

for bizarre behavior and delusional-hallucinatory symptomatology, for a total period of almost three months – discontinued by a one week discharge, during which she became noncompliant to treatment and was readmitted.

The laboratory data and the brain computer-tomography were unremarkable. She had no history of psychiatric illness or alcohol abuse.

Her family reports that the onset of delusional speech about her recently diagnosed cancer – preceded the first psychiatric admission by one month.

On psychiatric examination she showed delusional thought with religious, somatic and bizarre content; auditory, including imperative hallucinations, no insight of the psychiatric disorder and denied the oncological diagnostic. During hospitalization she developed persecutory delusions, depressive symptoms, and manifested delusional-hallucinatory modified behavior.

She received treatment with antipsychotic, antidepressant, mood stabilizing and anticholinergic medication. There was an improvement of her mood symptoms and some reduction of the psychotic symptomatology. However, she was still having bizarre somatic and religious delusional ideas and less prominent auditory hallucinations.

At the time of this report the psychotic disorder has a four months evolution, with antipsychotic treatment started three months ago. No oncological treatment was applied after the discontinuation of the local cobaltotherapy.

The psychotic disorder developed by this patient at approximately the same time of histopathological confirmation of the uterine cervical cancer, impaired her oncological therapy and prognosis.

P0167

The hypofrontality and working memory

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Regional cerebral blood flow or rCBF is a measurement of blood circulation levels to specific areas of the brain using transcranial sonography by BIOUS (Russia).

In the study conducted by our Research Center blood flow to the DLPFC was investigated in 70 schizophrenic patients and 65 non schizophrenics.

All participants were subjected to three separate conditions or tasks in which rCBF in brain blood vessels were determined. We investigated indexes of line blood speed Front (FBA), Middle(MBA), Posterior brain arteries (PBA)

The first of the three psychometric tasks was labeled the resting condition. This condition allowed participants to become acclimated with the experimental conditions. The next two conditions were counterbalanced among the participants in random order to discount the possible effect of task order on results.

We conduct a study to control for all the possible confounds of past research on working memory and the DLPFC. This task required the participants to identify the digit initially presented zero, one, two, or three frames before the one currently viewable.

As the working memory load became larger, activation levels of the DLPFC between increasingly differed between groups. Our study suggest that there is a significant role of the DLPFC in working memory, correlating its activation negatively with cognitive disorganization, a symptom of schizophrenia possibly responsible for many of the negative symptoms. These results clearly suggest working

memory and the right DLPFC dysfunction as playing significant roles in schizophrenic symptoms.

P0168

Self mutilation (five cases reports)

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Self-mutilation is described as the: “deliberate destruction or alteration of body tissue, without conscious suicidal intent”, it has been performed by individuals throughout history. Genital self-mutilation has been a religious practice since ancient roman times.

Self-mutilation can interest all organs especially: genital, hands and eyes, this form was described as a mystic delirium in schizophrenia.

We report five cases of self-mutilation diagnosed at patients to the psychiatric Academic Service in Marrakech on a period of 2 years.

The first is 51 years old without a psychiatric history, admitted with agitation and self-mutilation : he has bitten it's thumb; he was diagnostigued as schizophrenic.

The second one is 21 years old , schizophrenic following treatment since two years, he has injured its penis by a razor blade.

The third one is 60 years old , he has a complete section of its penis, admitted in a delirious depression.

The fourth one is 27 years old , known schizophrenic since 2 years he has pulling out 2 teeth (incisors) and biting its lips.

The fifth one is 27 years old , known schizophrenic since 10 years, he tried to remove his testes tearing his scrotal envelop during his hospitalization.

In the literature we have found several case reports: Self-inflicted stab wound of abdomen with spoon, Self-mutilation ear, Self-inflicted orodental injury, bilateral self-nucleation of eyes.

P0169

Axis I anxiety disorders comorbidity in psychotic patients

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Background and Aims: Axis I anxiety disorders are often comorbid in psychoses and mostly assessed during the hospitalization. In the present study anxiety comorbidity was investigated in 98 patients (with schizophrenia, schizoaffective disorder, bipolar disorder with psychotic features) previously hospitalized for psychotic symptoms.

Methods: Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorder Fourth Edition (SCID-P), Brief Psychiatric Rating Scale (BPRS) and Clinical Global Impressions Scale (CGI), were performed during hospitalization (t0) and subsequently in a phase of clinical remission, lasting for at least 6 months besides a stable pharmacological treatment for at least 3 months (t1). Comorbid anxiety disorders were assessed only at t1 in order to avoid the influence of an acute clinical state.

Results: Our sample confirmed that anxiety comorbidity is a relevant phenomenon in psychoses, being present in nearly half of the patients (46.9%). Our specific prevalences were: obsessive-compulsive disorder (OCD) 20.4%, panic disorder (PD) 24.5%, social anxiety disorder (SAD) 19.4%, generalized anxiety disorder (GAD) 2%,

post-traumatic stress disorder (PTSD) 0%. In our sample, patients with schizophrenia had a rate of anxiety disorders (73.9%) significantly higher ($p < .05$) than those with schizoaffective disorder (31.6%) or bipolar disorder (41.1%). Patients with PD or with OCD showed higher severity of illness only at t0; on the contrary, those with SAD demonstrated greater severity at t1.

