Methodology This cross-sectional study involved a sample of 30 patients and 11 doctors. An adapted and culturally validated version of the Communication Assessment Tool was used for data collection. Data were analysed in IBM SPSS Statistics  $^{\oplus}$ , version 24. Results Male patients constituted 86.7% of the sample and mean age was  $46.7\pm13.3$ . The overall mean percentage of items rated as excellent by patients was 57.4%. On the other hand, external observer percentage of excellent scores was much lower when compared with patients' scores. Single, divorced or widower/widow patients, patients with higher educational level and patients with shorter number of years in medical treatment gave significantly higher scores to psychiatrists' communication. Patients' sex, age, occupation residence and family type did not yield statistically significant effects on patients' ratings.

Conclusions Communication is at the heart of psychiatrists' daily practice. Many communication styles might be needed, depending on the nature of clinical encounters and patient expectations. Specific training is required to optimise psychiatrists' communication skills on everyday practice.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1620

#### EV1291

# Sexual-dimorphism of the planum temporale in schizophrenia: An MRI study

A. Pigoni <sup>1,\*</sup>, G. Delvecchio <sup>2</sup>, C. Perlini <sup>3</sup>, M. Barillari <sup>4</sup>, M. Ruggeri <sup>3</sup>, C. Altamura <sup>1</sup>, M. Bellani <sup>3</sup>, P. Brambilla <sup>1</sup>

<sup>1</sup> Fondazione IRCCS Ca' Granda Ospedale Maggiore Policlinico, Department of Neurosciences and Mental Health, Milano, Italy
<sup>2</sup> IRCCS "F. Medea" Scientific Institute, Department of Neuroscien

<sup>2</sup> IRCCS "E. Medea" Scientific Institute, Department of Neurosciences, San Vito al Tagliamento, Italy

<sup>3</sup> University of Verona, Department of Neurosciences, Biomedicine and Movement Sciences, Section of Clinical Psychology, Verona, Italy <sup>4</sup> Azienda Ospedaliera Universitaria Integrata Verona, Section of Radiology, Verona, Italy

\* Corresponding author.

Introduction Anatomical alterations in the Superior Temporal Gyrus (STG) have been reported in schizophrenia. The STG is one of the most asymmetric and lateralized structure of the brain, and the process of lateralization seems to vary according to gender. Although it has been suggested that patients with schizophrenia do not show normal brain lateralization, only few studies investigated it in the STG considering the effects of sex.

Objectives The objective of this study is to evaluate sexual dimorphism in STG volumes in a sample of patients with schizophrenia compared to age-and sex-matched healthy controls.

Methods Seventy-two right-hander males (40 schizophrenia patients and 32 controls) and 45 right-hander females (18 schizophrenia patients and 27 controls) underwent clinical evaluation and a 1.5 T MRI scan. Gray and white matter volumes of regions of interests within the STG were detected, including the Heschl's Gyrus (HG) and the planum temporale (PT).

Results Female patients with schizophrenia presented a reduction in left PT gray matter volumes (F=4.58, P=0.03) and a lack of the normal PT asymmetry index (t=0.27; P=0.79) compared to female controls (t=5.47; P<0.001). No differences were found between males for volumes or laterality. Also, in patients with schizophrenia STG gray and white volumes negatively correlated with positive symptoms (t=0.33, t=0.02 and t=0.29, t=0.03 respectively), whereas left PT gray matter volumes were negatively associated to duration of illness (t=0.27, t=0.04).

Conclusions Sexual dimorphism plays a key role on PT in schizophrenia, underlying the importance of gender as a modulator of brain morphology and lateralization of schizophrenia.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1621

#### FV1292

### A case of delusional disorder

O. Porta Olivares 1,\*, M. Juncal Ruiz 2

B. Fernández Abascal Puente<sup>2</sup>, M. Gómez Revuelta<sup>3</sup>,

M. Pérez Herrera<sup>2</sup>, J.L. Garcia Egea<sup>4</sup>, L. Garcia Ayala<sup>5</sup>,

N.I. Nuñez Morales<sup>5</sup>, R. Landera Rodríguez<sup>1</sup>,

G. Pardo de Santayana Jenaro<sup>2</sup>, L. Sánchez Blanco<sup>2</sup>

<sup>1</sup> Hospital Universitario Marqués de Valdecilla, Usm López Albo, Santander, Spain

<sup>2</sup> Hospital Universitario Marqués de Valdecilla, General Psychiatry, Santander, Spain

<sup>3</sup> Hospital Úniversitario de Álava, Inpatient Unit, Vitoria-Gasteiz, Spain

<sup>4</sup> Hospital Universitario Virgen del Rocío, General Psychiatry, Sevilla, Spain

<sup>5</sup> Hospital Universitario de Álava, General Psychiatry, Vitoria-Gasteiz, Spain

\* Corresponding author.

