

## EPV0294

### psychiatric disorder in prolonged post-concussive syndrom : clinical assessment, physiopathology and management review of the literature

I. Bouguerra\*, A. Touiti, A. Hajri, A. Maamri and H. Zalila

Outpatient and Emergency Psychiatric Department, Razi Hospital, Manouba, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1030

**Introduction:** According to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), post concussive syndrome (PCS) is given a diagnosis of either major or mild neurocognitive disorder (NCD) due to traumatic brain injury TBI. However Persistent post-concussion symptoms (PPCS) are more complex, and typically involve multidisciplinary assessment and management. The symptoms are varied, non-specific and the therapeutic process is defiant for psychiatrist.

**Objectives:** To investigate the semiology of persistent post-concussion syndrome (PPCS) and the therapeutic challenges it poses.

**Methods:** A literature review was made on Pubmed, Google Scholar and Cochrane library using keywords: "post-concussive syndrome", "psychiatric disorder", "depression", "post-traumatic stress disorder", "treatment", "physiopathology".

**Results:** The physiopathology of persistent PCS is controversy. The Symptoms are due to the Concept of "Symptom Generators" which results from the alterations in neurophysiology and neuropathology secondary to the injury, and pre- or post-injury psychological factors physiological concussion. The Global cerebral metabolic disturbance, the autonomic nervous system dysfunction and the cerebral blood flow dysregulation induce biochemical cascade, excitotoxic reaction and immunotoxicity.

Clinical diagnoses associated with PPCS are: Major depressive disorder, Post traumatic stress disorder, Anxiety disorder, Substance abuse disorder, Psychotic disorder and Antisocial personality disorder. For the non pharmacological management: A systematically early information and a graded physical exercise in addition to other treatment are essential.

Antidepressant, benzodiazepine and mood-stabilizer are the most recommended treatments for psychiatric symptoms. Atypical neuroleptics are indicated in delirant disorder, behavior disorder and antisocial personality disorder. Some studies suggest the methylphenidate and biperiden to treat several cognitive impairment and severe behavior disorder.

**Conclusions:** (PPCS) is far from being a subjective complaint by patients. It is a complex clinical entity that groups symptoms that overlap with other psychiatric diagnoses, such as depression, post-traumatic stress disorder, and mood disorders. Early neuropsychiatric assessment and personalized pharmacological and psychotherapeutic treatment are essential factors in the prognosis of the disease.

**Disclosure of Interest:** None Declared

## EPV0295

### Late-onset mania as a manifestation of neurosyphilis: A Case Report

A. Labyadh\*, S. Omri, W. Haouari, I. Gassara, R. Feki, N. Smaoui, L. Zouari, J. Ben thabet, M. Maalej, N. Charfi and M. Maalej Bouali

psychiatry C department, hedi cheker hospital, Sfax, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1031

**Introduction:** The evaluation of manic behavior with later onset is crucial, as various organic factors such as medications, infections, metabolic disturbances, tumors, and epilepsy can serve as potential etiological causes. While not universally observed, most studies indicate a connection between late-onset mania and neurological disorders like neurosyphilis.

**Objectives:** Our study aims to investigate the relationship between late-onset mania and neurosyphilis.

**Methods:** In this paper, we present a case of neurosyphilis presenting exclusively with symptoms of mania.

**Results:** A 72-year-old Tunisian woman with no prior medical or psychiatric history was referred to the psychiatric emergency room due to alterations in her mental state and behavior over the past ten days. During the psychiatric assessment, she displayed increased motor activity, fluctuating emotions, and rapid flow of ideas. The general physical examination yielded no notable findings. The serum Venereal Disease Research Laboratory (VDRL) test returned a strongly positive result (+++), and the TPHA examination confirmed a positive result at a titer of 1/60. In the serologic analysis of cerebrospinal fluid, VDRL was also positive, thereby confirming the diagnosis of neurosyphilis (NS). The diagnosis of mania secondary to a medical condition was established. The patient was treated with ceftriaxone and antimanic medications, resulting in a significant improvement in her psychiatric symptoms within a few days.

**Conclusions:** This case underscores the importance of conducting serologic testing for syphilis in patients who present with manic symptoms, experience a late-onset mental disorder, and have no prior history or family history of affective disorders.

**Disclosure of Interest:** None Declared

## EPV0296

### Psychological meanings reported by patients with Graves' Disease in hyperthyroidism but without ophthalmopathy about their quotidian life: A qualitative study conducted in a Brazilian university specialized outpatient service

L. S. Valladão\*, F. S. Silva, C. F. Casagrande, L. M. Guerra, D. E. Zantut-Wittmann and E. R. Turato

Lab of Clinical-Qualitative Research, State University of Campinas, Campinas, Brazil

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1032

**Introduction:** To handle well clinical treatments, it is crucial to know the expectations of patients who seek help. We need to ask ourselves: how do patients interpret subjectively their diagnosis,

treatments, and self-care? Medical Psychology brings us theories for this understanding. Grave's Disease is an autoimmune disorder, a form of hyperthyroidism with a goitre, affecting also the eyes and the skin, as well as emotional manifestations. Weight loss, sometimes psychologically welcome, although due to a disease, can mean a psychoanalytic secondary gain. So, the medicine that leads to clinical improvement can be taken with ambivalence and bad adherence to treatment. It is important to differentiate between disease, a scientific entity explained by the clinical professional, and illness as a patient's subjective perception of an un-health.

