

EPV0909

Patient satisfaction with 6-month paliperidone palmitate versus other long-acting injectable antipsychotics

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Introduction: Long-acting injectable antipsychotics (LAIs) offer advantages for schizophrenic patients compared to oral antipsychotics: less frequent dosing, lower relapse rates, better adherence, and lower healthcare costs. LAIs include paliperidone, aripiprazole, olanzapine, risperidone, and zuclopenthixol. Paliperidone palmitate is the only antipsychotic with two formulations with an administration interval longer than one month (3-monthly and 6-monthly), which could be better for the patient and help ensure treatment continuity, especially in cases of limited access to the health care system.

Objectives: To assess the satisfaction of patients under treatment with 6-month paliperidone palmitate compared to other long-acting injectable antipsychotics with a higher frequency of administration.

Methods: We analyzed the satisfaction level of a sample of patients receiving treatment with LAIs at the Mental Health Center of El Escorial. All patients had a diagnosis of schizophrenia or other psychotic disorders (according to DSM-5). Patients who met the inclusion criteria completed the Treatment Satisfaction Questionnaire for Medication (TSQM), a generic questionnaire of treatment satisfaction that measures four dimensions: side effects, treatment efficacy, comfort of use, and overall satisfaction. Other clinical and socio-demographic variables were collected, as well as the type of injectable, dose, and frequency of administration.

Results: Data from approximately 30 patients will be analyzed and discussed later.

Conclusions: Less frequent administration of LAIs may result in greater patient satisfaction and be just as beneficial clinically. Treatment satisfaction is positively associated with an improvement in psychotic symptoms and seems to be related to better adherence.

Disclosure of Interest: None Declared

EPV0910

Perceived mental illness stigma and self stigma among persons treated for psychotic disorders

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Introduction: Stigma related to mental health has serious impact on persons suffering from psychiatric disorders and on their families. Self-stigma occurs when people with mental health problems internalize public attitudes, negative beliefs and stereotypes associated with psychiatric disorders. Stigma and self-stigma can affect every aspect of life and result in discrimination, social exclusion, feelings of low self-esteem, shame, guilt, and can postpone seeking help.

Objectives: To examine perceived stigma and self-stigma of people treated for psychotic disorders.

Methods: We will include male and female patients older than 18 years of age, diagnosed with psychotic disorders, treated as outpatients. Assessment will include sociodemographic data, Internalized Stigma of Mental Illness Inventory – 9-item Version (ISMI-9) * to measure internalized stigma of mental illness, The perceived devaluation-discrimination (PDD) scale to measure perceived stigma, the World Health Organisation Quality of Life-BREF (WHOQOL-BREF) questionnaire, and Clinical Global Impression Scale (CGI).

Results: We will analyse differences in ISMI and PDD scales in patients treated for psychotic disorders.

Conclusions: Understanding self-stigma and societal stigma associated with mental health is crucial in creating programs aimed at well-being of persons treated for psychotic disorders.

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EPV0912

Differential diagnosis in chronic psychosis: a case report

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Introduction: A colombian woman aged 62, with previous diagnosis of paranoid schizophrenia. She retired from working 2 years ago, when she started taking care of her sick husband full-time.

Objectives: To describe a chronic psychosis case and discuss the treatment options and differential diagnosis.

Methods: We used the face-to-face interviews during her last hospitalization and her electronic medical history.

We also made a brief research about the effectiveness of risperidone depot in Pubmed.

Results: Psychiatric history

She's had 3 hospitalizations, all of them coincided with stressful vital situations. The first one occurred when she was dealing with a job issue. In the second one she was having an economic conflict with her husband. And the third one has coincided with worries about her retirement pension and her caregiver burden.

Current episode

She came to my hospital emergency department distressed because she thought her husband and her were victims of an international drug trafficking plot. She said a colombian drug cartel had sent 9 prostitutes to her village in order to steal from them, by pretending they were cleaning assistants, as a reprisal against her husband, who used to be a military in Colombia. She explained the nature of