³Centro Hospitalar Universitário Lisboa Norte, Psychiatry, Lisboa, Portugal and ⁴Centro Hospitalar Psiquiátrico de Lisboa, Psiquiatria Geral, Lisboa, Portugal
*Corresponding author. doi: 10.1192/j.eurpsy.2022.1826

Introduction: Hearing music inside our heads is frequent, however some hear it more vividly, constantly and involuntarily. Musical Hallucinations (MH), first described by Baillarger in 1846, are a complex type of auditory hallucination characterized by perception of melodies, music, or songs.

Objectives: This work aims to review the literature considering MH.

Methods: Pubmed and Google Scholar search using MeSH term "musical hallucinations"

Results: MH occurs in 0.16% of the population. They're usually perceived as frightening or annoying. Proposed mechanisms include spontaneous activity triggered by sensory deprivation from hearing impairment, like in visual hallucinations in Charles Bonnet syndrome, and some authors even include MH as a subtype of this syndrome. Indeed, 60% of all patients with MH have hearing impairment or deafness. Other less frequent causes include focal brain lesions involving the auditory pathway and cortex, temporal epilepsy, metabolic or drug intoxication. Psychiatric conditions are uncommon but not impossible, especially in affective disorders. MH most frequently consist in familiar tunes, sometimes of personal significance, religious songs (especially in older patients), childhood songs, folk and popular songs from the radio - suggesting that musical perception is never unlearned but represents a "parasitic memory", an unchangeable memory feature which can be experienced by relevant neuronal circuit stimulation. Most patients with MH were reported to have no extraordinary musical skills. Conclusions: MH are rare and strongly associated with hearing loss, though investigation of other causes should be sought. Treating the underlying cause is important but remission is not guaranteed.

Disclosure: No significant relationships.

Keywords: Hallucination; musical; musical hallucinations; music

EPV1135

A Nightmare's Lullaby: Exploring the concept and relevance of oneiroid cyclic psychosis through a clinical case and review

A. Compaired Sánchez

Hospital Universitario Ramón y Cajal, Psychiatry, Madrid, Spain doi: 10.1192/j.eurpsy.2022.1827

Introduction: Acute psychotic states characterized by clinical lability and dream-like qualities are a staple of classic psychopatology. An excessive focus on diagnostic criteria for bipolar or schizophrenia-spectrum disorders risks missing this particular set of patients; defined through their dynamic presentation as much as by any cluster of symptoms or types of course.

Objectives: To explore the concept and relevance of oneroid-like cyclic psychosis through a clinical case and review.

Methods: We report the case of a 37 year old woman with bipolar disorder (three previous instances of manic episodes with psychotic symptoms) and various gynecological issues that required hormone therapy. After a couple of days having difficulty sleeping, the patient

developed a clinical picture consisting of wide and sudden oscillations between hyperactive and inhibited psychomotor activity, moods of dread and ecstasy, and states of disorganized thought and childlike activities with perplexity and mutism. Frequent behaviors as if experiencing visual alucinations and repeated allusions to feeling as if in a dream. These symptoms lasted for 2-3 weeks, after treatment with risperidone and lithium. A narrative review concerning the case was also performed.

Results: Kleist's 'innate instability' permeates much of the previous literature. Similar entities highlight different issues closely related to various biological rhythms: atypical psychosis and epilepsy, puerperal psychosis and estrogen dysregulation, cyclic psychosis and sleep disorders, delirious mania and effectiveness of electro-convulsive-therapy, etc.

Conclusions: Our findings point to the clinical relevance of oneiroid cyclic psychosis as innate instability. Further studies on the role of biological rhythms and its repercussions on daily practice are required.

Disclosure: No significant relationships.

Keywords: oneiroid syndrome; Mood disorders; biological-rhythm dysregulation; cyclic psychosis

EPV1136

Pseudologia Fantastica: a case report

S. Sneep* and I. De Jong

GGZ Westelijk Noord Brabant, Psychiatry, Halsteren, Netherlands *Corresponding author. doi: 10.1192/j.eurpsy.2022.1828

Introduction: Pseudologia fantastica is a psychiatric phenomenon that occurs equally in men and women (1). The condition was first described in 1891 and contains fantasized events (2). Most of the time the fantasized events are not entirely unbelievable. They are based upon blurred fantasy and reality and are stable over time (1,3). **Objectives:** We present a case of possible pseudologia fantastica to raise awareness about this phenomenon and possible treatment. Methods: A literature search in English was performed using Pubmed with the following MeSh terms 'pseudologia fantastica'. Results: We present a 20-year old women diagnosed with an intellectual disability (IQ=80) and a post traumatic stress disorder. She received treatment in an outpatient setting for a couple of years. The patient was treated by EMDR therapy and individual therapy sessions. She rejected other forms of therapy or any medication. During the treatment her symptoms were getting worse. The symptoms contained an increase of nightmares and moments of dissociation. The patient was telling she wasn't able to eat, sleep and function on a daily basis. In individual sessions she reported lifeevents which worsened over time including; being a victim of rape, seeing her rapist in the subway, being touched and chased by a stranger on her bicycle. Literature search shows that confrontation is one of the treatment methods for this phenomenom.

Conclusions: The treatment of a patient with pseudologia fantastica requires attention for details and acknowledging the possibility of fantasized events, confronting techniques and maintaining an alliance between patient and therapist (2,4).

Disclosure: No significant relationships. **Keyword:** pseudologia fantastica