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Introduction: People with borderline personality disorder are at higher risk of repeating suicidal behavior. At the same time, numerous publications have demonstrated the relationship between cocaine dependence and suicide attempts of repetition.

Objectives: Review the relationship between cocaine addiction, borderline personality disorder and repeated suicide attempts. Present through a clinical case the effectiveness of a comprehensive and multidisciplinary therapeutic plan with different mental health devices.

Methods: To review the psychopathological evolution of a patient with a diagnosis of borderline personality disorder; dependence to the cocaine; Harmful alcohol consumption and suicidal behavior from the beginning of follow-up in mental health services to the present. Review the existing scientific evidence on the relationship between cocaine addiction and repeated suicide attempts. Analyze the efficacy of the different treatments available.

Results: This is a longitudinal and retrospective study of the psychiatric history and evolution of a clinical case since the implementation of an individualized therapeutic program and the favorable results obtained. Intensive outpatient follow-up was carried out for high suicide risk and hospitalization in a psychiatric hospitalization unit, day care centre and therapeutic community.

Conclusions: At present, the patient remains in abstinence with remission of suicidal ideation. The literature has shown the usefulness of intensive mental health follow-up programs to achieve remission of suicidal ideation and maintain abstinence from illegal substances.

Disclosure: No significant relationships.

Keywords: Borderline personality disorder; dependence to the cocaine; suicide attempts of repetition; individualized therapeutic program

EPV0114

Psoriasis and psychiatric disorders

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Introduction: Psoriasis is a common psychophysiological chronic skin disease with an important impact on patient's quality of life. The prevalence of psychiatric conditions in psoriasis may range from 24% to 90%. The mechanisms that may explain this relationship still remain debatable.

Objectives: The purpose of this work was to report two cases of psychiatric comorbidities associated with psoriasis and to discuss the possible etiopathogenic mechanisms behind this connection.

Methods: To report two cases of psychiatric comorbidities associated with psoriasis.

Results: Case1 Mr. A.K. is a 30-year-old male patient. He was admitted to our department in February 2020 for acute mania with psychotic features. The patient reported that since 2010, he was treated for psoriasis with local treatment (cortisone cream). The lesions did not grow or expand. Case2 Mr.A.B. is a 27-year-old male patient, with past history of psoriasis under local treatment. He is treated since 2019 in our department for schizophrenia.

Conclusions: High levels of pro-inflammatory cytokines observed in psoriasis may in part explain the associated psychiatric disorders. The psychodermatologic approach would be beneficial for the adequate management of patients suffering from psoriasis.

Disclosure: No significant relationships.

Keywords: psoriasis; Psychiatric comorbidities

EPV0115

Cytokines status in multiple sclerosis patients with comorbid recurrent depressive disorder

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Introduction: The presence of some common immunological pathogenesis mechanisms in multiple sclerosis and depression suggests the possibility of comorbid depressive disorder formation in multiple sclerosis patients, which significantly worsens their quality of life and patient's compliance. In this regard, the depressive pathology diagnosis in people suffering from multiple sclerosis acquires important scientific and practical value.

Objectives: The aim of the study was the cytokine status peculiarities identification in multiple sclerosis patients with comorbid recurrent depressive disorder (F33).

Methods: The cytokines content in patient's blood mononuclear cells culture supernatants was carried out by ELISA. The recurrent depressive disorder diagnosis was established based on ICD-10 criteria. The depressive disorders symptoms severity was determined according to the M. Hamilton and A.T. Beck depression scales, as well as during the clinical interview

Results: A higher production of IL-6 was noted in multiple sclerosis patients with mild recurrent depressive disorder (F33.00), in contrast to patients without the affective symptoms. The IL-1 β , TNF- α , IL-6 contents in the blood mononuclear cells culture supernatants of patients with severe recurrent depressive disorder (F33.2) exceeded the corresponding parameters of patients with mild depressive symptoms. A direct correlation between the depression severity and IL-1 β , TNF- α , IL-6 spontaneous production by blood mononuclear cells of patients with multiple sclerosis was found.

Conclusions: The severity of recurrent depressive disorder correlates with a change in the parameters of the cytokine status: severe depressive symptoms are accompanied by a change in the functional activity of immune cells and an increase in the production of cytokines synthesized by type I T-helpers.

Disclosure: No significant relationships.

Keywords: Multiple sclerosis; comorbid recurrent depressive disorder; Cytokines status

EPV0116

Delusional disorder and tuberculosis: A clinical caseV. Podence Falcão^{1*}, R. Avelar¹, C. Abreu² and M. Heitor¹¹Psychiatry, Hospital Beatriz Ângelo, Loures, Portugal and ²Internal Medicine, Hospital Beatriz Ângelo, Loures, Portugal

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Introduction: Tuberculosis is still a challenging disease, infecting around a third of the world's population. As comorbidity with mental disorder is common, it is relevant to associate them at a diagnostic, therapeutic and prognostic level.

