

**Objectives** We aim to expose the possible organic etiology of a hoarding disorder case with atypical presentation.

**Materials and methods** We present a case of a 48 years old male patient who was brought to the hospital by the police after being reported for unhealthy conditions in his home. In the home visit paid by the Social Services an excessive hoarding of objects and trash was detected. A possible hoarding disorder was diagnosed in the psychiatric assessment. Among other diagnostic test, a brain CT was conducted, in which a frontal meningioma was identified. After surgical treatment, hoarding symptoms diminished significantly.

**Discussion** A significant part of the hoarding disorders are attributed to primary psychiatric disorders, resulting in potentially treatable organic pathology going unnoticed.

**Conclusion** It's important to rule out organic etiology before proceeding to make a definitive hoarding disorder diagnosis, optimizing that way the treatment options.

**Keywords** Hoarding; OCD; Meningioma

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EV0728

### Knowledge takes up space, a family affair

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**Introduction** Previous research suggests that hoarding aggregates in families and is associated with health, safety risks and family problems. Hoarding symptoms appear to be more common among first-degree relatives of people who hoard. A predominance of shared hoarding disorder has been observed among female relatives.

**Objectives** We present an atypical case report describing hoarding symptoms among first-degree male relatives who present two different subtypes of hoarding disorder.

**Materials and methods** We report the case of a 38 years old male patient, attended for the first time by the mental health services at the age of 22, and being diagnosed of severe OCD at that moment. In the home visit paid by the social services, an excessive object hoarding was observed, including the presence of over 40,000 books.

Moreover, they found a 38 years old man looking severely deteriorated; when they ask him about it, the patient's father admits to having been isolated in the house for almost 14 years. Hoarding history was gathered, through the acquisition of various objects by the patient's father, dating back to over 30 years ago.

**Discussion** The harmonic coexistence for over a decade between two patients affected with a hoarding disorder with two different clinical setting subtypes was only made possible by the complementary nature of their symptoms.

**Conclusion** The hoarding disorders amongst more than one person living under the same roof are uncommon, can present themselves in both genders and can exhibit different symptoms.

**Keywords** Hoarding; OCD; Genetics

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EV0729

### About a case suicide attempt as a trigger of remission in obsessive and compulsive disorder

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**Introduction** This is the case of a 73 year old woman with a late onset, severe and refractory obsessive-compulsive disorder who experimented a sudden remission after a frustrated suicide attempt.

**Objective** Our target is to make a reflection about the relation between traumatic closeness to own death and neurosis spontaneous remission.

**Method** Patient has been interviewed and her medical record studied.

**Results** Patient's psychiatric history shows major depressive disorder, recurrent (ICD 10 CM-F33). Patient is a housewife with primary education. In her psychobiography distinguish a conflictive relationship which probably acted as a trigger for obsessive-compulsive symptoms. These symptoms include obsessive thoughts of contamination, ritual hand washing and avoid contact with others people. In the course of the last 10 years, since the OCD (ICD 10 CM-F42.2) diagnose, the patient has been through a wide therapeutic arsenal, from cognitive-behavioural psychotherapeutic interventions to psychopharmacological treatment, resulting with limited effectiveness. The last treatment was fluoxetine 200 mg (0–0–1) and pregabalin 300 mg (1–0–1). Subsequently, the patient underwent a failed suicide attempt by hanging. After physical recovery, all OCD symptoms had subsided.

**Conclusions** Traditionally, literature and philosophy considered catharsis as a purifying experience, and Breuer and Freud introduced this concept in modern psychology as a therapeutic method. More recent authors as Yalom have correlated the closeness to death as a stress factor with radical change in life's perspective and attitude. Although current research presents contradicting data about healing effectiveness through a catharsis processes, this case exposes a clear example of positive outcomes in this assumption.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EV0730

### Adenylate-cyclase activity in obsessive-compulsive patients

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**Introduction** A possible role of second messengers, such as cyclic adenosine monophosphate (cAMP) signalling, in the development of obsessive-compulsive disorder (OCD) has been recently postulated.

**Aims** The aim of the present study was to explore and to compare the adenylate cyclase (AC) activity in both basal conditions and after the stimulation by isoprenaline (ISO) in platelets of OCD patients and healthy control subjects. The AC activity was measured both in the absence and in the presence of  $\alpha$ - and  $\beta$ -adrenoreceptor antagonists.

**Materials and methods** Forty patients were included in the study and compared with healthy volunteers. Biological assays were carried out with a method developed by us.

**Results** The basal AC activity was similar in both groups. The addition of 10  $\mu$ M ISO enhanced significantly ( $P < .05$ ) platelet basal AC