EPP1019

Features of infllammatory reactions and clinical picture in elderly and young patients with schizophrenia

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doi: 10.1192/j.eurpsy.2021.1262

Introduction: It is known that the intensity of inflammation weakens with age, and therefore it is of interest to study the clinical features of schizophrenic process in relation to the level of inflammatory markers.
Objectives: To determine the level of inflammatory markers (the activity of leukocyte elastase (LE) and α1-proteinase inhibitor (α1-PI), autoantibodies (aAB) to neurotrophin S100b and myelin basic protein) in plasma in different years old groups of patients with schizophrenia.
Methods: Two groups of patients with schizophrenia were examined: the 1st group - 19 women aged 60 to 78 years; the 2nd group - 24 women aged 19 to 42 years.
Results: An increase in activity both of LE and α1-PI was found in young patients. This characterizes a balanced inflammatory response. Elderly patients showed a similar increase in the activity of α1-PI, however, LE activity did not exceed the control values. Insufficient LE activity probably characterizes a decrease in the functional activity of neutrophils. The negative correlation was revealed between the activity of LE and TotPsy (PANSS) in the group of elderly patients ($r=-0.62$, $p<05$) and positive correlation between aAB to S100b and TotNeg in both groups ($r=0.56$ and $r=0.49$, $p<05$ respectively). There is relationship between age, the activity of psychopathological symptoms and the rate of development of schizophrenia: the rapid course and variety of disorders at a young age, against the poverty of symptoms and a slow rate in the elderly.
Conclusions: There is relationship between the features of inflammatory reactions and clinical picture in elderly and young patients with schizophrenia.

Keywords: schizophrenia at young and old age; inflammatory markers

EPP1020

A case of late-onset and long term of anti-nmda-receptor encephalitis in a 50-year-old patient with psychosis and cognitive decline

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doi: 10.1192/j.eurpsy.2021.1263

Introduction: Anti-NMDA-receptor encephalitis is a severe rare acute form of encephalitis caused by an autoimmune process with the synthesis of autoantibodies to the glutamate receptors. The average age of onser is estimated to be 23-25 years. A typical clinical picture consist of prodromal, psychotic, areactive, hyperkinetic phases, and a phase of gradual regression of symptoms. The disease usually lasts for a several weeks with spontaneous recovery or fatal outcome and caused by neoplastic process. Our case demonstrates that the course of anti-NMDAR encephalitis is possible at more mature age in the form of a long process with cultural features, without significant catadrome, inflammation and associated neoplastic process.
Objectives: 50-year-old woman complained about hypomnesia, anosmia and dissomnia. The disease began with impaired consciousness, disorientation, seizures and memory loss 4 years ago. After 3 weeks IgG to the herpes simplex and cytomegalovirus were detected. Then after a discharge with no improvement and visit of Lama, the symtoms described above spontaneously reduced and schizophrenia-like psychosis developed, accompanied by mild neurological and severe neurocognitive symptoms, weight loss, intolerance to antipsychotics in minimal daily doses. This state was mantained till 2020.
Methods: Examination included: CBC, metabolic panel, coagulogram, tumor markers, CSF, MRI, PET, specialists.
Results: CBC, metabolic blood analysis, tumor markers - within the reference values. CSF: cytosis 9/3, glucose 5.5 mmol/l, Pandi++, Nonnet-Apeltau+, antibodies to the NMDA receptor - 8. MRI: signs of the consequences of encephalitis. PET: no signs of metabolic activity of the malignant process.
Conclusions: This case brings additional data about a couse, age of onset, duration and trigger factors for anti-NMDAR encephalitis.

Keywords: Anti-N-Methyl-D-Aspartate Receptor Encephalitis; Herpes Simplex; Neurobehavioral Manifestations; schizophrenia-like psychosis

EPP1021

Neuropsychiatric symptoms of multiple sclerosis: A case report

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doi: 10.1192/j.eurpsy.2021.1264

Introduction: Multiple Sclerosis (MS) is an immune-mediated inflammatory demyelinating disease of the central nervous system. Concomitant psychiatric diseases are frequent in MS, with depression and anxiety disorders constituting the majority. The presence of psychotic disorders with MS is rare. Several studies have reported that psychotic symptoms usually develop after the neurological signs of MS and they are mostly linked to the side effects of treatment with interferon or with corticosteroids.