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Antipsychotics induced constipation in patients with mental disorders. treatment suggestion with prucalopride in refractory cases. case report and literature review

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Introduction: Successful stabilization of patients with mental disorders requires most of the times the use of more than one antipsychotic medications with increase prevalence of clozapine in refractory cases. Constipation consists one of the most debilitating side effect of the therapy, which gradually progresses to a chronic state of bowel movement dysfunction, with recurrent episode of paralytic ileus of various severity.

Objectives: We describe the case of a middle age male treated with clozapine for refractory mental disorder, who developed ileus and subsequent bowel dysfunction not amenable to laxatives.

Methods: The acute episode have been treated conservatively with nasogastric decompression, intravenous replacement of fluids and electrolytes, antibiotics chemoprophylaxis and low molecular weight heparin. His overall physical status was unremarkable for obesity, diabetes, hypertension, allergies, previous operations and a former endoscopic evaluation conducted in the recent past, which had ruled out malignant neoplastic disease.

Results: A course of per os prucalopride have been instituted, which showed preliminary promising results in restoring proper bowel movements, without any serious side effect and without the need to discontinue his course with antipsychotics. Prucalopride is a 5 HT4 agonist which selectively binds to the receptors of the intestine, resulting in muscular contractions as well as clorium secretion from the mucosa promoting an osmotic defecation. The substance has been extensively use in the treatment of irritable bowel disease of the chronic constipation type.

Conclusions: We suggest the more systematic use of this agent in this group of patients after proper endoscopic evaluation and restoration of all secondary causes of constipation.

Disclosure: No significant relationships.

Keywords: CONSTIPATION; PRUCALOPRIDE

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Clinical factors affecting functioning in patients with schizophrenia or schizoaffective disorder

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Introduction: Schizophrenia is often associated with impaired functioning abilities due to its disabling symptoms.

Objectives: to determine the clinical factors that impact the functioning in stabilized patients withschizophrenia and schizoaffective disorder.

Methods: We conducted a cross-sectional, descriptive and analytical study. It was carried out on an outpatient population with schizophrenia or schizoaffective disorder diagnosis. We used the Functional Assessment Staging Scale (FAST) to measure the functional capacity, the PANSS to assess psychosis symptom severity and the Calgary scale to screen for comorbid depression.

Results: Seventy-five patients were included with 61 males (81.3%). The mean age was 39.81 ± 9.96 years. The mean sore of the Fast scale was 33 ± 14.95. 90% of our patients scored higher than 11 on the FAST scale revealing a functioning deficiency. 18.7% scored higher than 6 on the Calgary scale revealing a comorbid depression . No significant correlations were found between the FAST score and the age of patient, the gender,the age of onset of psychosis, the duration of untreated psychosis and the number of life-time episodes. Scores of PANSS were significantly higher among patients with a functioning deficiency (p<0.00).No significant correlation was found between the FAST score and the Calgary score.

Conclusions: Our study suggests that the severity of residual positive and negative symptoms affects negatively the functioning of patients with schizophrenia or schizoaffective disorder. Thus, targeting those symptoms in the treatment may have significant functional benefits.

Disclosure: No significant relationships.

Keywords: functioning; schizophrénia

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Is it psychosis? Heads or tails. A case report

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Introduction: Psychotic disorders usually come with diagnosis difficulties, especially when the clinical presentation is recent or if there are organic factor associated. Regarding this, we propose the clinical case of a man 47 years old without psychiatric history, who is brought to the hospital after being run over by the subway. At his arrival, he verbalizes delirious thoughts of persecution and harm.

Objectives: The objective is to emphasize the importance of making an appropriate somatic study in psychosis cases, especially when we don't know the time of setting or we can't make a psychiatric interview in optimal conditions.

Methods: The study included a blood test including methemoglobine, cranial tomography, serologies and a heavy metals test. We reviewed the scientific literature in Pubmed and Web of Science about the possible association between the psychiatric and the dermatological symptoms.

Results: During his admission, the patient recognizes delusional thoughts of harm since he was young and he was so frightened because of this that he tried to commit suicide in the subway. Moreover, he also thinks that silver can heal any disease, so he