

Objectives The aim of this study was to determine the levels of depression, anxiety and attention-deficit hyperactivity disorder symptoms and health-related quality of life (HRQL) in children and adolescents with epilepsy.

Methods The sample consisted of 75 children with epilepsy and 50 healthy controls aged 8–18 years. Questionnaires were used to evaluate the psychiatric status and HRQL of the patients.

Results Patients had lower child-rated psychosocial and total area HRQL scores, and lower parent-rated psychosocial, physical and total area HRQL scores than the controls did. Inattention scores of the epilepsy group were significantly higher compared to controls. No significant differences were found between patients and controls in terms of anxiety and depression scores. Regarding determinants of HRQL, severity of depression and anxiety had a decreasing effect on child-rated HRQL total scores; and severity of anxiety had a decreasing effect on parent-rated HRQL total scores.

Conclusions Epilepsy is associated with poor QoL in childhood and severity of depression and anxiety are among the determinants of QoL. Clinicians should be more aware of accompanying psychiatric symptoms in epileptic patients and take the necessary precautions in the early period of the illness in an effort to improve QoL.

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EW0372

The new great imitator – neuropsychiatric symptoms of Lyme disease

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Introduction Lyme disease, caused by the spirochete *Borrelia burgdorferi* as recognized as a possible cause of multisystemic signals and symptoms, including symptomatology of the central as well as the peripheral nervous system.

Objectives Identification of neuropsychiatric symptoms associated with Lyme disease.

Methods Literature review in the light of researched articles published in Pubmed/Medline as well as related bibliography.

Results Since the identification of the etiology of syphilis in the early twentieth century, mental health professionals consider the fact that serious psychiatric symptoms can be caused by infections of the central nervous system and that early antibiotic treatment can prevent permanent neurological/psychiatric damage. Syphilis was known as “the great imitator” because its multiple manifestations mimic other known diseases. In recent years, a new epidemic, also with multiple manifestations emerged—Lyme disease, also known as the “new great imitator”. Like syphilis, Lyme disease may be associated with neuropsychiatric symptoms, which means that often these cases are initially referred for psychiatric services, before another diagnosis is made. The incorrect assessment of these patients as individuals with functional psychiatric disease can result in a delay in the start of antibiotic treatment and may cause serious neurological and psychiatric damage.

Conclusions According to the review, the authors propose that in the evaluation of acute psychiatric disease or atypical chronic disease, with poor therapeutic response, Lyme disease should be considered and ruled out, especially if there is epidemiological context and absence of psychiatric family antecedents.

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EW0373

Attention, vigilance and visuospatial functioning in hospitalised elderly medical inpatients – relationship to delirium syndromal status and motor subtype profile

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Objective The early and efficacious detection of neurocognitive disorders poses a key diagnostic challenge. We examined how bedside cognitive tests perform across the spectrum of delirium and motor subtypes.

Methods The performance on a battery of bedside cognitive tests were compared in elderly medical inpatients with DSM-IV delirium, subsyndromal delirium, and no neuro cognitive disorder and in motor subtypes.

Results One hundred and ninety-eight patients (mean age 79.14 ± 8.26) were assessed with no delirium ($n=43$), subsyndromal delirium ($n=45$), and full syndromal delirium ($n=110$). The ability to meaningfully engage with the tests varied from 59% for vigilance B test to 85% for Spatial Span forward test and was found to be least in the full syndromal delirium group. The no delirium group was distinguished from the delirium groups for all the tests and from the full syndromal delirium group for the vigilance B test and global visuospatial function test. The subsyndromal delirium group differed from the full syndromal delirium group in respect of global visuospatial function test, spatial span backwards and vigilance A tests. Patients with full syndromal delirium were best identified using the interlocking pentagons test and clock drawing test whereas those with subsyndromal delirium were best identified using interlocking pentagons test and months backwards test. Those with subsyndromal delirium were significantly better in their ability to engage than those with full syndromal delirium.

Conclusions Simple bedside tests of attention, vigilance, and visuospatial ability are useful to help to distinguish neurocognitive disorders namely subsyndromal delirium from other presentations.

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EW0374

The effects of bariatric surgery on pharmacokinetics of antidepressants: A systematic review

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Introduction Morbid obesity (BMI ≥ 35) has been associated with mood and anxiety disorders. Regular use of antidepressants is common among patients who are candidate for bariatric surgery. The Roux-en-Y gastric bypass (RYGB) is one of the most common techniques used in bariatric surgery for reducing nutrient absorption. This type of surgery may however result in major changes in drug absorption.