**Objectives:** To understand psychodynamically the fantasies, desires, and views related to Graves' Disease as reported by patients in hyperthyroidism but without ophthalmopathy interviewed at an endocrinology-specialized outpatient clinic. (in the EPA-2023, it was presented the qualitative results of a sample in hyperthyroidism, with ophthalmopathy, studied at the same service).

**Methods:** Clinical-Qualitative Method designed by Turato. Data collected through Semi-Directed Interviews with Open-ended Questions in-Depth; and Field Notes, transcript fully. Treated by the Seven Steps of Clinical-Qualitative Content Analysis of Faria-Schützer, using psychodynamic concepts from Balintian Medical Psychology. Although we have extracted categories that permit us interesting discussions, we intend to close the sample (through the information saturation criterion by Fontanella) when we obtain other categories. The interviewer, a male psychologist, is the first author. The findings are validated by peer-reviewers of the Lab of Clinical Qualitative Research of the State University of Campinas.

**Results:** Three categories were chosen for this presentation: 1) "An atomic bomb in my life": How drastic changes of a hormonal disease re-symbolize the patient's life; 2) "I didn't think the thyroid did that much": the disease seen as a metaphor in a psychological blaming language to own disease and to himself as a sick person. 3) "I have so much medicine!": a mode of referring to treatment that would justify an undisciplined use of medications.

**Conclusions:** Our findings can help clinical professionals to have a better understanding of some psychological meanings which have sense in the patients' conscience, often not verbalized clearly in the conversation, and so to handle better the patients and relatives. In this way, it can reduce the patient's resistance to recommended treatment, as well as encourage the clinical team to construct empathy with them.

**Disclosure of Interest:** None Declared

## EPV0297

### A Study of Dry Mouth and Gastrointestinal Disorders in Patients Taking Antidepressant

S.-Y. Lee<sup>1\*</sup> and H.-J. Lee<sup>2</sup>

<sup>1</sup>Psychiatry, Wonkwang University Hospital and <sup>2</sup>Public Health, Wonkwang University Graduate School, Iksan, Korea, Republic Of

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1033

**Introduction:** Dry mouth is a subjective symptom of the feeling of dehydration inside of the mouth and is closely linked to reduced salivary secretion. The occurrence of dry mouth and GI disorders due to antidepressants greatly affects the course of the mental disorder and medication compliance, but it has barely ever been studied.

**Objectives:** The purpose of this study was to identify the characteristics of dry mouth and gastrointestinal (GI) disorders in antidepressant patients.

**Methods:** The study included 103 antidepressant-taking patients. Antidepressants were classified according to their mode of action. The GI disorders were investigated using the medical records of the patients. The Patient Health Questionnaire-15 and a questionnaire for assessing dry mouth symptoms were used in this study. The questionnaire for the evaluation of dry mouth symptoms, a visual analog scale (VAS)-based instrument, developed and evaluated for reliability by Lee et al. was used to assess dry mouth. In the questionnaire, 6 VAS items were assessed for the extent of dry mouth (0-100 points): 1) dry mouth at night or when waking up in the morning, 2) dry mouth during the day, 3) dry mouth when eating, 4) difficulty in swallowing, 5) subjective evaluation of the volume of saliva in the mouth, and 6) overall discomfort in daily life. Additionally, four items examined behaviors due to dry mouth (1-5 points): 1) frequency of waking up from sleep due to dry mouth, 2) frequency of preparing drinking water before going to bed, 3) frequency of drinking water when eating solid foods, and 4) frequency of eating hard candies or chewing gums to help dry mouth.

**Results:** The score for "overall discomfort due to dry mouth in daily life" ( $31.72 \pm 33.82$ ), "dry mouth at night or in the morning" ( $47.86 \pm 35.87$ ), and "dry mouth during the day" ( $39.83 \pm 31.67$ ) were slightly higher than "discomfort in chewing or swallowing foods". According to somatization severity, the mean values were  $116.36 \pm 113.34$  in the mild,  $213.18 \pm 136.98$  in the moderate, and  $277.59 \pm 201.44$  in the severe, the between-group difference was significant ( $F=10.294$ ,  $p<0.001$ ). According to the class of antidepressants, the mean score was  $180.00 \pm 147.5$  for vortioxetine,  $194.25 \pm 169.33$  for selective serotonin reuptake inhibitors (SSRIs),  $223.61 \pm 156.70$  for serotonin and norepinephrine reuptake inhibitors (SNRIs),  $75.00 \pm 57.00$  for norepinephrine dopamine reuptake inhibitors (NDRIs),  $201.67 \pm 174.66$  for NASSAs, and  $116.67 \pm 132.03$  for agomelatine. A total of 67 (65.0%) patients had at least one GI disorder.

**Conclusions:** The study findings are expected to help increase medication compliance in antidepressant patients by better controlling the side effects experienced by the patients.

**Disclosure of Interest:** None Declared

## EPV0298

### Personalization of therapy of psychopathological complications of cardiac surgery in artificial circulation conditions

M. Markova<sup>1\*</sup>, D. Mankovsky<sup>2</sup> and T. Abdriakhimova<sup>3</sup>

<sup>1</sup>Kharkiv National Medical University, Kharkiv; <sup>2</sup>SI "Heart Institute of the Ministry of Health of Ukraine" and <sup>3</sup>Bogomolets National Medical University, Kyiv, Ukraine

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1034

**Introduction:** The study of the clinical and phenomenological features of psychopathological complications of cardiac surgery (CS) in artificial circulation conditions (ACC), the development of modern approaches to early diagnosis and prognosis of