

Objectives: The aim of this study is to identify the leading symptoms in patients with TRS.

Methods: Using the Personal and Social Performance Scale (PSP), Positive and Negative Syndrome Scale (PANSS) and Calgary Depression Scale for schizophrenia (CDSS), 30 male patients (age 28.99 ± 8.08 years) diagnosed with paranoid schizophrenia (F20.0) were examined. All patients had persistent productive symptoms and met the criteria for TRS. The average daily doses of antipsychotics in chlorpromazine equivalent were 1382.07 ± 897.15 mg/day. The average age of onset of the disease was 19.52 ± 5.97 years, the average disease was 9.47 ± 7.61 years.

Results: The average scores were: on the PSP scale: 46.05 ± 9.17 , on the CDSS scale 8.10 ± 4.53 , on the PANSS positive symptoms subscale - 21.52 ± 4.24 , on the PANSS negative symptoms subscale - 24.67 ± 4.42 , on the general psychopathology subscale PANSS - 45.62 ± 6.11 . Positive symptoms were represented mainly by delusions (P1, 4.14 ± 0.85 points) and hallucinations (P3, 4.10 ± 1.76 points). Blunted affect (N1, 4.29 ± 0.56 points) and emotional withdrawal (N2, 3.67 ± 0.73 points) predominated among negative symptoms, while the least prominent negative symptom was poor rapport (N3, 3.24 ± 0.94). The most pronounced general psychopathology symptoms were depression (G6, 4.00 ± 1.10) and lack of judgment and insight (G12, 4.05 ± 0.92). The total score on the PANSS was 91.81 ± 12.40 .

Conclusions: The CDSS score indicates a high incidence of depressive symptoms in patients with TRS. A low PSP score reflects poor social functioning. The most common symptoms according to the PANSS are delusions, hallucinations, blunted affect, emotional withdrawal, depression and lack of judgment and insight.

Disclosure of Interest: None Declared

EPV0973

Delusional parasitosis: the importance of a multidisciplinary approach

M. Calvo Valcárcel, G. Guerra Valera*, M. A. Andreo Vidal, O. Martín Santiago, M. Lorenzo Hernando, M. P. Pando Fernández, P. Martínez Gimeno, M. D. L. Á. Guillén Soto, B. Rodríguez Rodríguez, N. Navarro Barriga, M. Fernández Lozano, M. J. Mateos Sexmero, C. De Andrés Lobo, M. D. C. Vallecillo Adame, T. Jimenez Aparicio, A. Monllor Lazarraga, M. Ríos Vaquero, L. Rojas Vázquez, L. Sobrino Conde, A. Aparicio Parra and G. Lorenzo Chapatte

Psychiatry, Hospital Clínico Universitario de Valladolid., Valladolid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1561

Introduction: Delusional parasitosis, also known as delusional infestation or Ekbom's syndrome, is a rare psychotic disorder characterized by the false belief that a parasitic skin infestation exists, despite the absence of any medical evidence to support this claim. These patients often see many physicians, so a multidisciplinary approach among clinicians is important. Many patients refuse any treatment due to their firm belief that they suffer from an infestation, not a psychiatric condition, so it is crucial to gain the trust of these patients.

Objectives: The comprehensive review of this clinical case aims to investigate Ekbom syndrome, from a historical, clinical and therapeutic perspective.

Methods: Literature review based on delusional parasitosis.

Results: A 65-year-old woman comes to the psychiatry consultation referred by her primary care physician concerned about being infested by insects that she perceives through scales on her skin for the last three months. She recognizes important impact on her functionality. She is also convinced that her family is being infected too. As psychiatric history she recognizes alcohol abuse in the past (no current consumption) and an episode of persecutory characteristics with a neighbor, more than ten years ago. On psychopathological examination, she shows delusional ideation of parasitosis, with high behavioral repercussions, cenesthetic and cotariform hallucinations, as well as feelings of helplessness and anger. Treatment with Pimozide was started and the patient was referred to dermatology for evaluation, a plan she accepted. Her primary care physician and dermatology specialist were informed about the case and the treatment plan. In the recent reviews, the patient is calmer, however, despite the corroboration of dermatology and in the absence of organic lesions in cranial CT, she is still unsatisfied with the results, remaining firm in her conviction of infestation. It was decided to start treatment with atypical neuroleptics (Aripiprazole), with progressive recovery of her previous functionality.

Conclusions: Despite the increase in the number of studies in recent years, there are still few studies on this type of delirium. The female:male ratio varies in the bibliography (between 2:1 and 3:1). The onset is usually insidious, generally appearing as a patient who comes to his primary care physician convinced of having parasites in different skin locations. It is usual to observe scratching lesions or even wounds in search of the parasite. In the past, the most used and studied treatment was Pimozide. Currently the treatment of choice is atypical neuroleptics due to their lower side effects. The latest reviews on the prognosis of this disorder show data with percentages of complete recovery between 51% and 70%, and partial responses between 16.5% and 20%. Finally, for a good diagnosis and therapeutic management, it is important to achieve a multidisciplinary approach.

Disclosure of Interest: None Declared

EPV0974

From positive projection to delirium. About a case

M. V. Barea*, L. S. Rodriguez and S. C. Bailen

SAS, Jaen, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1562

Introduction: Erotomania, was described in 1942, is more common in women than in men, although the incidence is unknown. This syndrome is usually characterized by a young woman with the illusion that a man whom she considers to be of a higher social or professional position is in love with her. Developing an elaborate delusional process about this man, his love, his pursuit and total commitment to the idea. Two forms, pure or secondary, are described. As well as fixed or recurring
52-year-old female patient in outpatient follow-up with a diagnosis of schizophrenia with long-term follow-up, start of follow-up by a