

an improvement of psychological (somatic?) symptoms and psychotropic medication is deemed unnecessary.

Approximately one-third of patients with Graves' hyperthyroidism are prescribed psychotropic drugs. Sometimes to treat mental symptoms like psychosis or severe agitation, sometimes to treat mental symptoms remaining after amelioration of hyperthyroidism, and sometimes when the diagnosis of Graves' hyperthyroidism has been missed and the patient is treated as having a primary psychiatric disorder.

Objectives: To present a case of a patient with neuropsychiatric symptoms caused by thyroid dysfunction.

Methods: Case presentation and non-systematic review of existing literature on Pubmed using the following keywords: hyperthyroidism, psychiatric disorders, psychiatric symptoms, depression, psychosis.

Results: We report the case of a 21-year-old female without history of psychiatric illness who presented to the emergency department with somnolence, apathy, cognitive impairment (answering "I don't know" to most questions), poverty of speech, abulia, perplexity and delusional belief of ruin, in addition to physical symptoms namely alopecia and weight loss. According to her father, she was very active and dynamic person until two days prior, when he started noticing growing apathy, leading to job absenteeism. Urine analysis for illicit drugs was negative.

Investigation for organic disease was undertaken and the blood analysis revealed overt hyperthyroidism.

She was initially treated with aripiprazol. After thyroid dysfunction was identified, she was evaluated by an endocrinologist and started treatment with tiamazol and propranolol, presenting gradual remission of the psychiatric changes. Aripiprazole was discontinued and she was reevaluated in psychiatry consultation after about a month, with complete remission of psychiatric manifestations and normalized thyroid function.

Conclusions: Neuropsychiatric manifestations of thyroid dysfunction are often misdiagnosed as a primary psychiatric disorder. It is necessary to optimize the medical management of these patients in whom the psychiatric symptoms masks a curable organic cause.

Disclosure of Interest: None Declared

EPV0238

Substance use, anxiety and depression among Tunisian college students

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Introduction: Substance use and mental health symptoms are frequent among college students worldwide.

Objectives: This study examined the prevalence of substance use, anxiety and depression among college students and their associated factors.

Methods: A total of 115 college students aged between 19 and 30 years from different universities completed a self-reported online survey during March 2023. The questionnaire included items on demographic information, substance use and the Hospital Anxiety and Depression scale.

Results: Women represented 70% of our population. The average age was 25,1±3,5 years.

Twenty-nine (25,2%) were smokers, thirty-three students (28,7%) consumed alcohol and nine students (7,8%) used cannabis. Five students used ecstasy. Four students used LSD. Three students used cocaine.

Average HADS anxiety score was 7,96±4,26. Twenty-one students (18,3%) had mild anxiety symptoms. Thirty-three students (28,7%) had moderate to severe anxiety symptoms.

Average HADS depression score was 8,59±4. Thirty-one students (27%) had mild depressive symptoms. Forty-one (35,7%) had moderate to severe symptoms of depression.

Smoking was unrelated to gender, age, field of studies, economic or social status, family or personal history. It was related to drinking and doing other activities or hanging out with friends ($p<0,001$). Drinking alcohol was related to the field and year of study, age, hanging out with friends and other substance use ($p<0,001$). Using cannabis was related to psychiatric family history ($p<0,05$). Using one substance was related to using other substances ($p<0,05$). Anxiety was related to gender ($p<0,001$). Depression levels were related to socio-economic status ($p=0,041$). Poly-use was more frequent among older students ($p=0,003$) and medical students ($p=0,031$). Substance use was unrelated to anxiety and depression levels.

Conclusions: Tunisian universities should consider detecting students with substance and mental health problems and offer them support and treatment if needed.

Disclosure of Interest: None Declared

EPV0239

Epilepsy and psychiatric pathologies: A study of a case series

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Introduction: Psychiatric pathologies are more common in people with epilepsy than in the general population and have a negative impact on the quality of life of these patients.

Objectives: The objective of this work is to illustrate, through a series of cases, the complex relationship between epilepsy and psychiatric pathologies.

Methods: We report the cases of four patients with different psychiatric pathologies associated with epilepsy admitted to the psychiatry department of Hedi Chaker Sfax. We collected the clinical characteristics of these patients based on their medical files.

Results: The patients were aged 64, 45, 38 and 26 respectively. The first patient had a late-onset vascular epilepsy following the psychiatric pathology onset by 20 years. In the remaining cases epilepsy onset preceded the psychiatric pathology by 6, 3 and 1 year respectively. The aetiology of epilepsy was juvenile myoclonic epilepsy, and idiopathic in 2 cases. The psychiatric pathologies were schizophrenia, obsessive compulsive disorder with schizoid personality, schizoaffective disorder in the bipolar type and mild intellectual