than 1 episode for week, with vomiting every 10–15 minutes. The patient is admitted to the neurology department for endless instability and multidirectional nystagmus and right hemispheric deficiency symptoms, with acute renal failure prerenal rehydration and study. While entering data semiotic Wernicke disease are objectified. With replacement therapy meeting evolves favorably at the time of discharge from hospital asymptomatic.

Discussion CVS, in conclusion, is a rare disease in adults whose diagnosis is one of exclusion. The adult presentation usually presents more durable, less frequent episodes. The pathogenesis

remains unknown. The optimal treatment is to establish prophylactic migraine medications like amitriptyline. In the prodromal phase, it could be used ketocorolaco or sumatriptan and in the acute phase, ondansetron or lorazepam. Because of the morbidity associated with CVS, in particular the severity of symptoms, it is necessary to conduct more studies in adults.

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

Further readings

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EV1376

Boderline versus personality

C. Cotta^{1,*}, G. Jesus², V. Vila Nova¹, C. Moreira²

¹ Centro Hospitalar Barreiro, Montijo

² Centro Hospitalar Psiquiátrico de Lisboa

* Corresponding author.

Introduction Latest classifications led to an inflamed debate urging for change or validation in the way personality disorders are classified. The placement in psychiatric classifications of several personality disorders, particularly Borderline Personality Disorder (BPD), is also a matter of discussion.

Objectives and aims The present work aims to question BPDs place in classification alongside with other personality disorders, rather than focusing on the algorithms used to classify it. The authors review updated literature on core features of the disorder collected from online scientific databases.

Results Studies reveal that the stability of the diagnosis of BPD over the longer term is less than what standard general definitions of personality disorders would appear to require. It is a chronic and debilitating syndrome with severe functional and psychosocial impairment that remain relevant when comparing to other personality disorders. Additionally, these measures show further declines over time in spite of improvement in psychopathology, in contrast to what happens with other personality disorders. Several misconceptions may have led to the placement of BPD on former axis II, namely being a direct consequence of trauma and merely explained by environmental factors. However, recent research on heritability shows the contrary and several neurobiological markers suggest it has got a nature of its own.

Conclusion BPD is probably the most studied and validated personality disorder and has substantially greater empirical basis, clinical significance and public health implications, being both enduring and distinct from other personality disorders. We suggest the placement of BPD as major psychiatric disorder in classifications.

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

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Comorbidity of adult ADHD and obsessive-compulsive disorder

A. Duque Domínguez*, N. Echeverría Hernández, M.D.M. Lázaro Redondo, F. de la Torre Brasas, M. Ojalora Navarro, L. Martín Díaz, C. García Montero, A. Mas Villaseñor

Complejo Asistencial de Ávila, Servicio de Psiquiatría, Ávila, Spain

* Corresponding author.

Introduction In prospective and controlled studies followed up until adult age of patients diagnosed with ADHD in their childhood, the most frequent comorbid disorders were major depressive disorder,

personality disorder (borderline and antisocial), substance use disorder and, less frequently, panic disorder and obsessive compulsive disorder.

Objectives We report the case of a male patient aged 60, diagnosed with obsessive-compulsive disorder from his adolescence. His psychopathological progress has become aggravated over the years. Nowadays, he presents an important restlessness, which has led him to social isolation and family claustrophobia.

Methodology Our patient is admitted to the Psychiatric Day Hospital with an appropriated treatment for his OCD (sertraline and aripiprazole). After several days under observation, we used the scales ASRS-V1.1 y WURS finding results that suggested adult ADHD. Extended release methylphenidate was prescribed, with a fast improving of our patient's symptoms of restlessness, insecurity and impulsion phobia. He was discharged from the Centre for Psychosocial Rehabilitation showing a good evolution.

Results – Anankastic personality disorder (F60.5);

– Dependent personality disorder (F60.7);

– Hyperkinetic disorders (F90).

Conclusions Seventy-five percent of adults diagnosed with ADHD have comorbid disorders that should be used as severity rates, since they may cover up the ADHD symptoms or complicate the response to treatment. Adults with ADHD present high score on the scales “social maladjustment” and an often concomitant and polymorphic psychiatric pathology, object of varied diagnoses.

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

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Description of the activity of a psychiatric day hospital from its opening up to the present day

A. Duque Domínguez^{1,*}, R. Duque Domínguez², L. Martín Díaz¹, C. García Montero¹, M. Palomo Monge³,

M.D.L.N. Vaquero López¹, E. Pérez Arévalo¹

¹ Complejo Asistencial de Ávila, Servicio de Psiquiatría, Ávila, Spain

² Hospital Universitario de Fuenlabrada, Servicio de Psiquiatría, Madrid, Spain

³ Complejo Hospitalario de Talavera de la Reina, Servicio de Psiquiatría, Talavera de la Reina Toledo, Spain

* Corresponding author.

Introduction Description of the most relevant data found in a Psychiatric Day Hospital opened ten months ago in the hospital complex of Ávila.

Objectives The goal is to evaluate clinical and management data in patients of the Psychiatric Day Hospital.

Methods Retrospective cross-sectional descriptive study. A data collection form where each patient is classified into: sex, age, average stay, first admission or readmission, origin, reason for discharge, destination on discharge and diagnoses (classification ICD-10) was used.

Results From the opening of the Psychiatric Day Hospital ten months ago, 58 patients have been admitted: 70.7% women and 29.3% men. Readmissions: 1.7%. Their origin was: psychiatric hospitalization (53.5%), outpatient department (31%), emergency room (13.8%) and Centre for Psychosocial Rehabilitation (1.7%). 41 out of 58 patients have been discharged. Reasons for discharge: improvement (78%), referral to other units (7.4%), voluntary discharge (4.8%) and others (9.8%). The destination on discharge was: outpatient department (90.4%), Centre for Psychosocial Rehabilitation (4.8%), and Inpatient Rehabilitation Unit (4.8%). The most frequent diagnoses on discharge were: bipolar affective disorder, adaptation, emotionally unstable personality disorder, dysthymia, persistent delusional disorders, specific personality disorders and severe depressive episode with psychotic symptoms.