European Psychiatry S753

### Comorbidity/Dual Pathologies

#### **EPV0234**

## Possible psychotic episode after repeated ayahuasca intake: a case report

E. Prades Marin, A. Martínez Torres\* and P. Sánchez Díez Psychiatry, Hospital Universitario Ramón y Cajal, Madrid, Spain \*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1584

**Introduction:** Ayahuasca is a traditional brew containing the psychedelic 5-DMT (a tryptamine that acts as a 5HT2A-R agonist) used to achieve non-ordinary states of consciousness, with a long tradition among various cultures in ritual and therapeutic contexts. Ayahuasca is being studied as potential treatment in Mental Health, which has led to non-controlled and recreational use. This has led to a rise in the description of side effects, such as substance-induced psychosis.

**Objectives:** To describe a case of a possible psychotic episode related to the intake of ayahuasca brew in a ritual context.

**Methods:** Clinical assesment and bibliographic review of pertinent literature.

Results: We will present the case of a 43 year old woman, who participated in three ayahuasca sessions in three consecutive months. Two days after the last session, she suffered and episode of loss of consciousness, convulsions, loss of streng and paraesthesia in right forearm and righr side of the face and head; and apparition of perceptual alterations and delusions that she did not experience during the trip. Such alterations included the perception of electromagnetic fields (EMF) robbing her of her vital energy and lifeforce. She required ICU treatment for four days, after which se was hospitalized in Internal Medicine Unit and was assessed by Mental Health team. Though the symptoms were coherent with the previous beliefs of the patient, they were clearly exacerbated and interfered with her normal and previous functioning. She was treated with risperidone 1,5 mg, with complete symptom remission.

**Conclusions:** The case presented is consistent with other reports of ayahuasca-induced psychotic symptoms, though with less intensity and duration. We discuss prevalence and repercussions of the rising use of this powerful substance; that must be taken into consideration by clinicians worldwide.

Disclosure of Interest: None Declared

### **EPV0235**

# Dementia as a presentation of motor neurone disease: a case report

A. S. C. Miranda\*, I. Franco and J. Miranda

Psychiatry, Centro Hospitalar de Leiria, Leiria, Portugal \*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1585

**Introduction:** Amyotrophic lateral sclerosis (ALS), the most common disease within motor neuron diseases (MND), and frontotemporal dementia (FTD) belong to a broad spectrum of

neurodegenerative diseases that are sometimes clinically overlapping.

**Objectives:** The aim of the description of this case report is to sensitize professionals to this type of presentation and encourage the investigation of signs and symptoms of motor decline in patients with suspected FTD.

**Methods:** Research in the patient's clinical process. Framing the clinical case in the current literature, searching the terms "fronto-temporal dementia" and "amyotrophic lateral sclerosis" in the Pubmed database.

**Results:** A 71-year-old patient, followed in psychiatry for several years for Dysthymic Disorder. At the end of 2020, he presented cognitive and behavioral changes, with rapid progression, with a marked loss of functionality, compatible with dementia. In 2021, it was noticed a motor decline, which progressively worsened. In this sense, an electromyographic study of the limbs was performed with an abnormal result, compatible with a diagnosis of Motor Neuron Disease.

**Conclusions:** A significant overlap of these two disorders has been observed clinically. Thus, the presentation of a patient with dementia, specifically suspected of having FTD, should ring the bell to the presence of signs and symptoms of motor impairment.

Several studies have been carried out in order to understand the relationship between these entities, and the discussion remains whether their presentation together constitutes or not a form of phenotypic presentation of ALS.

Disclosure of Interest: None Declared

#### **EPV0236**

## Hepatitis B Vaccination in Psychiatric patients in Morocco

B. Zineb<sup>1</sup>\*, T. Aicha<sup>2</sup>, K. Imane<sup>1</sup>, L. Fouad<sup>1</sup> and O. Abderrazak<sup>1</sup>

<sup>1</sup>Ar-razi psychiatric hospital, Faculty of Medecine and Pharmacy and <sup>2</sup>Ar-razi Psychiatric hospital, Rabat, Morocco

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1586

**Introduction:** Severe mental illnesses such as schizophrenia, bipolar disorder and depressive disorder are common worldwide and often have a chronic course.

Due to psychiatric (for example: substance use disorders) and somatic (for example: obesity, cardiovascular disease, diabetes) comorbidities, mortality is higher in these patients than in the general population. Viral diseases are, in addition to cardiovascular diseases and metabolic alterations, among the most common somatic comorbidities in people with severe mental illness.

**Objectives:** The objective of our work was to study the prevalence of vaccination against the viral hepatitis B virus in these patients. **Methods:** For this purpose, we conducted a cross-sectional study of 200 patients hospitalized in the emergency department of our training center. First, we collected sociodemographic and clinical data on patients admitted to psychiatric emergencies: sex, age, diagnosis, duration of evolution, history (medical and surgical, psychiatric, suicide attempts, problematic substance use, previous incarceration). In a second step, we tested for anti-HBS antibodies. **Results:** the majority of our patients were male, the first diagnosis was schizophrenia.

92% of our patients had a substance use disorder, mainly tobacco, followed by cannabis and then alcohol.