EPP0705

Clinical relevance of Paliperidone Palmitate three-month intramuscular injection formulation: an Italian Real-World, Retrospective, one-year Mirror Image Study

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Introduction: Paliperidone Palmitate 3-month (PP3M) formulation, introduced in Italy since 2017, is an effective and safety therapeutic option for patients with schizophrenia, clinically stable with 1-month formulation (PP1M). Only a few "Real World" studies investigated the clinical relevance of PP3M and the long-term clinical and health resource utilization outcomes.
Objectives: The aim of this retrospective, mirror image study was to evaluate the efficacy of PP3M in terms of continuity of care and number of hospitalizations.
Methods: Fifty outpatients treated with Paliperidone Palmitate (PP) were recruited from a Community Mental Health Centre (CMHC) in Milan. Statistical analysis were conducted with SPSS 26. Frequencies of hospitalization 6 months before and after the start of PP3M were compared using the McNemar test, setting the significance to $p<0.05$.
Results: This study involved 34 patients (68%) treated with PP1M and 16 (32%) treated with PP3M.The median time interval between PP1M and PP3M was 14 months. After the switch to PP3M, 69% of patients continued to visit the CMHC with an unchanged frequency (50% once/month, 6% more than once/month), while 31% with a decreased frequency (once/3 months). No patient increased the frequency of CMHC visits or started visiting it discontinuously. 44% of subjects had had at least one hospitalization prior to the switch and no hospitalizations after ($p=0.016$). Moreover, no patients showed increased hospitalizations
Conclusions: In this study PP3M clinical relevance was confirmed comparing pre-initiation and post-initiation 6-months time intervals: hospitalizations number significantly decreased, while the continuity of care was preserved. Further studies on a greater sample are necessary to support these preliminary data.

Disclosure: No significant relationships.
Keywords: one-year Mirror Image Study; clinical relevance; psychopharmacology; Paliperidone Palmitate 3-month formulation

EPP0704

Valproic acid-induced hyperammonemic encephalopathy (VIHE) in a patient with Bipolar disorder: A case report and literature review.

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Introduction: Valproic acid (VPA) is a valuable treatment for bipolar disorder, schizoaffective disorder, and agitation[1]. However, potential side-effects include sedation, headaches, tremors, ataxia, gastrointestinal issues, neural tube defect, [3] and mild hyperammonemia even in normal liver function test [1] and VPA level.
Objectives: To illustrate clinical presentation of VIHE and provide literature review on post-VIHE treatment options.
Methods: A 59-year-old male with PMH of Diabetes Mellitus, Hypertension, Hyperlipidemia, LVH, COPD, s/p CVA, and PPH of schizoaffective disorder, bipolar type. Patient stable on VPA 1250mg daily and Olanzapine 5mg daily for >2years until recent manic decompensation resulting to up-titration of VPA to 1500mg H.S. Thereafter, he presented with altered mental status, with VPA level (111.4 ug/ml), hyponatremia (119 mmol/L) and hyperammonemia (84 umol/L). Subsequently, admitted as a case of VIHE and hyponatremia.
Results: VPA has shown to cause hyperammonemia alone or when combined with antipsychotics[6]. VIHE reported in up to 47.7% of patients on VPA[1], but symptomatic in approximately 10% of patients on VPA with blood ammonia level about 2-fold the normal range[8]. VIHE presents with confusion, ataxia, blurred vision, delirium, and seizures[3]. Treatment options include VPA discontinuation, switch to other mood stabilizers (lithium carbonate, lamotrigine), utilization of medications to lower blood ammonia levels (Lactulose, Rifaximin/Neomycin) ,[3] antipsychotic monotherapy, and supplements (Levocarnitine or Carglumic acid) in the prevention, maintenance, and treatment of VIHE. These supplements can be added to VPA if the benefits of re-initiating or continuing VPA outweighs the risk[3].
Conclusions: Further research is needed.

Disclosure: No significant relationships.
Keywords: VIHE - Valproic acid induced hyperammonemic encephalopathy; bipolar disorder; VPA - Valproic acid; Schizoaffective disorder

EPP0705

Efficacy and tolerability of brexpiprazole in patients with psychotic and mood disorders: a pilot study

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Introduction: Brexpiprazole is a novel antipsychotic drug. It exerts antagonistic activity at the serotonin 5HT2A, 5HT2B, 5HT7 and