

EPV0266

Perceptions about Graves' Disease: A qualitative study on reports of patients in Euthyroidism and with Ophthalmopathy under a Brazilian university specialized outpatient follow-up

E. R. Turato*, D. E. Zantu-Wittmann, J. C. A. Reis and L. S. Valladão

Laboratory of Clinical-Qualitative Research, State University of Campinas, Campinas, Brazil

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1616

Introduction: Knowing mental representations about the phenomenon of illness and medical care allows the clinical team to have better emotional handling of their patients, with gains in greater adherence to treatments. Graves' Ophthalmopathy is an inflammatory disease with primary involvement of the extraocular muscles and orbit, being the most frequent extrathyroidal manifestation of Graves' Disease. Many patients have psychological status changes even after successful treatment of hyperthyroidism, especially when the disfiguring signs of ophthalmopathy are predominant. An understanding of the symbolic aspects linked to this condition help doctors and nurses to have a relationship more harmonious with them.

Objectives: To interpret emotional meanings in reports of patients with euthyroidism and with ophthalmopathy under follow-up at a specialized university endocrinology outpatient follow-up, discussing contradictions perceived between a stigmatized body and clinical-laboratory euthyroidism.

Methods: Clinical-Qualitative design of Turato. Data was collected using Semi-directed interviews with open-ended questions in-depth, carried out with patients at a university hospital specialized outpatient service in South-eastern Brazil. The interview material was audio-recorded and fully transcribed. The interviews were treated by Clinical-Qualitative Content Analysis described by Seven Steps' Faria-Schützer. It is based on psychodynamic concepts from the Medical Psychology theoretical framework, whose main author is Michael Balint. The sample was closed by the Theoretical Saturation of Information studied by Fontanella and cols. The finding validation has occurred by peers at the Laboratory of Clinical-Qualitative Research, State University of Campinas, San Paolo.

Results: The sample was composed by 10 patients. From the search of nuclei of meanings in the reports, four categories of analysis were constructed: 1) "No, this is not normal, I must have cancer": psychodynamics of the doctor-patient relationship in Graves' Disease; 2) Types of illness according to their manifestations and auto-perception: silent illness and non-silent ones; 3) "The eyes are everything": the impacts of the disfiguring alterations of ophthalmopathy; 4) The contradiction perception between clinical and laboratory normality the stigmas of ophthalmopathy.

Conclusions: The patients with severe exophthalmos, maintained emotional distress despite being euthyroid, manifested by various emotional meanings reported in the interviews. The clinical-laboratory diagnosis of Graves' Disease alone is not sufficiently capable of responding to the psychological demands of the patients. Proper listening to emotional symbolic meanings attributed by patients can help physicians and nurses in handling this setting

Disclosure of Interest: None Declared

EPV0267

"I don't want to go anywhere": A qualitative study with patients with Graves' Disease and Ophthalmopathy interviewed at a public university specialized outpatient service in Brazil

E. R. Turato*, L. S. Valladão, D. E. Zantut-Wittmann, C. F. Casagrande and F. S. Santos

Laboratory of Clinical-Qualitative Research, State University of Campinas, Campinas, Brazil

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1617

Introduction: Knowing what "kind of patient" search the doctor is relevant to handle his/her treatment and care. What emotional meanings do people attach to their diagnosis, therapy, and care in general? Graves' Disease has an impact on the metabolism, which directly affects behavior. Patients can be affected by Graves' Ophthalmopathy at any stage of the disease. This usually leads to greater changes in facial physiognomy which may or may not be accompanied by typical symptoms of hyperthyroidism. Changes in appearance and visual symptoms often lead to a rapid search for treatment. Understanding the symbolic aspects of the condition can help clinicians to manage emotionally, leading to substantial improvements such as the adhesion to the treatment.

Objectives: To understand and interpret psychodynamically the perceptions and emotional meanings related to Graves' Disease with Ophthalmopathy and hyperthyroidism as reported by patients at an endocrinology-specialized outpatient service.

Methods: Clinical-qualitative design of Turato. Data is collected using Semi-directed interviews with open-ended questions in-depth carried out with patients at a specialized outpatient service. Interview material was audio-recorded and fully transcribed. The material was treated by Clinical-Qualitative Content Analysis of Faria-Schützer. It is based on psychodynamic concepts from the Medical Psychology theoretical framework, and which main author is Michael Balint. The sample will be closed by the Theoretical Saturation of Information criterion according Fontanella. The interviewer was a male psychologist and doctoral student in the Health Mental Area. The finding validation has occurred by peers at the Laboratory of Clinical-Qualitative Research, State University of Campinas.

Results: This presentation refers to partial findings from a sample of a total of three participants as part of the doctoral project by the first author. The analysis of data collected so far indicates three designed categories of analysis: 1) "I wasn't like that before": impacts on physiognomy - the perception of social stigma and the difficulty of managing the illness. 2) "This disease is a mess": the symptoms affect all aspects of the patient's life. 3) Problematic emotions management: double anxiety in hyperthyroidism - hormonally based anxiety and psychological anxiety related to the impact of the medical diagnosis.

