S754 e-Poster Viewing

Methods: We report a clinical case of a 58-year-old woman with a history of a 40-year UP successfully treated with 4,5mg of cariprazine. The woman was brought involuntarily for psychiatric assessment at the emergency department with a clinical image of catatonic stupor and predominantly negative symptoms of psychosis. Her total PANSS score at admission was 129. The negative subscale score was 49. She was initially treated with 3mg cariprazine and 10mg olanzapine and was gradually left on 4,5mg cariprazine monotherapy with an adjunctive 30mg mirtazapine.

Results: The patient was dismissed after 47 days of hospitalization. Cariprazine was effective in targeting both the cognitive and affective symptoms of long-standing UP. In the long-term, cariprazine also improved remnant delusional ideas of somatic and persecutory types, enhancing the patient's social life, ensuring her support network, and assisting her integration into the community. The patient did not report any side effects, and her blood test results were within the normal range.

Conclusions: Not all cases of schizophrenia are dramatic at presentation - some can have a chronic and insidious course predominated by negative symptoms. UP can lead to disastrous consequences for the patient's biopsychosocial well-being, leading to future treatment resistance and disability. Although such cases of untreated psychosis seem to be from the past, we should be conscious of their existence and treat them with a patient-personalized and symptom-centered approach. Cariprazine was successful and effective in treating this patient with a remarkable course of UP.

Disclosure of Interest: None Declared

EPV0982

The influence of the experience of trauma in childhood and the later development of psychosis. A case report

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doi: 10.1192/j.eurpsy.2024.1569

Introduction: The increasingly well-established links between psychosis and distant traumas (often established in childhood) oppose purely neurobiological explanations. The influence of psychosocial factors on the development of a later disorder has been studied. In studies, a strong association has been found between psychosis and childhood sexual abuse, especially when sexual intercourse was involved.

Objectives: A case of a patient with psychotic symptoms is presented followed by a theoretical review on the topic.

Methods: A case is presented with a bibliographic review.

Results: A 37-year-old woman was admitted to the Acute Hospitalisation Unit for behavioural alterations in the form of heteroaggressiveness towards family members in the context of psychopathological decompensation.

On arrival at the unit, she presented psychomotor restlessness, ideas of harm in relation to her neighbours and an attitude of referentiality, especially towards her father.

At the pharmacological level, Quetiapine 100 mg was replaced by Aripiprazole 10 mg and sleep was occasionally supported with Lormetazepam 1 mg.

Progressively her rest is normalising, she remains calm, behaviourally adequate, approachable and cooperative. She does not spontaneously allude to delusional ideation and no hallucinatory attitude is observed.

Daily individual psychotherapeutic interviews and family meetings are held with her parents, in which they refer to experiences of abandonment by her parents during her upbringing, persistent irritability and ideation of harm towards the family, which seems to be of long standing. They also report that prior to the first psychiatric admission, the patient reported being sexually abused at the age of 6 and suffered repeated physical aggression by a teacher at the age of 9. Both the patient and her parents relate the origin of the current malaise to all these events.

Upon discharge from the unit, throughout the follow-up carried out in the resource specialised in first psychotic episodes, during psychotherapeutic interviews, the feelings and emotions related to the traumatic experiences mentioned above are worked on. This therapy, associated with the pharmacological regimen previously indicated, has promoted a notable psychopathological improvement.

Conclusions: A review of 46 studies in women, both inpatients and outpatients, many of whom had a diagnosis of psychosis, revealed that 48% reported having suffered sexual abuse, 48% physical abuse in childhood and 69% of them both. Among men, the figures were 28%, 50% and 59%, respectively. Childhood abuse has been shown to play a causal role in many mental health problems.

There is clear evidence that physical and sexual abuse during childhood is related to symptoms of psychosis and schizophrenia, particularly hallucinations and paranoid delusions. Also, studying possible variables, a greater severity has been observed the more intense the abuse has been.

Disclosure of Interest: None Declared

EPV0983

Delusion of pregnancy - what the literature says?

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Introduction: Delusion of pregnancy (DP) is a false and persistent belief of being pregnant despite realistic evidence to the contrary. Being considered a rare phenomenon, more cases of DP have been reported lately, however the literature about this topic is still scarce.

Objectives: Clarify the etiology and clinical aspects of this pathology in order to diagnose and to treat it properly.

Methods: A search on Pubmed was performed using the MeSH terms "delusion pregnancy" or "pseudocyesis". The DSM-5 and ICD-10 were also a source of information.

