the doctors believe that this is too late. 68% of the doctors agree that the society does not have enough knowledge about dementias.

50 patients’ caregivers completed the surveys: 26% – AD, 28% – vascular dementia, 46% – non-defined. The first contact with their doctors varied greatly among different dementia patients: AD – waited for 2.8 y, vascular dementia – 1.46 y, non-defined – 0.87 y. Even though patients’ caregivers indicated that they received enough information from their doctor, they admitted that they had no or not enough knowledge concerning the disease before. They also highlighted that it was hard to find information in Lithuanian language.

**Conclusion:** The research showed that people do not have enough knowledge about dementias and have limited access to information. This is one of the main reasons why the diagnostics is late. Considering the mental health is a stigmatic topic in the world, the fact that people do not know about the dementias might be the problem in the whole world.

**Reference**

1. 1. https://www.nia.nih.gov/newsroom/2016/03/worlds-older-population-grows-

**PS010**

**Obsessive-compulsive behaviour tendencies among medical students in Poland**

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**Aim:** Determination of a need for educational program, focused at students’ knowledge and awareness of OCD.

**Introduction:** As medical students, we are familiar with terms such as professional burnout and workaholism on an every day basis. However other psychiatric disorders seem to be still stigmatized and not well perceived for this profession. It does not mean that they do not exist among future physicians.

Gabbard and Mayers believed that perfectionism is one of the most common personality traits for medics. Moreover, they assumed that perfectionistic physician might perform more often “obsessive triad”. Namely: self-doubt, guilt feelings, exaggerated sense of responsibility. Those personal features can lead to obsessive-compulsive behaviour. Authors also suggest that those traits are already widely pre-existing for medical students. How-ever no studies supporting this thesis were conducted.

**Methods:** Anonymous self-completion questionnaire, completed by students from different faculties who study at the Polish universities. Questions based on structuralized clinical questioner designed by the Polish psychiatrists (dr Bryńska and Wołańczyk, 2005).

**Results:** The questionnaire was completed by 855 students out of whom: 393 medical students (46%), 53% (454) students declared performing specific acts, although not purposedly or despite their will (e.g. checking if the door are locked, cleaning hands, counting. Only 49.6% (194) of medical students answered positively, in respect to 56% (259) non-medical students. Persistent thoughts and fantasies, which are not wanted but occur very often and persistently return – admitted 53.5% (457) questioned. Among the future doctors only 43.5% (170) confirmed to have those thoughts. In contrary to 63% (287) non-medical students.

**Conclusion:** At first glance it seems that medical students less frequently admit to perform compulsive behaviour or to have obsessive thoughts. But what is the cause? Are they less prone to those behaviours? Or, as Gabbard and Mayers suggest, they have to be seen as “perfect” in front of themselves or others? To answer those questions further research is needed.