EPP0274

Emigration intentionality among Tunisian interns and residents in medicine.

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Introduction: Emigration is the act of leaving one's country of nationality or habitual residence to settle in another nation. In Tunisia, this phenomenon is increasing in particular for doctors.
Objectives: Evaluating the intentionality of emigration among interns and medical residents in Tunisia while studying the factors related to it.
Methods: We conducted a cross-sectional, descriptive and analytical study of interns and medical residents who participated in our study through the social network 'Facebook' by an anonymous self-questionnaire. The level of satisfaction with the different aspects of life were assessed by a 5-point Likert scale, from "not at all satisfied" to "very satisfied".
Results: The total number of participants was 56 of which 64.3% were medical residents. More than 50% of the participants expressed dissatisfaction with the distribution of tasks and organization of work (66.1%), safety at work (53.6%), comfort (57.2%), time allocated to personal life (53.6%) and salary (69.6%). The political, health and educational situation in the country was considered unsatisfactory by the majority of participants (90% to 95%). Among our participants, 44.6% regretted having chosen the profession of medicine and 53.6% had plans to immigrate to work abroad. The intentionality of immigration was significantly higher among men (p=0.02), those with siblings abroad (p=0.047) and those without dependent relatives (p=0.040).
Conclusions: Young physicians are strongly looking for emigration. This decision could emanate from professional, personal and political factors. Further studies seem to be necessary to explain this emigration phenomenon.

Disclosure: No significant relationships.
Keywords: residents; emigration; medecine

EPP0273

Migration and psychosis: the link between them

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Introduction: Migrations are a source of stress for patients, which can have repercussions on their Mental Health. We present the case of a native Senegalese patient who presented a first psychotic episode.
Objectives: Presentation of a clinical case of an immigrant patient with a psychotic disorder.
Methods: Bibliographic review on migration and psychosis by searching for articles in Pubmed.
Results: We present the case of a patient of 20 years, a native of Senegal, who has been living in Spain for 3 months in a shelter home. He has no family or relations in Spain, and only speaks Wolof, presenting serious difficulties in communication with healthcare workers. He came to Hospital with his social worker because strange behaviors had been observed. He presented delusional ideation of self-referential and mystical-religious content, related to "the prophet" and "the need to fulfill a mission". He also presented auditory hallucinations that he identified as of divine origin, and ordered him to perform behaviors such as picking hairs from the ground and various rituals. He acknowledges cannabis and alcohol use in the previous days. Paliperidone treatment was started. Throughout the admission, he begins to show concern for the state of his relatives in Senegal and the need to send them money.
Conclusions: Multiple studies indicate that migrants are at higher risk of psychosis, specially those from countries where the majority of population was black, according to some series. The challenge lies in understanding the mechanisms underlying this increased incidence, taking into account psychosocial factors such as social isolation and trauma.

Disclosure: No significant relationships.
Keywords: first psychotic episode; migration; risk factors

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¿Do we prescribe less clozapine to immigrant psychotic patients compared to non-immigrant psychotic patients?

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Introduction: Clozapine, the first atypical antipsychotic, is a highly effective medication for patients with treatment-resistant schizophrenia. Robust evidence describes important risk for psychosis in immigrant population(2). Despite this, some studies suggest that immigrant patients are less treated and misdiagnosed due to cultural barriers(3,4). Clozapine and Electroconvulsive therapy tend to be less prescribed in immigrants(3). However, few studies assess differences in clozapine prescription between immigrants and non-immigrant psychotic inpatients.
Objectives: To describe and compare clozapine prescription between psychotic patients and non-psychotic patients in a sample of Acute and Chronic inpatients.

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