Introduction Functioning of patients with delusional disorder may be impaired, particularly if the delusional thinking is chronic rather than episodic. They refuse to characterize their beliefs as false and view opposing views with surprise, if not hostility and disdain, dismissing or ignoring them, and continuing their struggle to find resolution or restitution for the wrongs they have endured or the illnesses from which they suffer. They typically reject and often resent the suggestion that they are mentally compromised. They are a difficult group to engage clinically, often refusing to meet with a clinician about their delusions and/or to take medication. The first-line treatment of delusional disorder is antipsychotic medication rather than other clinical interventions. Patients with the disorder often reject psychiatric treatment, it is particularly important that medication be prescribed in the context of a therapeutic relationship that includes support, education, encouragement of healthier pursuits, and discouragement of damaging, delusioninspired actions.

Methods We describe a case of a 55-year-old woman with a delusional disorder that was diagnosed 4 years before. The supervision of the right take of the treatment was not possible and the intensity of behavioral disturbances increased. Then we started the treatment with long-acting injectable aripiprazole.

Results Within the 4 months following the start of treatment, her mental state improved by attenuation of psychotic symptoms.

Conclusions Long-acting aripiprazole could be an effective tool for treatment of psychotic symptoms in patients with no insight and difficulties to check the proper treatment take.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1622

### EV1293

## A case of pharmacologic extrapyramidal syndrome

O. Porta Olivares 1,\*, M. Juncal Ruiz 1,

B. Fernández Abascal Puente<sup>1</sup>, M. Gómez Revuelta<sup>2</sup>,

G. Pardo de Santayana Jenaro <sup>1</sup>, L. Sánchez Blanco <sup>1</sup>,

R. Landera Rodriguez<sup>1</sup>, A.B. Pérez Santos<sup>3</sup>,

F. Arnaiz de las Revillas Almajano<sup>3</sup>

<sup>1</sup> Hospital Universitario Marqués de Valdecilla, General Psychiatry, Santander, Spain

<sup>2</sup> Hospital Úniversitario de Álava, General Psychiatry, Vitoria-Gasteiz, Spain

- <sup>3</sup> Hospital Universitario Marqués de Valdecilla, General Medicine, Santander, Spain
- \* Corresponding author.

Introduction More than 60% of patients receiving intensive treatment with first generation antipsychotic manifest some type of clinically significant extrapyramidal side effects. Parkinsonian syndrome is the most common and is characterized by rigidity, tremors, akinesia and bradykinesia and usually improves with discontinuation of antipsychotic drug or anticholinergic association. It is a 60-year-old man, married with two children. Initiates contact with mental health in 2013 with a diagnosis of adjustment disorder. In February 2014 he requires hospitalisation, establishing the diagnosis of delusional disorder and starting treatment with long-acting injectable paliperidone palmitate (100 mg/month) with remission of psychotic symptoms in a few days. When we receive the patient in our clinic, he presents parkinsonian extrapyramidal symptoms (UKU subscale: 18), with significant functional limitation. We decrease the dose to 75 mg/month and an anticholinergic was added without improvement of Parkinsonian clinic, so we decided to switch to long-acting injectable aripiprazole 400 mg/month, objectifying complete remission of extrapyramidal syndrome (UKU subscale:

Conclusions The mechanism of action of aripiprazole m LAI (partial agonist of D2 receptors in the brain) without decreases in the nigrostriatal dopamine pathway, of improving extrapyramidal effects associated one other antipsychotics.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1623

#### EV1294

# Ekbom syndrome in a visually impaired patient with alcohol abuse and OCD: A case report

A. Portilla Fernandez <sup>1</sup>,\*, L. Montes Reula <sup>2</sup>, H. Saiz García <sup>3</sup>, R. Ortigosa Aguilar <sup>4</sup>, A.S. Rosero Enriquez <sup>5</sup>,

A. Ballesteros Prados <sup>6</sup>

- <sup>1</sup> Buztintxuri Outpatient Clinic, Psychiatry, Pamplona, Spain
- <sup>2</sup> Ermitagaña Outpatient Clinic, Psychiatry, Pamplona, Spain
- <sup>3</sup> Navarra Hospital, Psychiatry Department, Pamplona, Spain
- <sup>4</sup> Clínica Universidad de Navarra, Psychiatry, Pamplona, Spain
- <sup>5</sup> Navarra Hospital, Psychiatry, Pamplona, Spain
- <sup>6</sup> Estella Outpatient Clinic, Psychiatry, Estella, Spain
- \* Corresponding author.

