

Introduction Although psychoactive substance use disorders (PSUD) belong to the domain of mental health, their management varies greatly among European countries. Furthermore, both the role of psychiatrists and trainees in the treatment of PSUD is not the same for each European country.

Aims Among the context of the European Federation of Psychiatric Trainees (EFPT), the PSUD Working Group has developed a survey that has been spread out between the 15th of August 2015 and 15th of October 2016, at the aim of gathering information about the training in PSUD in Europe, both from Child and Adolescent, and General Adult Psychiatric (CAP and GAP) trainees.

Objectives The survey investigated, at European level, the organisation of the PSUD training, trainees satisfaction, attitudes towards people who use psychoactive substances, management of pharmacologic and involvement in common clinical situations.

Methods A 70-items questionnaire regarding the aforementioned objectives was developed, and shared through an online data-collecting system among European CAP and GAP trainees, with 40 trainees per country filling the survey in at least 25 countries. One national coordinator per country facilitated the delivering of the survey.

Results A total of 1250 surveys were filled from more than 25 European countries.

Conclusions Data from the survey will be promptly analysed. The survey will be the first to explore European psychiatric trainees attitudes and practices about PSUD. Findings from this independent survey may serve in understanding the needs of trainees in the field of substance misuse psychiatry.

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EV0241

Hepatic comorbidity in psychiatry.

A case report

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Introduction Comorbidity between mental and physical illnesses is very common and their possible interactions must always be taken into account. Hepatic disorders in particular, can affect the blood levels of antipsychotic drugs altering their effects on patients. Therefore, it is very important to assess in each case which treatment might be the most beneficial for the patient to avoid iatrogenic complications.

Aim To review articles in Pub-Med and UpToDate about the possible iatrogenic complications that can arise using antipsychotic drugs in patients with hepatic disorders.

Methods We describe the case of a 52-year-old male with Schizophrenia who was diagnosed of HCV infection ten years ago, for which he rejected any kind of treatment due to delirious ideation. In the past he was treated with oral Paliperidone with good tolerance, which he discontinued because of poor insight and stopped attending Psychiatric consultation. In April 2016 the patient was hospitalised suspecting a hepatocellular carcinoma.

Results During hospitalization he began treatment with long-acting injectable formulation of Paliperidone Palmitate that improved his insight. The patient agreed to perform the necessary tests to verify the suspected diagnosis, which was sadly confirmed. He achieved psychopathological stability, but unfortunately the patient died 6 months later because of his hepatocellular carcinoma.

Conclusions Paliperidone is a good therapeutic option in patients with hepatic disorders because it is not metabolised by the liver. It also has a depot formulation that improves adherence in patients with low insight, reducing the danger of future psychotic decompensation and improving the long-term prognosis.

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EV0242

Cases where pituitary tumor is presented first with psychiatric signs are very rare

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Objective To describe a rare case of Acromegaly presenting as psychotic disorder without neurological signs, in a 19 years old boy.

Method Single case report.

Results We describe the case of a 19 years old boy, that was taller than his peers and had started to grow his hands. He suddenly presented with an acute psychotic episode. He presented with persecutory delusions, perceptual abnormalities, disorganization and marked fluctuation in his behavior, he showed marked emotional lability, fluctuations in orientation and psychotic symptoms in the form of grandiosity, persecutory delusions and delusional misidentifications. At times, he was seen talking to himself, although he denied hearing any voices. There was no impairment of consciousness. His mood was irritable. An urgent CT and subsequent MRI scan revealed a pituitary macro adenoma, extending into the cavernous sinus. The initial diagnosis of prolactinoma was revised to acromegaly. His symptoms responded to combination of olanzapine and valproic acid, followed by trans sphenoid resection of the adenoma.

Conclusions This case highlights the need for investigation, especially of neuroimaging, in atypical presentations of psychosis, which may be first manifestation of rare disorders like acromegaly. Despite a lack of information regarding the path physiology, this particular case emphasizes the importance of ruling out an organic cause for atypical presentation of psychosis.

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EV0243

Comorbidity between obsessive-compulsive disorder and attention deficit/hyperactivity disorder

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Introduction The comorbidity between obsessive-compulsive disorder (OCD) and attention deficit/hyperactivity disorder (ADHD) has been discussed for a couple of decades. Reported co-occurrence rates are highly inconsistent in the literature.

Objective To review phenomenological and theoretical issues concerning concomitant OCD-ADHD.

Aims Phenomenological and theoretical issues regarding OCD-ADHD comorbidity are reviewed.

