

**Introduction:** How traditional cultural healing works is difficult for biomedical science to understand. Outcomes do occur that defy the conventional logic of materialistic, reductionistic cause-and-effect.

**Objectives:** We aimed to understand how participants understood what happens in traditional cultural healing.

**Methods:** We identified 26 cases of results in which improvement occurred beyond what biomedicine would expect from a placebo response. We interviewed the healers and their clients to understand their experience and how they saw what had happened.

**Results:** Seven cases involved resolution of cancer; 2 cases, musculoskeletal disorders; 9 cases of rheumatological disorders; 8, other disorders. Each person spoke about the importance of spiritual transformation and described such an experience. They spoke about an attitude of the cultural healer that involved what could best be translated as radical empathy coupled with non-judgmental listening without interpretation. Many of healers had been initiated into their healing roles via a life-threatening illness that resolved when an extra-ordinary being(s) (a spirit or god, or God) entered their life world and became an integral part of their being. This was also a common description given by the participants for what had happened. The healers often described themselves as a hollow bone, a conduit through which spiritual forces flow.

**Conclusions:** Traditional cultural healing remains important to psychiatry because it defies explanation in our usual paradigm. Spiritual transformation and radical empathy may be necessary, though not sufficient components. For the person who undergoes a profound spiritual transformation, extensive changes in self and world view may occur.

**Disclosure:** No significant relationships.

**Keywords:** radical empathy; cultural healing; indigenous North Americans; spiritual transformation

## EPV0239

### The forbidden fruit – the thin line between belief, religion, and severe psychopathology: A case report

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**Introduction:** Religious obsessions constitute an interesting component of the phenomenology of obsessive-compulsive disorder(OCD). Scrupulosity can be phenomenologically similar to other OCD subtypes but the ultimate feared consequence is religious or moral in nature.

**Objectives:** To develop a reflexion about religion, belief and its interaction with psychopathology, focusing on a clinical case.

**Methods:** Review of the clinical case and literature.

**Results:** 37-year-old female patient with 4 prior psychiatric admissions. Stable until May 2020. After a brief online relationship patient develops subsequent guilt, anxiety and obsessive images with religious/sexual content. Abruptly, on the day of admission to the ER, the patient eats garlic in penitence and self-flagellate. At inpatient-unit she presented in mutism and total oral refusal, needing nasogastric tube

for feeding and medication administration. She was medicated with diazepam and olanzapine, being added fluoxetine later on. In later interviews, a primordial idea based on the prevailing religious beliefs was found: “sex before marriage is a mortal sin”. This itself generated doubt “have I been forgiven” with compulsions of verification/purification (eg. repeated confession) and punishment, and this doubt almost reached a delirious character during the acute episode. Partial egodistonia, lived with suffering although with some continuity with her beliefs. At discharge patient showed insight for the unreality of this dyad, though the primary idea remained immovable.

**Conclusions:** Although the pharmacological approach managed to control the most disturbing symptoms presented by the patient, it’s worthwhile to review and to reflect on this report in a wider perspective, within in the light of the relevance to the clinical practice.

**Disclosure:** No significant relationships.

**Keywords:** Scrupulosity; Religion; obsessive–compulsive disorder; psychopathology

## EPV0240

### Erik Satie – a psychopathological approach

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**Introduction:** Éric Satie was a French classical music composer born in May of 1866. He composed several music pieces that did not fit the contemporaneous musical standard once he did not follow the orthodox rules of composition and harmonic expression.

**Objectives:** To analyse Erik Satie personality traits and possible psychopathological findings.

**Methods:** A narrative review was performed using Google Scholar database.

**Results:** His music, as it occurs in most musical composers, was said to translate his own personality and state of mind at the time. He was described as an eccentric with multiple descriptions demonstrating unstable and explosive personality traits of pride, determination, perfectionism and a hatred for convention that would put him near a Cluster A type of personality.

**Conclusions:** Although some authors conclude that Satie could be diagnosed with Asperger Syndrome I believe that his specificities represent more of personality traits than pathological findings.

**Disclosure:** No significant relationships.

**Keywords:** Erik Satie; Music; psychiatry; Personality

## Depressive disorders

### EPV0241

#### Psychotropic treatment in patients with arrhythmia: About a case

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