Conclusions: The findings shall aid medical personnel in better grasping patients' emotional perceptions of their illness and medical care. The level of communication between the professional and the patient can be improved by involving the patient as an active

protagonist in the well-being process. This could also lead to more effective management and greater adherence to the therapeutic process.

Disclosure of Interest: None Declared

EPV0268

When nausea invades your life (Psychosomatic): a case report

E. Arroyo Sánchez* and P. Setién Preciados

Psiquiatría, Hospital Universitario Príncipe de Asturias, Madrid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1618

Introduction: Nausea is a very common symptom related to multiple physical illnesses. In the same way, nausea and other gastrointestinal symptoms are frequently associated with the symptomatology presented at the onset of anxiety or depression. These symptoms can significantly affect the patient's functionality, reduce school or work attendance and lead to consultation with multiple medical specialties. Therefore, it is important that in addition to a good organic screening, psychiatric pathology should be considered in the differential diagnosis. We will present the case of a 22-year-old male with nausea as the main symptom referred to Psychiatry after having seen several specialists and having undergone multiple diagnostic tests without significant findings.

Objectives: To review the association of psychosomatic symptoms with anxiety disorders and/or depression, as well as their management.

Methods: Presentation of a case and review of the available literature on the presence of psychosomatic symptoms, specifically nausea, in patients with anxiety and/or depression.

Results: In patients in whom anxiety and depression were assessed by the Hospital Anxiety and Depression Scale (HADS), 48% reported gastrointestinal symptomatology during the previous year, of whom 12% reported nausea. It has been observed that anxiety had a higher risk for the presence of nausea (OR 3.42) than depression, although the latter also increased the risk of nausea (OR 1.47). The literature shows that interventions such as cognitive-behavioral therapy or pharmacological treatment with selective serotonin reuptake inhibitor (SSRI) drugs independently or in combination are strategies that have demonstrated therapeutic success.

Conclusions: The multidimensional nature of symptomatology such as nausea and other types of psychosomatic symptoms forces us to take a broad view of the symptom. The association of gastrointestinal symptoms and pathologies such as anxiety and/or depression has been demonstrated, so that, after a correct organic screening, mental health professionals should be considered to evaluate the possible management of symptoms that can become so disabling in the life of these patients.

Disclosure of Interest: None Declared

EPV0269

Analysis of the implementation of the collaboration programme between the headache unit and the liaison psychiatry programme

F. Garcia Lazaro*, F. Gotor Sanchez Luengo, E. Garcia Liger del Rincon and A. Luque Budia

Hospital Universitario Virgen del Rocío Sevilla, SEVILLA, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1619

Introduction: Headache is associated with a wide spectrum of comorbid, statistically and biologically related pathological processes. A person with headache is more likely to have a psychological disorder than the rest of the general population, even more so if the headache is chronic. Psychiatric comorbidity has been shown to act as a risk factor in the chronification of headache and may contribute to increased disability. Anxiety and mood disorders are the psychiatric comorbidities that most influence aspects of the disease such as prognosis, response to treatment and even quality of life.

Objectives: To analyse the results of the implementation of a joint consultation between the headache unit and the liaison psychiatry programme.

To evaluate the efficacy of interdisciplinary intervention in patients diagnosed with resistant headache.

Methods: We performed a descriptive analysis of the database of patients included in the headache programme including data on neurological diagnosis, psychiatric diagnosis, type of intervention, referral to psychiatric consultation and number of subsequent revisions.

Results: Diagnoses related to anxious and depressive symptomatology are the most common diagnoses in patients diagnosed with treatment-resistant headache.

In most of the patients analysed in the database a single joint intervention was necessary.

Referral to mental health consultations from the programme did not lead to an increase in urgent demands with a clinical correlation in terms of diagnostic orientation

Conclusions: Joint intervention in the management of these patients has been found to be beneficial in the reinterpretation of symptoms and progressive desensitisation to fear of chronic illness. Training in symptom detection at the psychopathological level is important for professionals from other areas as well as training in interviewing skills.

More studies are needed to analyse the outcome of joint interventions in patients with difficult-to-manage chronic diseases and their comorbidities.

Disclosure of Interest: None Declared

EPV0270

ATYPICAL DEBUT OF BIPOLAR DISORDER IN AN ADOLESCENT: POST-COVID SYNDROME, PARANEOPLASTIC SYNDROME, OR SOMETHING ELSE?

I. Ezquiaga Bravo*, R. M. Cámara, I. Gómez, A. Vilar, A. Rodríguez, M. T. Nascimento, S. Batlle and L. M. Martín

INAD, Parc de Salut Mar, BARCELONA, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1620