Results Although numerous studies suggest an OCD-ADHD comorbidity, thus far etiological (i.e., genetic) background has

been provided only for a pediatric comorbidity. High rates of co-occurrence may be mediated by the existence of tic disorders, and evidence of impaired neuronal maturational processes in OCD pediatric population may lead to probably transitory phenotypical expressions that look like ADHD symptomatology. Thus, it is possible that ADHD-like symptoms resulting from OCD-specific symptomatology may be misdiagnosed as ADHD. This may explain the lower co-occurrence rates reported in adolescents and adults.

Conclusion OCD and ADHD are very different disorders in terms of pathophysiology, phenomenology, and treatment strategies. Several methodological concerns have been identified in our review. Future studies on OCD-ADHD comorbidity should try to mitigate these biases.

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EV0244

Other ways for the treatment of alcohol dependence: A patient treated with nalmefene

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Introduction Alcohol dependence belongs to one of the major risk factors to health worldwide. Alcohol consumption is a significant factor for mortality in the world: 6.3% in men and 1.1% in women. The alcohol use disorder is also very common: 5.4% in men, 1.5% in women. Despite its high frequency and severity of this disorder, only 8% of all alcohol dependents are treated once.

Aims An interesting treatment option is geared toward reducing alcohol intake. Some patients in treatment for alcohol use disorder prefer an initial target of reducing consumption. Nalmefene, an antagonist naltrexone associated with opioid receptors, has been authorized in the European Union to help alcohol-dependent patients reduce their consumption. Antagonists' opiate receptors are associated with reduced reward in relation to alcohol consumption, thus helping patients in reducing energy consumption.

Methods A man of 39 years old, with a diagnosis of alcohol use disorder and depressive disorder and poor outcome despite different types of treatment (as aversive agents) was treated with nalmefene.

Results After a few months, nalmefene had a beneficial effect on the patient, with a significant reduction in the number of days of excessive alcohol consumption and total consumption in the sixth month. In addition, treatment was well tolerated, with no observed secondary effects.

Conclusions Nalmefene appears to be effective and safe in reducing heavy drinking. Drugs such as nalmefene have demonstrated efficacy in association with a biopsychosocial approach to help patients achieve their personal objectives for this disorder.

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EV0245

Rehabilitation program: Results of a clinic in Lisbon

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Introduction Modern psychiatry includes within its purposes to reintegrate patients into society. Our work's goal is to evaluate in terms of outcome, the current status of patients that underwent the rehabilitation program in a clinic in Centro Hospitalar Psiquiátrico de Lisboa, in Lisbon.

Methods The methods consisted of retrospective evaluation of the sample of patients that successfully completed the rehabilitation program between 2012 and 2015. Gender, age, provenience, previous and current socio-economic situations were taken into account.

Discussion Twelve patients concluded the program in the timeframe studied: 64 % males and 36 % between the ages of 36 and 40 and more than half were in homelessness situations. They progressed in increasing levels of autonomy and by the program's end, ten were dismissed and two were still waiting for housing. Ten of the patients are now living with their families or have been integrated in social housing program. Two await conditions to leave the hospital.

Conclusion The program had a positive impact on the life of all patients that have engaged in it. Only two remain waiting social housing responses. Although the results are satisfactory, the number of patients admitted must improve in coming years.

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EV0246

From alcohol to delusional jealousy

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Purpose With this clinical case we want to show an example of diagnosis and treatment of a frequent psychiatric comorbidity in alcohol dependence: delusional jealousy.

Methods We analyzed a clinical case of a 52-year-old man who has a voluntary drug intake promoted by a delusional jealousy to his wife in a context of chronic alcohol consumption. A bibliographic search is made about the comorbidity of delusional jealousy in alcoholism.

Results A 52 year-old man is brought to the hospital after to have a voluntary drug intake. He has not got medical history of mental health. As personal antecedents, the harmful alcohol consumption of the last 6 years in which he is unemployed is highlighted. After the clinical interview with the patient and with direct relatives (woman and daughter), we have the suspicion that it is a case of cellotopia induced by alcohol, in which the patient has made an autolytic attempt fomented by a delusion of jealousy. In this moment treatment is started. After a few weeks in which the patient starts treatment and leaves alcohol consumption, delusional clinic of jealousy refers progressively.

Conclusions The alcoholic etiology of cellotopia has not been specifically confirmed. However, clinical experience shows this association is extremely frequent. It's a chronic delusional disorder with content of jealousy, providing interpretations and suspicions unfounded. Is added hostility to his partner, with potential risk of heteroagresivity. The most important thing is to assess the