

EPP0955

Does risperidone seem safe in patients with antipsychotic-induced leukoneutropenia? Case report

W. Abid*, F. Chérif, H. Trigui, S. Hentati, I. Feki, R. Sallemi and J. Masmoudi

psychiatry “A” department, hedi Chaker University Hospital, sfax, Tunisia

*Corresponding author.

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Introduction: Antipsychotic-related hematological abnormalities have been reported in the literature, but remain a rare complication of some second-generation antipsychotic drugs. It has been suggested that risperidone is the preferred alternative when adverse hematological effects have been induced by conventional antipsychotic drugs. Blood dyscrasia adverse reactions have been reported rarely with risperidone.

Objectives: We aim to call attention to leukopenia as a potential side effect of during treatment with risperidone.

Methods: We report a case in which a patient developed leukoneutropenia during treatment with risperidone

Results: A 46-year-old man was admitted to psychiatric department for aggressive behavior. The patient had a history of right bundle branch block and has been diagnosed with schizophrenia at age of 36 years. This patient had only one psychiatric hospitalization in 2021 where he developed persistent leuko-neutropenia. A viral cause was retained. The patient was discharged on risperidone 4 mg and had been poorly compliant with his antipsychotic medication for the last year.

Currently, the patient was excited, very talkative and refused medication. He received an intramuscular injection of haloperidol 10 mg and chlorpromazine 50 mg. Under these doses, the patient became sedated and his balance sheet showed a leukoneutropenia amounting to 1960 cells/mm³. Then, it was decided to stop chlorpromazine and Haloperidol and put the patient on Diazepam. A complete blood count was done the next day showing that his white Blood Cells (WBC) count went up to 4360 cells/mm³ (neutrophils rate = 62,4 %). The reintroduction of haloperidol with diazepam caused the WBC to fall back to 2000. Haloperidol stopped as a possible cause of the leucopenia. The patient started taking risperidone orally 1 mg daily, which was gradually up titrated to 4 mg daily. Two weeks later the WBC went up to 4680 cells/mm³ (neutrophil rate = 60,4%) three week after stopping haloperidol. However, three days after increasing the dose of risperidone to 5 mg the leukoneutropenia recurred, (WBC = 2960 cells/mm³, neutrophil rate = 41%). When risperidone was reduced to 4 mg, his WBC count remained stable for two weeks (WBC = 2970, neutrophil rate = 48,9%). Clinically, the patient is no longer excited.

Conclusions: Risperidone-induced leuko-neutropenia (RILN) is very unusual and its incidence rate is unknown. Currently, there are no evidence-based alternative antipsychotic recommendations for RILN. For the case presented here, we achieved stabilisation of RILN by dose reduction.

Routine monitoring of the WBC level of patients on risperidone treatment, regardless of their hematological baseline, might be good practice for all psychiatrists. We recommend extending this practice to inpatient and outpatient services.

Disclosure of Interest: None Declared

COVID-19 and related topics 08

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Consultation trends in patients admitted to a Psychiatric Emergency Service before and during COVID-19 pandemic

M. Gomez Ramiro^{1*}, A. Gimenez², G. FICO², M. SAGUE VILAVELLA², M. VALENTI² and M. VAZQUEZ²

¹PSYCHIATRY, HOSPITAL ALVARO CUNQUEIRO, VIGO and ²PSYCHIATRY, HOSPITAL CLINIC, BARCELONA, Spain

*Corresponding author.

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Introduction: The COVID-19 outbreak had significant implications worldwide, including mental health. Consultations in the Emergency Service of the Hospital Clinic of Barcelona varied in terms of reasons for consultations, psychopathology, and other aspects, before and during the pandemic.

Objectives: This study aims to assess differences in the profile of patients admitted within the last three years to the Psychiatric Emergency Service of a third-level hospital, in order to analyze variations in the number of patients visited, diagnoses and admissions throughout the different seasons.

Methods: All adults admitted from 2019 to 2021 to the Psychiatric Emergency Service of Hospital Clinic of Barcelona, Spain, were retrospectively included for analysis and divided into three groups depending on the year they attended the Emergency Service. SPSS v25.0 and R statistics were used in order to compare differences between groups.

Results: A total of 13677 adult individuals who attended the psychiatric emergency service of Hospital Clinic of Barcelona between 2019 and 2021 were included in the analysis. 4814 patients were visited in 2019, 4007 in 2020 and 4856 in 2021. The majority of patients were male (50.1%), with a mean age of 40.47 years (SD 15.83). In terms of acute admission rates, 24.6% of the total sample were hospitalized in an acute psychiatric unit, whereas in the spring of 2020, 34.3% of patients attending the Emergency Service were hospitalized. This revealed significant differences when compared with spring of 2019 and 2021 and with the rest of seasons ($p < 0.05$). With regard to suicide attempts and intentional poisonings, significant differences were only observed between winter of 2019, with the lowest rate, and autumn of 2020, with the highest proportion. In spring of 2019, the lowest rate of patients attending with suicidal ideation was observed,