Objectives: We present a clinical case describing a patient with psychosis, further diagnosed with tuberculosis during psychiatric treatment. Moreover, we present a summarized revision of the state of the art.

Methods: Revision of the state of the art, drawing from PubMed and using the keywords “mental health”, “psychosis” and “tuberculosis”, in the last 10 years.

Results: Male, 61 years old, heavy smoker and alcohol drinker. Admitted for allegedly feeling “worms” in his body. After medical examination, a weight loss of 13 kg in five months and symptoms compatible with tenesmus stood out. Following diagnostic tests, the patient was diagnosed with Ekbohm Syndrome and Ganglionar Tuberculosis; he was then medicated with the adequate antipsychotic and tuberculostatic agents, which resulted in overall clinical improvement.

Conclusions: This case illustrates the relationship between tuberculosis and mental disorders, in a patient with a low literacy level and a precarious socioeconomic background, known risk factors for mental disorder in patients with tuberculosis and are often associated with poor therapeutic adherence. Although proper treatment of the mental disorder is key to reducing the risk of tuberculostatic dropout, the stigma of mental disorder and tuberculosis decreases the probability of these patients seeking proper treatment. Thus, we alert the medical community for the possibility of psychiatric comorbidity in patients with diagnosed tuberculosis – and vice-versa –, allowing for an early intervention,

Disclosure: No significant relationships.

Keywords: mental health; psychosis; tuberculosis

EPV0120

Compartment syndrome and suicide attemptE. Rodríguez Vázquez^{1*}, C. Capella Meseguer², J. Gonçalves Cerejeira¹, I. Santos Carrasco¹, M. Queipo De Llano De La Viuda¹, A. Gonzaga Ramírez¹ and G. Guerra Valera¹¹Psiquiatria, Hospital Clínico Universitario de Valladolid, Valladolid, Spain and ²Psiquiatria, HCUV, Valladolid, Spain

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Introduction: The compartment syndrome is a pathological condition characterized by a decrease, or even interruption, of the microcirculation within a soft tissue compartment. There have been a few cases reported about compartment syndrome due to a suicide attempt.

Objectives: To present an unusual complication of an autolytic attempt

Methods: A descriptive study of a clinical case and literature review

Results: A 49-year-old woman, divorced. With no psychiatric history and no somatic antecedents. Comes to the hospital after been found lying face down on the bathroom's floor for 48 hours, next to her two empty blister packs of lorazepam and naproxen. Her partner says they argued two days ago. Brain CT: with no abnormalities. Blood analysis: metabolic acidosis with rhabdomyolysis and kidney failure. She presents ischemic injuries in both inferior extremities with right foot ischemia and with no pedal pulses. Compartment syndrome is diagnosed, being necessary a bilateral fasciotomy and later a right lower extremity amputation. Initiates referral from Vascular Surgery for self-poisoning. She refers to low mood and mild anxiety due to work and relationship issues/problems. She accepts that she self-poisoning only to attract her partner's attention after the argument. The examination shows logical thought, emotional lability, good judgement, future-oriented without suicidal ideation. Clinical judgement: acute stress reaction.

Conclusions: The compartment syndrome is a rare complication of the suicide attempt. Our patient suffered a compartment syndrome lying on the bathroom's floor for 48 consecutive hours without apparent trauma and no somatic antecedents. This syndrome could be developed by high naproxen and lorazepam intake.

Disclosure: No significant relationships.

Keywords: liaison psychiatry; Suicide Attempt; compartment syndrome

EPV0121

Psychocultural experiences of medical students in simulated care in cases of type 2 diabetes mellitus at a public university in southeastern Brazil: A qualitative studyE. Turato^{1,2*}, G. Lavorato-Neto² and M.C. Parisi¹¹Medical Psychology And Psychiatry, University of Campinas, Campinas, Brazil and ²Lpcq - Laboratory Of Clinical-qualitative Research, University of Campinas, Campinas, Brazil

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Introduction: The generalist assistance at the Primary Attention is fundamental to face the increase of type 2 diabetes mellitus cases through the relationship physician-patient. This sets the therapeutic plan and its continuous review. Therapeutic Plan could be affected by the same psychocultural phenomena related to the increasing cases numbers of DM2. Therefore, new trends in Medical Psychology have been promoted during medical undergraduate course. These incorporate methods and concepts of Liberal Arts to develop specific psychosocial management skills to DM2 clinic.

Objectives: AIM: To understand the experience of medical students in the simulated care of DM2 cases in two different moments: 1) to diagnose and start treatment; 2) start insulinization.

Methods: METHOD: Clinical-Qualitative design; data collected through an semidirected interview of open-end questions in depth; thematic analysis generated categories discussed in light of Medical Psychology of psychodynamic framework.