Results: DP can be sometimes confused with other disorders, like pseudocyesis, pseudo-pregnancy and Couvade syndrome, but it is important to differentiate all of them to have a clear view of the pathology and follow a correct approach to the problem.

European Psychiatry S755

DP can manifest isolatedly, but it is more commonly associated with other diseases. Etiologically, several factors can intercede: biological, psychosocial and cultural factors, iatrogenic factors and coenaesthesis processes.

Demographically, about 50% of the patients are 20-40 years old and the most common psychiatric diagnoses are schizophrenia, bipolar disorder and depression.

Concerning the treatment, it is essential to exclude non-psychiatric causes and treat those, if present. After doing so, the therapeutical approach can be non-pharmacological, using psychotherapy or electroconvulsive therapy, although the latter has inconclusive results and sometimes it only remits the comorbid depressive symptoms; or pharmacological using 2nd generation antipsychotics.

In general, there is now a good response in 50-64% of the cases (Bera and Sakar, *Indian J Psychol Med* 2015;37(2)131-137) (Yadov *et al*, *Indian J Psychol Med* 2012;34(1) 82-84).

Conclusions: DP can be a psychiatric diagnosis itself or a manifestation of other psychiatric or non-psychiatric disorder so we must be allert to make a precise differential diagnosis. Its genesis is multifactorial and that must be taken into account when thinking about its treatment approach.

In the past, the prognosis of the DP wasn't good, but in the recent literature it was found a good response in more than half of the patients treated accordingly.

Disclosure of Interest: None Declared

EPV0984

Psychosocial difficulties as a predictor of overall functioning in individuals with schizophrenia: a case-control study

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doi: 10.1192/j.eurpsy.2024.1571

Introduction: Difficulties in emotional, cognitive, behavioral, and social functions are considered important factors of global functioning in schizophrenia.

Objectives: A better understanding of difficulties in the mentioned facets might lead to the development of better-adjusted treatment approaches for individuals with schizophrenia, as well as impacting to reduction and elimination of stigma in Bosnia and Herzegovina's wider social context in relation to difficulties spanning the daily life of individuals with schizophrenia.

Methods: Thirty- one patients with schizophrenia (SCH), and 30 healthy controls (HC) participated in our study. The Adult Self-Report (ASR), Achenbach's scale for adults (ASEBA- Achenbach System of Empirically Based Assessment), and World Health Organization, Disability Assessment Schedule 2.0 (WHODAS 2.0) tests were administered.

Results: Groups differed in age, education, employment status, marital status, friendships existence, and disability existence.

According to the regression equations, thought problems predicted Getting around; withdrawn predicted Getting along with people and Life activities- Household, School/Work in the group of individuals with schizophrenia.

Conclusions: Our study revealed the role of different facets of difficulties in the prediction of global functioning in SCH. These findings might directly point to the importance of eliminating stigmatizing beliefs in a wider social context, developing techniques for improving the social support segment, focusing on healthy family functioning, as well as investigating job presence and perceived quality of life.

Disclosure of Interest: None Declared

EPV0985

Cognitive impairment assessment in schizophrenia. purposely a case

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doi: 10.1192/j.eurpsy.2024.1572

Introduction: Significant and measurable cognitive symptoms are present at the onset of the disorder and these remain stable in the subsequent period between 2 and 5 years. Their deterioration increases with the course of the disease. Attention, concentration, psychomotor speed and resolution of conceptual tasks are usually affected and are more significant in the presence of positive symptoms.

Objectives: Sometimes, the typical positive or negative symptoms of the disease do not adequately reflect the severity of cognitive impairment. Measuring this deterioration can be very relevant when evaluating the severity and the prognosis of the disorder.

Methods: 31-year-old male with a previous diagnosis of schizophrenia of 4 years of evolution. He gets a maintained treatment with amisulpiride 400mg with an apparent good response. A single hospitalization at the onset of the disease. An assassination attempt on his mother is done by suffocation with a pillow and observing a significant cognitive impairment despite an apparent control of the symptoms of schizophrenia.

Results: An exhaustive neuropsychological evaluation is carried out, observing a very important cognitive deterioration that had not been previously detected and allowing a pharmacological adjustment of the underlying disease with global improvement of the patient.

Conclusions: It is very important to evaluate the patient as a whole without forgetting the frequent cognitive damage that these patients can have. An intense neuropsychological study can be very useful to evaluate the prognosis and adequate treatment of the patient in order to reduce serious risks.

Disclosure of Interest: None Declared