This is a case report of a 63-year-old patient with no previous attentions in mental health. He is referred by his general practitioner because he presents wounds all over his body. He reports that there is a plague of bugs at his place that bite him everywhere. Therefore, he scratches continuously, trying to remove the stingers, and injuring himself all over. The family ensures there are no bugs at all, but the patient threatens to set fire to the house in order to extinguish the plague or even kill himself. An OCD with cleaning compulsive behavior was also present since many years, as well as an alcohol abuse. The patient required hospitalization in the psychiatry service. Organic cause for the disorder was discarded. Long-acting injectable aripiprazol was introduced and the patient stopped drinking. Progressively, the delusional symptoms began to subside. Now he maintains no awareness of illness but he says the bugs are disappearing and, at least, they do not bite him anymore. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1624

#### EV1295

## Dopamine, glutamate and biotypes in the future of schizophrenia

H. Prata-Ribeiro 1,\*, A. Ponte 2, G. Luísa 2

- <sup>1</sup> Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Psiquiatria Geral e Transcultural, Coimbra, Portugal
- <sup>2</sup> Centro Hospitalar Psiquiátrico de Lisboa, Serviço de Esquizofrenia, Lisboa, Portugal
- \* Corresponding author.

Introduction Approximately a third of patients with schizophrenia show limited response to antipsychotic medication. As several studies have been suggesting new classifications to schizophrenia, our aim is to review different hypothesis and seek a new way of approaching patient's treatment in day-to-day practice.

Methods The methods we used consisted on reviewing several papers that have recently been published on the area of classification and treatment of schizophrenia, considering an approach to the findings that enables a practical and clinical advantage in the area.

Discussion New studies suggest that neuroimaging measures of dopamine and glutamate function might provide a means of stratifying patients with psychosis according to their response to treatment. Some of those studies associate treatment response with the anterior cingulate level of glutamate and striatal dopamine synthesis capacity. Other study identified three biotypes with different outcomes to psychosis, reaching a stronger association between biotypes as predictors of illness severity than the DSM-V classification. If a correlation between these studies was found, we would be able, in theory, to predict the response to treatment using simple and affordable neurobiological measures.

Conclusion Associating the anterior cingulate glutamate levels, the striatal dopamine synthesis capacity and biotypes hypothesis in schizophrenia, one can expect to be possible to predict the degree of response to treatment, based on more affordable methods to day-to-day clinicians than the measure of neurotransmitter levels, enabling the regular clinicians to narrow their pharmacological options for patients, achieving better results in the approach to schizophrenia.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.01.1625

#### EV1296

## Hyperthermia and neuroleptic malignant syndrome-Case report

K. Puljić<sup>1,\*</sup>, M. Herceg<sup>1</sup>, V. Jukić<sup>2</sup>

- <sup>1</sup> University Psychiatric Hospital Vrapce, Department of Biological Psychiatry, Zagreb, Croatia
- <sup>2</sup> University Psychiatric Hospital Vrapce, Department of Forensic Psychiatry, Zagreb, Croatia
- \* Corresponding author.

Neuroleptic malignant syndrome (NMS) is a rare, but life-threatening, idiosyncratic reaction to neuroleptic medications that is characterized by fever, muscular rigidity, altered mental status, and autonomic dysfunction. NMS often occurs shortly after the initiation of neuroleptic treatment, or after dose increases. Malignant hyperthermia (MH) or malignant hyperpyrexia is a rare life-threatening condition that is usually triggered by exposure to certain drugs. The 46-years-old female patient was diagnosed schizophrenia at the age of 22. Currently, she is hospitalized due to psychotic decompensation. The patient was admitted with following daily dose therapy of: haloperidol 15 mg, biperiden 4 mg and diazepam 15 mg. During this hospitalization she developes muscle rigidity, tremor, hyperthermia, and laboratory results showed increase of enzimes CPK and LDH, so we started treatment of suspected malignant neuroleptic syndrome. After a treatment and