

**Disclosure:** No significant relationships.

**Keywords:** schizofrenie; obsessive-compulsive; suicidal ideation; clozapine

## EPV1436

### Family support in treatment of patients diagnosed with schizophrenia: a case report

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doi: 10.1192/j.eurpsy.2022.2062

**Introduction:** Schizophrenia is often accompanied by functional deterioration which can impede a person's everyday activities. Families are an important part in providing care for their ailed member, but often lack resources to deal with different challenges included in such care. Mental health professionals treating such patients sometimes neglect the importance of including their families, or primary caretaker in the treatment plan.

**Objectives:** We will present two cases of patients diagnosed with schizophrenia with prominently negative symptoms and the challenges met by their caretakers and mental health professionals in the treatment.

**Methods:** Patient history, psychiatric evaluation, psychiatric treatment, and the role of the family will be presented.

**Results:** 21 years old patient came with his mother after years of not meeting the expected level of functioning. He was misdiagnosed for a couple of years. His treatment was impeded by loss in the family, which also affected both him and his mother. Inability to include her earlier in his treatment became a challenge. Second patient has been treated for schizophrenia with dominant negative symptoms, inconsistently, for ten years. Her family became more involved in her treatment only after she presented with positive symptoms. Their involvement was important as it resulted in patient's better compliance.

**Conclusions:** Supporting a family member diagnosed with schizophrenia can be overwhelming for the families. Including family members in the treatment early on, can be beneficial both for the patient and the family.

**Disclosure:** No significant relationships.

**Keywords:** negative symptoms; schizofrenia; Family; Treatment

## EPV1437

### Paliperidone palmitate-induced enuresis: a case report

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doi: 10.1192/j.eurpsy.2022.2063

**Introduction:** Schizophrenia is a severe mental illness that requires long-term treatment with antipsychotics and the intramuscular (IM) long-acting injectable (LAI) formulations may enhance treatment adherence. Some antipsychotics have been associated with enuresis, including atypical antipsychotics such as risperidone (6.2%), quetiapine(6.7%), olanzapine (9.6% ) and clozapine (20.7%) [1]. Although oral paliperidone has been related to urinary

incontinence, there is only 1 report of urinary incontinence linked to monthly paliperidone palmitate [2]. [1] Harrison-Woolrych, M., Skegg, K., Ashton, J., Herbison, P., Skegg, D.C., 2011. Nocturnal enuresis in patients taking clozapine, risperidone, olanzapine and quetiapine: comparative cohort study. *British Journal of Psychiatry* 199, 140–144. doi:10.1192/bjp.bp.110.087478 [2] Karshioğlu, E.H., Özalp, E., Çayköylü, A., 2016. Paliperidone Palmitate-induced Urinary Incontinence: A Case Report. *Clinical Psychopharmacology and Neuroscience* 14, 96–100. doi:10.9758/cpn.2016.14.1.96

**Objectives:** To establish an association between paliperidone palmitate and enuresis.

**Methods:** Case report and a narrative review of the literature.

**Results:** The patient was a 25-year-old healthy man when he was diagnosed with schizophrenia. Doctors prescribed paliperidone palmitate (LAI) 200mg monthly and he started to complain of enuresis. He was clearly suffering with this unpleasant and embarrassing adverse effect so the LAI was reduced to 150mg. Enuresis remained, so it was prescribed oxybutynin 20 mg/day and the patient improved.

**Conclusions:** We reported a case in which enuresis is likely to be associated with high-dose paliperidone LAI (with no clinical evidence of an organic cause). To treat it, the most effective strategy was oxybutynin 20 mg/day. This case is also important to show the impact of this symptom, which is not actively investigated.

**Disclosure:** No significant relationships.

**Keywords:** paliperidone; schizofrenia; enuresis

## EPV1438

### Effect of Semaglutide versus placebo on psychotic symptoms and quality of life - a pre-specified secondary analysis of HISTORI: A randomized clinical trial in people with pre-diabetes and schizophrenia

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doi: 10.1192/j.eurpsy.2022.2064

**Introduction:** Life expectancy of people with schizophrenia is reduced by 10-20 years compared to the general population. The excess mortality is part due to an increased prevalence of cardiovascular disease, prediabetes and obesity, which are in part due to antipsychotic treatment. Gaining weight is associated with reduced quality of life and also among the most frequently reported reasons for the discontinuation of treatment. Lifestyle changes have a time limited effect, and therefore, interest has focused on Glucagon-Like Peptide 1 receptor agonist treatment. Semaglutide, currently used to treat type 2-diabetes in doses up to 1.0 mg once-weekly, has shown promising results regarding weight loss in doses up to 2.4 mg once-weekly. It may also be able to reduce the risk of developing diabetes and cardiovascular disease.