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EV728

Partial nephrectomy after oncocytoma causing repeated lithium poisoning with normal renal function

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Introduction Lithium has been widely used as mood stabilizer in bipolar disease, despite its narrow therapeutic range and its side effects. Sodium levels and water consumption could affect lithium renal elimination.

Aims Describe a lithium intoxication without risk factors and normal kidney function.

Methods A 71-year-old female, diagnosed with bipolar disorder, current episode euthymic. On treatment with lithium 800 mg/day, 6 months ago she started with hematuria and urologist found a multifocal oncocytoma in left kidney. She was operated with double lumpectomy and partial nephrectomy without complications. Normal preoperative and postoperative renal function. Two months ago, she started with dysarthria, dystonia and coarse tremor, and T wave inversion on the electrocardiogram. In the blood test, lythemia was 1.67 mEQ/L. Creatinine was 0.65 mg/dL. She was admitted to Internal Medicine Unit. She was treated with rehydration by serum. All psychoactive drugs were removed. Twenty days later, lithemia was undetectable in the blood analysis.

Results Two weeks ago, the patient was transferred to the mental health unit due to worsening her mood. Lithium was reintroduced 3 days ago, at doses of 200 mg per day. Today, the patient starts again with symptoms of poisoning by lithium. Lithemia was 1.78.

Conclusions On this occasion, partial nephrectomy due to oncocytoma is the most likely cause two consecutive lithium poisonings. Although creatinine and glomerular filtration are in normal range, patients after partial nephrectomy may have a reduced sodium reabsorption in proximal convoluted tubule, which may cause lithium compensatory resorption. This could cause rising in blood lithium levels.

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Delusional of parasitosis in geriatric patients

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Introduction Delusional of parasitosis or Ekbom's syndrome (ES) is a psychiatric disorder in which the patient has a fixed and false belief that small organisms infest the body. The belief is often accompanied by hallucinations. It is an uncommon condition that was initially studied by dermatologists, more prevalent in the elderly and typically observed in women older than 50 years although isolated cases among men have been reported.

Objective To review current knowledge about delusional of parasitosis in elderly patients through literature systematic review and the analysis of a case report.

Methodology We performed a literature search using electronic manuscripts available in PubMed database published during the last five years, following the description and discussion of a clinical case. We report a case of an 85-year-old man who presented a delusional parasitosis as a primary disorder.

Results The literature on ES consists mostly of case reports and limited series. In this paper, we analyze the etiology, demographic characteristics, clinical features and treatment in geriatric patients with delusional parasitosis.

Conclusion International classifications have included this syndrome in non-schizophrenic delusions. However, it has also been reported in schizophrenia, affective disorders, and organic or induced psychosis. Treatment is based on antipsychotic agents, psychotherapy and cooperation between dermatologists and psychiatrists.

Keywords Dermatozoic delusion; Ekbom syndrome; Infestation; Parasitosis

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Comparative efficacy and safety of antidepressive mono- and multimodal therapy with citicoline in elderly patients with depression in psychogeriatric unit

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Introduction Citicoline is a choline donor involved in the biosynthesis of brain phospholipids and acetylcholine, used for treating neurodegenerative disorders. Several studies have shown its beneficial effects both in degenerative and vascular cognitive decline. Due to its effects on the adrenergic and dopaminergic CNS activity, citicoline can also be used as an adjuvant in depression treatment.

Objectives and aims Comparative evaluation of efficacy and safety of a multimodal antidepressive therapy with ceraxone (citicoline) plus one of the antidepressants (venlafaxine, agomelatine, or fluvoxamine) and monotherapy with the same antidepressant for the treatment of depression in the elderly. Two groups of patients were included in the study (21 patients in each group) aged from 60 to 79 years old, comparable to the main clinical characteristics.

Methods First group patients were treated with a single antidepressant, patients of the second group – with the same antidepressant and intravenous infusions of ceraxone: 10 infusions (500 mg in 100 mL isotonic sodium chloride solution) during 2 weeks, followed by transfer to the drug in solution at 3 mL per os two times a day for six weeks.

Results A multimodal therapy with ceraxone leads to more rapid and significant therapeutic response along with the reduction of adverse events compared to antidepressant monotherapy.

Conclusion Obtained data allows to recommend a multimodal antidepressive therapy with ceraxone (citicoline) for the treatment of elderly depressive patients to reduce the risk of adverse effects of antidepressants and to shorten hospitalization period.

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