

Disorders (may be a combination)	Before surgery (n,%)	2 weeks after (n,%)	18 months after (n,%)
Emotional and volitional	27 (60%)	27 (60%)	15 (33%)
Cognitive - Korsakov syndrome	18 (40%) 4 (9%)	27 (59%) 8 (18%)	18 (40%) 7 (15%)
Personality	21 (46%)	25 (55%)	23 (51%)

Results: In the late postoperative period, mental disorders were detected in 75% of patients (Table 1). Table 1. Dynamics of the main psychopathological symptom complexes (n = 45).

The table shows that emotional-volitional disorders have a clear positive dynamics by 18 months after surgery compared with the preoperative level. Korsakov's syndrome and personality disorders are less favorable. 23 patients (52%) returned to their previous profession; 22 (48%) stopped working due to a severe degree of disability, of which 7 (15%) need constant supervision.

Conclusions: The positive dynamics of psychopathological symptoms is observed only within 1.5 years after the removal of the craniopharyngioma, in the future they remain without a tendency to improve. 22 patients (48%) stopped working. The most severe degree of disability is 15% patients.

Disclosure: No significant relationships.

Keywords: Mental disorders; emotional and personality disorders; craniopharyngioma; postoperative period

EPV0110

Huntington's disease- a case of early psychiatric symptoms and suicide

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Introduction: Huntington's disease is typically an inherited neurodegenerative disorder with autosomal dominant transmission. Early disease symptoms can include depression and behavioral changes, while physical and cognitive symptoms become evident later. Suicide and suicidal ideation are more frequent in these patients than on the general population. We present the case of a 50-year-old female patient with a history of depression and suicidal intents previous to her diagnosis. The patient committed suicide approximately 20 years after the beginning of her psychiatric symptoms.

Objectives: To report a clinical case of early psychiatric symptoms and suicide in Huntington's disease; To raise awareness for these comorbidities and for an adequate intervention in suicide prevention.

Methods: The information was obtained by interviewing the patient and her family and by reviewing past medical reports. A brief literature review using the keywords "suicide", "Huntington's disease" and "psychiatric symptoms" was performed on PubMed.

Results: The patient had a history of depression and five hospital admissions for suicidal intents during the ten years prior to the diagnosis. After the diagnosis and the beginning of physical

symptoms, she maintained suicidal ideation until she committed suicide ten years later.

Conclusions: This clinical case underlines the importance of being alert for early psychiatric symptoms of Huntington's disease, especially if considering the patients' probability of developing it. It also reinforces the need for suicidal ideation regular assessment and for pharmacological and non-pharmacological targeted therapy. Further investigation should be taken to understand which factors increase the risk for suicidal behavior and which moments during disease progression are crucial for prevention.

Disclosure: No significant relationships.

Keywords: huntingtons; huntingtonsdisease; Depression; Suicide

EPV0112

Let's talk about it: An atypical case

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Introduction: Cross-sectional studies report the high comorbidity of substance use (SUD) with eating disorders (ED). This case report aims to describe a case of anorexia nervosa and alcohol use disorder in a 18 year old male.

Objectives: Based on the need to formulate protocols, we aim to conduct a systematic review on the recent literature research on this coexisting psychiatric disorders.

Methods: Relevant studies were sourced from published literature and reviewed.

Results: The prevalence of ED is higher in women than in men, with a ratio of 7:1; however it is the latter that present the most serious clinical pictures. It should be also noted that no all types of ED present the same comorbidity, but rather those with bulimic symptoms are the ones that most resort to substance abuse, so the distinction between subtypes is highly relevant.

Conclusions: It is important that clinicians are aware of the severity of this combination and the need for a specific and careful management. Also important to taking into account the limited bibliography on the subject, it is especially important to expand research.

Disclosure: No significant relationships.

Keywords: alcohol use disorder; eating disorders; Addiction; Dual pathology

EPV0113

Relationship between suicide attempts of repetition and dependence to the cocaine: Report of clinical case

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Introduction: People with borderline personality disorder are at higher risk of repeating suicidal behavior. At the same time, numerous publications have demonstrated the relationship between cocaine dependence and suicide attempts of repetition.