Conclusions: PD, OCD and SAD resulted frequently comorbid in psychotic patients; SAD more prevalent in schizophrenia with a negative impact on the course of the illness.

P0170

Platelet serotonin and serum cholesterol concentrations in suicidal and non-suicidal male patients with first episode of psychosis

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Suicidal behavior is a major health risk in psychiatric disorders, especially in schizophrenia, and up to 10% patients will commit suicide. The neurobiology of suicide is still unclear. Suicidality has been related to a decreased central serotonergic (5-hydroxytryptamine, 5-HT) function and reduced cholesterol levels. Platelet 5-HT was used as a peripheral marker of the central serotonergic synaptosomes. The hypothesis was that suicidal patients in the first episode of psychosis will have different serum cholesterol and platelet 5-HT concentrations than non-suicidal patients in the first episode of psychosis. The aim of this study was to evaluate serum cholesterol and platelet 5-HT concentrations in suicidal and non-suicidal men in the first episode of psychosis and in healthy male controls. Venous blood samples were collected within 24 hours of admission, and serum cholesterol and platelet 5-HT were determined enzymatically and fluorimetrically. Platelet 5-HT and serum cholesterol concentrations were significantly lower in suicidal than in non-suicidal patients in the first episode of psychosis, and than in healthy controls. Our results suggest that lower concentrations of serum cholesterol and platelet 5-HT in patients with the first episode of psychosis might be useful biological markers of suicidality.

Keywords: Suicidality, The First Episode of Psychosis, Cholesterol, Platelet Serotonin, Men

P0171

Diagnostic and therapeutical approach in psychosis - pituitary adenoma comorbidity. Case report

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Background: Among pituitary adenomas, prolactin-producing pituitary tumors are the most common type which are treated frequently with dopamine agonists in intrasellar types. The onset of a psychotic disorder concomitant with the tumor complicates the diagnostic algorithm of the psychiatric condition and the following therapeutical approach of both of them.

The **Aim:** to elucidate on empirical basis the etiology of the psychotic disorder comorbid with pituitary adenoma in order to find an optimal therapeutical resolution to both conditions.

Method: female patient, 25 years old, was hospitalized for psychotic and expansive symptoms which appeared six months after initiation of bromocriptine treatment for prolactin-producing pituitary microadenoma and had a fluctuated course. All investigations

excluded the involvement of another organic factors. The difficulty of the case consisted in finding the differentiated etiology of the persistent psychiatric symptomatology: is it bromocriptine induced or is it a primary mental disorder?

Results: the psychiatric symptoms were treated with antipsychotics — quetiapine 1000mg/day, but the maintenance dose had to be reduced to half because the prolactin serum level raised. Three months later the patient relapsed and the antipsychotic dose was raised, which induced high prolactin serum level. Bromocriptine dose was raised as the psychiatric condition worsened and the antipsychotic dose was raised again. Finally bromocriptine switched to cabergoline 1,5mg/twice a week. The psychotic symptoms diminished and the remission was reached with prolactin serum level maintained within normal limits with cabergoline.

Conclusion: empiric research found that the most probable cause of persistent psychosis is related to the dopamine agonist use.

P0172

Blood glucose level in the patients with schizophrenia

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Background and Aims: Schizophrenia is a chronic mental disorder with unknown etiology. It seems that many endocrine and metabolic abnormalities are present in the schizophrenic patients. This study was done to determine the rate of abnormal plasma glucose levels in schizophrenic patients .

Method: Thirty two schizophrenics patients (16 male & 16 female) encountered in a cross-sectional descriptive survey . The fasting glucose levels of the patients were compared with normal subjects . For comparison of data , student's t. test was used .

Results: Five of the subjects in the patients group had impaired fasting glucose tolerance as defined by the American Diabetic Association Criteria (110 – 125 mg./dl.) In the control group , on the other hand , only 1 person had impaired fasting glucose tolerance ($p = 0 .015$).

Discussion: According to the results of this study , and also some others , it seems that abnormal levels of glucose are more common in schizophrenics than total population . It is strongly recommended that patients with schizophrenia be carefully examined for diabetes mellitus or abnormal glucose tolerance .

Keywords: schizophrenia , glucose , diabetes mellitus

P0173

Sensitivity of comparisons of TTAD across antipsychotics to patient selection criteria and model specification in a retrospective paid claims analysis

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Background and Aims: Investigate how selection criteria and statistical model specifications affect time to all cause discontinuation (TTAD) comparisons across alternative antipsychotics using retrospective database analyses.

Methods: 231,635 episodes of antipsychotic therapy were identified using data from the California Medicaid (Medi-Cal) program. A series of regression models were estimated for TTAD that altered