

EPP0618

Burden level among parents of children with epilepsy

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Introduction: Family caregiving role of children with epilepsy involves managing the daily lives of these children with disabilities. This can lead to impaired physical and psychological health of the caregiver.

Objectives: To assess the level of burden among caregivers of children with epilepsy and to determine the factors associated with it.

Methods: It was a descriptive and analytical survey. It involved the caregivers of children with epilepsy who were admitted to the pediatric neurology department at the Hedi Chaker University Hospital in Sfax during the period from July to October 2020. We used the 12-item Zarit (ZBI-12), the State-Trait-Anxiety Inventory (STAI), and the "BECK" Depression Inventory (BDI-13) to assess caregiver burden, anxiety and depression respectively.

Results: Forty-four caregivers participated in the survey. Their average age was 36 years and their relationship with patient was mother in 93.2% of cases. Among 44 children with epilepsy, 56.8% were boys and 34.1% were schooled. They had psychiatric comorbidity in 15.9% of cases. According to the ZBI scale, the level of burden was high in 45.5% of cases. The total ZBI score was significantly higher among caregivers with primary school level ($p=0.05$) and those with somatic disease ($p=0.004$). It was not correlated with the presence of child's dependence on the others ($p=0.20$). High levels of depression, anxiety-state, and anxiety-trait among caregivers were correlated with the level of burden (p 0.000; 0.000 and 0.001, respectively).

Conclusions: Being a caregiver of a child with epilepsy is a burdensome circumstance. Hence the importance of offering psychological assistance for these caregivers.

Disclosure: No significant relationships.

Keywords: children with epilepsy; Zarit (ZBI-12); parents; Burden level

Schizophrenia and other Psychotic Disorders 07 / Psychotherapy

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Pilot study of an online intervention for young people with a first psychotic episode: Thinkapp

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Introduction: Online interventions can be a complement to maintain the long-term effectiveness of psychosocial interventions in First Episode Psychosis (FEP) that have already demonstrated their efficacy in the short and medium term (Calvo et al., 2015).

Objectives: To test the effectiveness of a mobile app-based intervention (Thinkapp) to improve quality of life, functioning and symptomatology, and reduce days of admission and hospitalizations, in young people with FEP.

Methods: Fourteen patients with FEP, aged 14–30, recruited from Gregorio Marañón Hospital, Ramón y Cajal Hospital and AMAFE Foundation in Madrid (Spain) received treatment as usual plus a psychoeducational intervention through a mobile app. Changes in dependent variables over the course of the intervention were assessed by means of a battery of clinical tests at baseline, 3-month and 6-month follow-up using a Wilcoxon test.

Results: Of the fourteen patients included, 7 patients completed the 6-month follow-up and 8 completed the 3-month follow-up. There were significant differences in days of admission ($p = 0.042$) between baseline and 6-month follow-up. No significant results were observed in other clinical variables.

Conclusions: The study provides preliminary data potentially related to the reduction of days of admissions.

Disclosure: No significant relationships.

Keywords: First Episode Psychosis; Psychosis; Mobile intervention; schizophrenia

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Successful clozapine rechallenge after neutropenia using lithium carbonate : a case report

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Introduction: Clozapine is widely known as the drug of choice in treating refractory schizophrenia. However, clozapine prescription requires close clinical and biological monitoring to prevent harmful side effects like agranulocytosis, neutropenia and myocarditis.

Objectives: To show the benefits of lithium carbonate in the clozapine rechallenge of a patient with neutropenia under clozapine.

Methods: We present the clinical case of a patient who developed neutropenia under clozapine, we rechallenged with clozapine after lithium treatment to stimulate hematopoietic functions.

Results: A 42-year-old man diagnosed with refractory schizophrenia, under clozapine for 11 years with a good clinical response at a dosage of 500mg per day (clozapine serum level 328ng/ml), developed a neutropenia (BCC at 840/mm³) within an interval of 2 months. Clozapine treatment was suspended and the patient presented a severe psychotic relapse requiring hospitalization. During hospitalization the patient remained symptomatic under