

circuits. Current guidelines recommend non-pharmacological interventions as the first-line approach for BPSD. Pharmacotherapy is often applied, but it carries out the risk of serious side-effects and pharmacologic interactions. There is now growing evidence that interventional approaches, such as ECT, could be safe and efficient when previous treatment options have been exhausted or ineffective, with few contraindications and transient/limited adverse effects.

Conclusions: BPSD represent a heterogeneous group of non-cognitive symptoms and behavior that affects most of dementia patients. Combination of non-pharmacological and pharmacological interventions is the recommended therapeutic for BPSD. However, there is usually limited clinical improvement and issues related to tolerability and effectiveness. Currently, ECT is considered a safe and effective option.

Keywords: dementia; BPSD; ECT; management

EPP0848

The effects of the covid 19 pandemic on the elderly with depression

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Introduction: Depression, as a psychiatric entity, has a number of emotional components. These are mainly known among patients over the age of 65: sadness, physical and mental exhaustion, irritability, feeling of emptiness and loneliness.

Objectives: The main objective of this study is to detect if the effects of the Covid 19 pandemic over 65 years of age such as fear, excessive anxiety, lack of motivation, uncertainty and environmental changes, isolation (resulting in sleep disorders, appetite and attention) caused the exacerbation of depression.

Methods: This study included a total number of 126 patients, each over 65, hospitalized at the Psychiatric Hospital “Elisabeta Doamna” in Galati in the context of the COVID-19 pandemic. They were diagnosed with depression, according to ICD-10 and the Hamilton scale.

Results: All data obtained were centralized and used to detect whether, in Galați, the lockdown impacted the number of admissions of people over 65, diagnosed with depression, with an average age of 68,62. There is an increased incidence of female patients (75%), thus reporting an odds ratio of 3:1. The incidence of cases reported during the months of presentation is as follows: January (24%), February (28.8%), March (14.4%), April (3.2%), May (5.6%), June (23.2%).

Conclusions: Environmental factors, unique in this situation, isolation, social distancing and changes in the daily routine, each associated with this global epidemiological crisis determined a decrease of the number of depressive elderly admissions between March 15th and May 15th.

Keywords: Elderly; Depression; pandemic

EPP0849

Antipsychotics use in dementia: How safe are they?

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Introduction: Antipsychotics are frequently used for managing psychiatric and behavioral symptoms of dementia. However, it's an off-label resource which remains controversial due to significant safety concerns in the elderly population, namely increasing cardiovascular adverse effects.

Objectives: To access antipsychotic safety and potential risks when used in dementia.

Methods: A non-systematic review was carefully conducted on PubMed using the following keywords: “dementia”, “antipsychotics” and “safety.” We selected clinical trials, meta-analysis, randomized controlled trials published in the last 10 years.

Results: A total of 43 articles was obtained, of which 22 were excluded because they didn't meet our inclusion criteria. Regarding atypical antipsychotics, one study found an incidence of severe events in 23,7% of patients and a OR=2.5 for cerebrovascular side effects. Quetiapine was suspended midway given it had a higher incidence of adverse effects compared to others. There weren't any significant statistic differences concerning serious events between classes of antipsychotics ($p < 0,01$). No study was found comparing typical and atypical antipsychotics safety in dementia.

Conclusions: Overall, we can conclude that antipsychotics pose a risk of serious adverse effects when used in elderly patients, namely cerebrovascular events. Among atypical antipsychotics, quetiapine, used frequently for controlling neuropsychiatric symptoms in these patients appears a higher risk for severe adverse events compared with other drugs. Their use should be restricted after there aren't any other options available. New protocols could be developed to control these symptoms, for example, environmental measures before resorting to antipsychotics.

Keywords: dementia; safety; Antipsychotics

EPP0850

Use of methylphenidate in alzheimer's dementia: Effect on apathy.

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Introduction: Alzheimer's Disease (AD) is associated with neuropsychiatric symptoms such as agitation depression and apathy. It has been proposed that the pathophysiology of apathy, that is defined as quantitative reduction in goal-directed activity compared with previous functioning, in AD is associated with degeneration of prefrontal cortex and dysfunction of dopamine and norepinephrine neurons in the brain. Methylphenidate (MPH) is a dopamine and norepinephrine reuptake inhibitor and its action increase the availability of these neurotransmitters in the extracellular space of striatum and

prefrontal cortex. Over the past decade there has been an effort to study the benefit of the use of MPH for treatment of apathy in patients with Alzheimer's dementia.