Objectives: Review the relationship between cocaine addiction, borderline personality disorder and repeated suicide attempts. Present through a clinical case the effectiveness of a comprehensive and multidisciplinary therapeutic plan with different mental health devices.

Methods: To review the psychopathological evolution of a patient with a diagnosis of borderline personality disorder; dependence to the cocaine; Harmful alcohol consumption and suicidal behavior from the beginning of follow-up in mental health services to the present. Review the existing scientific evidence on the relationship between cocaine addiction and repeated suicide attempts. Analyze the efficacy of the different treatments available.

Results: This is a longitudinal and retrospective study of the psychiatric history and evolution of a clinical case since the implementation of an individualized therapeutic program and the favorable results obtained. Intensive outpatient follow-up was carried out for high suicide risk and hospitalization in a psychiatric hospitalization unit, day care centre and therapeutic community.

Conclusions: At present, the patient remains in abstinence with remission of suicidal ideation. The literature has shown the usefulness of intensive mental health follow-up programs to achieve remission of suicidal ideation and maintain abstinence from illegal substances.

Disclosure: No significant relationships.

Keywords: Borderline personality disorder; dependence to the cocaine; suicide attempts of repetition; individualized therapeutic program

EPV0114

Psoriasis and psychiatric disorders

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Introduction: Psoriasis is a common psychophysiological chronic skin disease with an important impact on patient's quality of life. The prevalence of psychiatric conditions in psoriasis may range from 24% to 90%. The mechanisms that may explain this relationship still remain debatable.

Objectives: The purpose of this work was to report two cases of psychiatric comorbidities associated with psoriasis and to discuss the possible etiopathogenic mechanisms behind this connection.

Methods: To report two cases of psychiatric comorbidities associated with psoriasis.

Results: Case1 Mr. A.K. is a 30-year-old male patient. He was admitted to our department in February 2020 for acute mania with psychotic features. The patient reported that since 2010, he was treated for psoriasis with local treatment (cortisone cream). The lesions did not grow or expand. Case2 Mr.A.B. is a 27-year-old male patient, with past history of psoriasis under local treatment. He is treated since 2019 in our department for schizophrenia.

Conclusions: High levels of pro-inflammatory cytokines observed in psoriasis may in part explain the associated psychiatric disorders. The psychodermatologic approach would be beneficial for the adequate management of patients suffering from psoriasis.

Disclosure: No significant relationships.

Keywords: psoriasis; Psychiatric comorbidities

EPV0115

Cytokines status in multiple sclerosis patients with comorbid recurrent depressive disorder

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Introduction: The presence of some common immunological pathogenesis mechanisms in multiple sclerosis and depression suggests the possibility of comorbid depressive disorder formation in multiple sclerosis patients, which significantly worsens their quality of life and patient's compliance. In this regard, the depressive pathology diagnosis in people suffering from multiple sclerosis acquires important scientific and practical value.

Objectives: The aim of the study was the cytokine status peculiarities identification in multiple sclerosis patients with comorbid recurrent depressive disorder (F33).

Methods: The cytokines content in patient's blood mononuclear cells culture supernatants was carried out by ELISA. The recurrent depressive disorder diagnosis was established based on ICD-10 criteria. The depressive disorders symptoms severity was determined according to the M. Hamilton and A.T. Beck depression scales, as well as during the clinical interview

Results: A higher production of IL-6 was noted in multiple sclerosis patients with mild recurrent depressive disorder (F33.00), in contrast to patients without the affective symptoms. The IL-1 β , TNF- α , IL-6 contents in the blood mononuclear cells culture supernatants of patients with severe recurrent depressive disorder (F33.2) exceeded the corresponding parameters of patients with mild depressive symptoms. A direct correlation between the depression severity and IL-1 β , TNF- α , IL-6 spontaneous production by blood mononuclear cells of patients with multiple sclerosis was found.

Conclusions: The severity of recurrent depressive disorder correlates with a change in the parameters of the cytokine status: severe depressive symptoms are accompanied by a change in the functional activity of immune cells and an increase in the production of cytokines synthesized by type I T-helpers.

Disclosure: No significant relationships.

Keywords: Multiple sclerosis; comorbid recurrent depressive disorder; Cytokines status