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Introduction Lyme disease (LD) caused by the spirochete Borrelia burgdorferi (Bb) results from human contact with rural environments and is transmitted by infected ticks (Ixodes spp.)

Objectives/aims To report a case with LD and to highlight the importance of differential diagnosis in a first psychotic episode.

Methods Case report and systematic review of the literature. Results We report a case of a 19-year-old man that was admitted because of strange behaviour with alienation, perplexity and persecutory delusions. He had one previous admission to an inpatient unit two years prior and was diagnosed with psychosis not otherwise specified. After being admitted to the psychiatric ward a medical work up was completed. The patient had had a long stay in a rural environment; so anti-body specific to Bb was ordered and came positive. LD was diagnosed based on cerebral magnetic resonance imaging (MRI) findings and the presence of Bb in the cerebrospinal fluid. During treatment with anti-psychotic and antibiotic there was a noticeable clinical amelioration correlated with improvement of MRI's perfusion patterns.

Conclusions LD is relatively rare, but physicians need to be aware of typical neuropsychiatric symptoms, given that they may occur months to years after the initial infection. Prompt diagnosis and effective treatment are crucial to avoid the possibly irreversible mental illness. In the evaluation of a first psychotic episode LD should be considered and excluded, principally if there's an epidemiological context and no psychiatric family history. MRI may be another useful asset in the diagnostic evaluation of this condition.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1234

EV0905

The relevance of Paraphrenia: Case report

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Introduction Paraphrenia is a chronic psychotic disorder with a better-preserved affect and minimal disturbances of emotion and volition and a much less cognitive deterioration and personality changes.

Objectives/aims To report a case with probable Paraphrenia and to highlight the importance of the differential diagnosis in a first psychotic episode.

Methods Case report and systematic review of the literature.

Results We report a case of a 41-year-old man without a past psychiatry history that was led to the psychiatry emergency department (PED), by officers, because of strange behaviour and aggressiveness towards his family. In the PED the patient said that his real father was his father-in-law and that his ex-wife was his sister. His mental exam revealed disinhibition, disorganized speech with slightly mood elation, persecutory, mystic

and influential delusions with various delusional interpretations. After being admitted to the psychiatric ward, in compulsatory care, he began treatment and a medical work up was completed. According to the family the patient had begun this strange behaviour four years prior. During the hospitalization it became clear that the patient was experiencing imaginative-confabulatoric multi-thematic delusions, sometimes interviewer guided, without showing cognitive deterioration and retaining his personality.

Conclusions The diagnosis of atypical psychosis or psychosis not otherwise specified is not satisfactory since it agglutinates different conditions together. Paraphrenia is a well-established concept and should be used in order to define a group of psychotic patients who exhibited characteristic symptoms of schizophrenia, minus personality impairment and slower cognitive decline.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1235

EV0906

A systematic report review of Ganser syndrome: 118 years of case studies

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Introduction Ganser syndrome was first described by a German psychiatrist Ganser in 1898, in a patient who showed a peculiar twilight state. Ganser syndrome is defined as the presence of approximate answers, somatic conversion symptoms, clouding of consciousness, and pseudo-hallucinations. The etiology of this disease remains a subject of debate. While the DSM-IV-TR classifies Ganser syndrome under the heading of dissociative disorder, it is not listed as a diagnosis in the DSM-V.

Objectives and aims The purpose of this paper is to review available literature on Ganser syndrome, published in Dutch, English, German, and French for examining the etiological debate, in order to gain insight into the etiology of this disorder.

Methods The study design was a retrospective case series of all published cases since 1898. For this purpose we used the electronic databases PubMed and Embase.

Results Over a period of 118 years, we found 79 papers, describing 117 case reports on Ganser syndrome. It generally occurs in patients who are exposed to somatic disorders or to psychological stress, however, often in absence of a psychiatric disorder.

Conclusions Ganser syndrome remains a controversial disorder in terms of its etiology. Ganser syndrome has been associated with organic disorders, as well as with stressful and intolerable life events. Based on this report, it is noteworthy that this syndrome predominantly occurs in the absence of co-morbid psychiatric disorders and is often associated with stress factors and underlying somatic diseases.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1236