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control). Patients with AUD characterized by changes in the concentration of NSE during therapy (p>0.005 compared with patients after therapy). In patients with MD revealed correlation between the level of NSE on the 28th day of antidepressive therapy and the HDRS-17 score before treatment (r=0,421; p=0,018). In patients with co-morbidity correlation between the level of NSE and the CGI-S score before therapy was found (r=-0,537; p=0,001).

Conclusions: The revealed correlations indicate the relationship between the severity of depressive symptoms and the level of NSE. Disclosure statement: This study was supported by the Russian Science Foundation, grant No. 19-15-00023.

Conflict of interest: Disclosure statement: This study was supported by the Russian Science Foundation, grant No. 19-15-00023. **Keywords:** mood disorders; neuron-specific enolase; alcohol use disorder

EPP0814

The limits of medical recovery of post stroke patients suffering of different types of neoplasia

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Introduction: A stroke represents a major cause of the disability of an adult with various biological, physiological and social implications. Excluding the characteristic neurological pathology, a series of complications may follow and if they are neglected they might compromise the success of medical rehab and the reintegration of the patient back into society. Recent studies have demonstrated that there is a higher rate of incidence of cancer among the survivors of a stroke in comparison with the general population.

Objectives: The correlation between strokes and oncological disease.

Methods: We have effectuated a prospective study of 6 months at the Neurology Section of Emergency Hospital "Saint Andrei", Galati, in which we've included a total number of 50 patients who were over 60 years old. In this timeline we've analyzed the correlation between strokes and the comorbidities of the patient and the influence of these over the plan of medical rehab and the period of recovery after the stroke.

Results: Over these 6 months, of all 468 patients having suffered strokes, 50 of these had been secondarily diagnosed with neurocognitive disorders. 56% of them were male and 44% were female, 37% from rural areas and 63% from the urban areas.

Conclusions: The category of neurocognitive disorders includes the group of disorders in which the principal clinical deficit is located at the cognitive functions level and is usually acquired, not representing a disorder of development.

Keywords: stroke; Neoplasia; recovery

EPP0815

The (ANTI)psychotic paradox: Lewy body dementia

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Introduction: Lewy Bodie Dementia (LBD) is the second more common progressive dementia caused by the deposition of proteins at the neocortical level, producing motor and psychotic symptoms (parkinsonism and visual hallucinations) which typically get worse with antipsychotics.

Objectives: Find the best antipsychotic treatment in a real patient with LBD balancing control of motor and psychotic symptoms.

Methods: A clinical trial about a real case based on an updated bibliographical review. Received a 70 years old man with more than ten years LBD diagnosis, treated with clozapine (25mg / 12h). According to his wife (principal keeper), it stills a paranoid speech with fluctuant delusional ideas conditioned by visual hallucinations, predominantly in the evening, with no amelioration in four years clozapine treatment, adding a progressive parkinsonism impairment despite neurological drugs (carbidopa:levodopa). Doing a bibliographical review, we found a 2019 article (with 3 Systematic review/Metanalysis and 3 Clinical Practice Guidance, including in NICE), where point olanzapine 5mg well effective but worse tolerated and light up quetiapine as choice that should be considered (no doses specified).

Results: One month later of therapeutic trial following the review in our clinical case, changing clozapine for quetiapine (50mg / 12h), we found an improvement of motor control and a reduction of psychotic manifestation that allows a less disruptive behavior in our patient, also objectified by his principal keeper.

Conclusions: While bibliography doesn't point a specific dose drug guide for antipsychotic treatment in LBD, in our clinical trial we detected a better control of symptoms using low dose quetiapine, nevertheless more studies are needed.

Keywords: psychosis; antipsychotic; dementia; Lewy

EPP0816

Impact of non-farmacological methods on improvement cognitive function in epilepsy

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Introduction: The quality of life of patients with epilepsy, their social activity and functioning depends not only on the presence of epileptic seizures, but also on the level of cognitive decline.

Objectives: The object of our study is impact of non-pharmacological methods on cognitive functions, decreasing of which deteriorates social activity in patients with epilepsy.