Objectives: Study the benefit of methylphenidate in the treatment of apathy in AD.

Methods: Basic literature review collecting data from PubMed (2010-2020) using the words "Methylphenidate", "Apathy", "Alzheimer", "Dementia".

Results: Clinical trials using 10 to 20mg of MPH per day, for 6 weeks, demonstrated a mitigation in apathy symptoms in one third of patients, with good tolerability. Another clinical trial using the same dosage, for 12 weeks, led to improvement in cognition, functional status, depression and caregiver burden.

Conclusions: New clinical trials with larger groups of patients over a longer period are needed to consolidate the existing results. Although there are still many questions concerning the usefulness of methylphenidate in this population that need to be answered, methylphenidate might be an option to deal with one of the most prevalent neuropsychiatric symptoms, apathy, in some AD patients.

Keywords: dementia; Alzheimer; methylphenidate; apathy

EPP0851

The use of methylphenidate in vascular dementia: A case report

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Introduction: Patients diagnosed with vascular dementia often present with apathy, executive dysfunction or/and memory impairment. Some of these psychiatric domains are not responsive to antidepressants or acetylcholinesterase inhibitors. Since methylphenidate enhances frontal lobe function, it may be a valid therapeutic option.

Objectives: To report a case where methylphenidate was used as a therapeutic approach in vascular dementia.

Methods: We present a case of a patient diagnosed with vascular dementia with substantial clinical improvement after treatment with methylphenidate.

Results: A 67 year-old male was observed in a psychiatric consultation reporting memory loss, inability to retain information and inattention. According to her spouse, the patient has been mostly isolated at home and recently he has become unable to accomplish some daily living activities. There was no history of previous psychiatric disorder. Cognitive assessment was performed using MoCA test: 19/30 points (predominantly in executive, attention and delayed recall domains). After this evaluation, it was introduced bupropion 150mg od and donepezil 5mg od with insignificant clinical improvement. The patient underwent a routine workup which was unremarkable and a brain computed tomography scan that revealed ischemic leukoencephalopathy. Three months later no clinical benefit was reported. Attention and functional improvement were observed after introduction of methylphenidate with progressive dose adjusting till 30 mg/day.

Conclusions: Besides not being a consensual therapeutic approach, considering that there is a lack of efficient pharmacological

strategies in vascular dementia, methylphenidate may play a significant role in this field contributing to clinical improving and ultimately to an enhanced quality of life.

Keywords: methylphenidate; Therapeutic approach; Vascular dementia

EPP0853

A preliminary study of dyads of stroke patients and their female partners: Exploring the role of spirituality, religiousness and quality of life in rehabilitation

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Introduction: The concepts of spirituality and religiousness has not been investigated so far in patients after stroke.

Objectives: The aim of this study is to explore whether self-reports in two questionnaires measuring the personal experience of spirituality and religiousness can influence quality of life and estimations of rehabilitation in male older adult patients and their wives when compared with control dyads.

Methods: Fifteen male stroke patients and their wives participated one year after their hospitalization for stroke. The mean age of the patients and their wives was 75.58 years (SD = 7.50, range 61-90), level of education 15.47 years (SD = 3.82). In addition to that, fifteen married couples with similar demographics, were also measured. Depressive symptoms of the participants were assessed with the 15-item Geriatric Depression Scale. Family dyads consisting of an older adult and one family member, in all cases the wife, also responded to the Daily Spiritual Experience Scale, the Systems of Belief Inventory (SBI-15R), and the Satisfaction with Life Scale (SWLS). A 5-point Likert scale question was also administered examining the opinion of rehabilitation achieved.

Results: indicated that there was a statistically significant difference between the two groups regarding the levels of spirituality, religiousness and quality of life in both partners, with the stroke patient dyad showing lower scores, but positive stronger correlations.

Conclusions: Although spirituality, religiousness and quality of life are lower in the stroke patient dyad, they show significantly statistical positive correlations in older adults suffering from stroke as well as their wives.

Keywords: Spirituality; religiousness; quality of life; stroke

EPP0854

A preliminary study of stroke patients and attention: Exploring the role of spirituality and religiousness on cognition

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