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Successful treatment of Premenstrual dysphoric disorder with irritable bowel syndrome using sulpiride

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Introduction: Premenstrual dysphoric disorder (PMDD) is prevalent, more severe than premenstrual syndrome(PMS), and a challenging disorder. The first line of treatment is pharmacotherapy. Non-pharmacological therapy includes aerobic exercise, consumption of complex carbohydrates and frequent meals, relaxation training, light therapy, sleep deprivation, and cognitive-behavioral therapy could be helpful

Objectives: To our knowledge, there have not yet been any studies on this treatment option for PMDD with IBS

Methods: a case report

Results: A lady suffering from PMDD and irritable bowel syndrome (IBS) did not respond to antidepressants, painkillers, and melatonin. She used to sit at home and in her room these days, waiting for the PMDD severity to decrease. Her condition reached remission after taking a small dosage of sulpiride and stopped on the last day of the period. The patient is satisfied with the result since concerns about antidepressants are addressed and avoided. This case provides a new approach to using low-dosage sulpiride temporarily every month in patients with both PMDD and IBS

Conclusions: Premenstrual dysphoric disorder is a challenging condition. The symptoms of PMDD are not continuous, and somatic symptoms are a significant component of both the diagnosis and the patient's suffering. Choosing a suitable medication based on pros and cons contributes to successful treatment and patient satisfaction. This case provides a new approach to using low-dosage sulpiride in patients with both PMDD and IBS, but more studies are needed to confirm its efficacy and safety.

Disclosure of Interest: None Declared

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Neuroscience-based Nomenclature (NbN) and Early Career Psychiatrists: A Cross-Sectional Study on Views, Attainment and Needs

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Introduction: Anatomical Therapeutic Chemical (ATC) indication-based classification system is the World Health Organization (WHO) drug classification system and it is widely used in clinical and researh practice, however there has been questions around the scientific base of this (1, 2). Neuroscience-based Nomenclature (NbN) has been developed by representatives from 5 international organizations, with specific expertise in psychopharmacology, to address the issues around neuropsychopharmacological drug classification and improve the focus on pharmacological domains and mode of action:

ECNP – European College of Neuropsychopharmacology
ACNP – American College of Neuropsychopharmacology
AsCNP – Asian College of Neuropsychopharmacology
CINP – International College of Neuropsychopharmacology
IUPHAR – International Union of Basic and Clinical Pharmacology
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Objectives: As NbN is a novel classification system that can be used as a teaching tool as well as for other purposes, we aimed to understand the experience, views and needs of the psychiatric trainees and early career psychiatrists who will shape the future of psychiatry, around drug classification systems.

Methods: The ethical clearance of the study was obtained from King's College London. We prepared an online survey (https://forms.gle/FCSdVTFH4U5QNn5t8) with a multinational group of early career pscyhiatrists who met through the CINP and EFPT, and test-run the survey with a small group of psychiatric trainees. The online survey was then disseminated via emailing lists and groups of early careers psychiatrists as well as through social media. Results: At the time of this abstract submission, the data collection is ongoing. Results will include analyses of the experience with different drug classifications systems, awareness, views and attainment of NbN, stratified according to the demographic data (country, careers status, main work setting).

Conclusions: The findings from this study will shed light on the views and needs of early career psychiatrists on the topic from clinical and academic aspects, a previously unexplored perspective on drug classification systems. The findings can inform the planning of various strategies to address areas to improve the use and teaching of these tools.

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Haematological alterations in the context of olanzapine treatment

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