

The diagnosis of Othello syndrome associated with SDD was retained.

Our therapeutic strategy has been to put the patient on quetiapine, reduce the doses of levodopa, add a dopamine agonist and involve psychoeducation of the patient and his family. Evolution has been marked by the reduction of delusions of jealousy.

Conclusions: This case reports a rare case of delirium of jealousy induced by the misuse of dopaminergic drugs in a patient with PD in its early form. These complications can have catastrophic consequences for the patient. Researching and recognizing these psychiatric manifestations should help avoid devastating consequences.

Disclosure: No significant relationships.

Keywords: Dopaminergic dysregulation syndrome; Parkinson; Othello syndrome

EPV0308

A case of dissociative identity disorder and attention deficit hyperactivity disorder comorbidity

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Introduction: Dissociative identity disorder(DID) is characterized by the existence of two or more distinct identities which involve changes in consciousness, emotion, memory, and behavior. It is associated with childhood traumatic experiences and other psychiatric disorders. Comorbidity in DID can lead to complex clinical presentations, poor treatment responses. Thus, it is crucial to identify patients with comorbidity and take them into the treatment plan.

Objectives: We aim to report a case of DID and Attention-Deficit/Hyperactivity Disorder(ADHD) comorbidity.

Methods: A case report is presented alongside a review of the relevant literature regarding “dissociative identity disorder” and “attention deficit hyperactivity disorder”.

Results: We describe the case of a 39-year-old woman with DID, onset at age 25, who had consistently responded poorly to long-term psychotherapy and pharmacological treatment. She presented with anxiety, distinct personality states, alterations in memory, consciousness and behavior problems in functioning, and high Dissociative Experiences Scale(DES) scores. Throughout the interviews, we noticed that she had limited attention, excess movements. After a detailed evaluation, diagnosis of ADHD is established, using the Diagnostic Interview for ADHD(DIVA) and ADHD Self-Reporting Scale(ASRS). Methylphenidate was prescribed in addition to previous medication. Improvement in the severity of both ADHD and DID symptoms was presented with lower scores in DES and ASRS after the introduction of methylphenidate with progressive dose adjusting till 60mg/day.

Conclusions: Although previous studies demonstrated ADHD symptoms are related to dissociation, there is no well-established strategy for this. We believe that this case report provides a better approach to the comorbidity of ADHD and DID.

Disclosure: No significant relationships.

Keywords: disorder comorbidity; Dissociative Identity disorder; Attention Deficit Hyperactivity Disorder; methylphenidate

EPV0310

Dual Diagnosis, Double Trouble

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Introduction: Many individuals with severe mental illness (SMI) have substance use disorder comorbidity. Dual diagnosis makes the approach and management of these patients even more challenging since the lack of improvement in either pathologies can lead to a deterioration of both.

Objectives: To illustrate, through the presentation of two cases, the clinical challenges in managing a patient with dual diagnosis

Methods: Clinical case presentation through retrospective review of clinical notes and non-systematic literature review on this topic

Results: We present the clinical cases of two women diagnosed with Bipolar Disorder and (poly)Substance Use Disorder since adolescence, who have a history of multiple hospitalizations due to mostly manifold symptoms. The complexity of case management is evident, both at the pharmacological level and in psychosocial intervention. This is aggravated by the difficulty in maintaining adherence to the therapeutic project and frequent relapses.

Conclusions: Current evidence points to the beneficial effect of a combined pharmacological and psychosocial approach, which must be comprehensive, individualized and require differentiation at various levels that are difficult to achieve and make the treatment of these situations an even greater challenge.

Using illustrative examples, this review draws attention to the practical difficulties in managing situations where substance use is associated with SMI.

Disclosure: No significant relationships.

Keywords: substance abuse; comorbidity; dual diagnosis

EPV0311

Neuroimaging Correlates of Post-Traumatic Stress Disorder in Traumatic Brain Injury: A Systematic Review of the Literature

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Introduction: Neuroimaging has been a highly utilized technique for studying traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) independently of one another, however, neuroimaging has increasingly been identified as a useful tool in better understanding TBI-related psychiatric conditions, such as PTSD.

Objectives: To complete a systematic review of the literature examining neuroimaging findings in TBI-related PTSD and to highlight the current literature’s limitations in order to strengthen future research.