

EV201

Psychotic mixed state in bipolar I disorder due to neurosyphilis: Case report and literature review

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Introduction The presence of mixed features in bipolar disorder (BD) has been associated with a worse clinical course and high rates of comorbidities including anxiety, personality, alcohol and substance use disorders and head trauma or other neurological problems [1]. A recent study reports the connection of neurosyphilis and mania [2]. The aim of our study is to evaluate an inpatient with a psychotic mixed state due to a medical condition (neurosyphilis).

Method An inpatient with psychotic mixed state in BD was assessed with: SCID-P, HRSD, YMRS, and a complete internist-clinical examination, blood test exams, urinalysis, electrocardiogram and ecocardiogram, as well as a first level brain imaging (CT and/or MRI). We conducted a systematic review of the literature (PubMed, Embase, PsychInfo), using the terms “bipolar disorder”, “neurosyphilis” AND “mixed state”.

Results A comprehensive diagnostic and laboratory screening was unremarkable except for a positive venereal disease research laboratory (VDRL). Treatment for syphilis was started and we used olanzapine to control the psychiatric symptoms.

Discussion and conclusion The estimated annual incidence of non-HIV STIs (sexually transmitted infections) has increased by nearly 50% during the period 1995–2008 [3]. Our case report underlies, like Barbosa et al., the need to evaluate neurosyphilis as a potential cause of behavioural and psychiatric symptoms that simulate a psychotic mixed state of bipolar disorder. Olanzapine control and improve the psychiatric symptomatology in neurosyphilis. Methodological limitations, clinical implications and suggestions for future research directions are considered.

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

Reference

[1] Perugi G, et al. 2014.

[2] Barbosa IG, et al. 2012.

[3] Ortayli N, et al. 2014.

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EV202

Monitoring of biochemicals changes in antipsychotics and anti-depressive therapy

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Objective Biochemical changes in treatment of schizophrenic and bipolar disorders, in Albanian patients, with atypical antipsychotic and anti-depressive drugs. Some of the adverse effects related to their use are hyperlipidemia, hepatic enzymes, type 2 diabetes and CK level, which may result in development of metabolic syndrome. This study aimed to investigate a possible increase of biochemical parameters, in patients with schizophrenia and bipolar disorders treated with atypical antipsychotic and antidepressant drugs (Olanzapin, Risperidon, Clozapin, Antidepressiv triciclik, SSRI, SNRI).

Methods Forty subjects with schizophrenia and bipolar disorders were evaluated, 12 women and 28 men, aged between 17 and 72 years. Blood collection of the patients was taken in our laboratory and this values were measure in long treatment patients, after

years of treatment. Analyses were performed in our laboratory with autoanalyser SAT 450.

Results Evaluation after measurements showed significant differences when comparing the mean values obtained in each patient. The biochemical indicators of development of metabolic syndrome measured in our study, show that is an increase of lipids panel, specially triglycerides and total cholesterol, also in glucose, CK level and hepatic enzymes, presenting statistically significant changes ($P < 0.05$) for prolonged treatment.

Conclusion We conclude that the treatment with atypical antipsychotic and antidepressant drugs, promoted a substantial increase of biochemical blood parameters. Lipids panel, hepatic enzymes, type 2 diabetes, CK levels are observed in among subjects evaluated.

Keywords Measurements; Biochemical parameters; Schizophrenia; Bipolar disorders

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EV203

Manic episode secondary to maca

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Introduction Maca (*Lepidium meyenii*) is a plant grown in the Andes Mountains, formerly used for nutritional purposes. Nowadays is used as a nutritional supplement and energizing.

Objectives To describe a case of manic episode secondary to maca consumption, as an ingredient of an energizing product.

Aims To report on antidepressant properties of maca, based on a clinical case.

Methods X. is a 27-year-old male without any psychiatric history. He came to the emergency service because of the presence of sudden onset behavioral disorders, presenting a manic-like episode of seven hours of evolution. His symptoms consisted in psychomotor restlessness, hyperactivity, insomnia, verbose and loud speech, hyperthymia, megalomaniac verbalizations, and unsuitable future plans. The patient had self-awareness of his symptoms and was self-critical with his behavior. He reported he was consuming an energizing supplement containing maca from about two weeks ago. Treatment with olanzapine 20 mg was initiated, and the patient remained under observation for 24 hours.

Results Symptomatology subsided completely after 24 hours. The patient is discharged from the hospital with diagnosis of manic episode secondary to maca, without any treatment. He was advised to not take stimulants.

Conclusions There are studies reporting that maca plant has antidepressant properties, associated with the activation of noradrenergic and dopaminergic systems, as well as the attenuation of oxidative stress. However, more studies are needed to identify specific compounds that produce these effects.

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EV204

First manic episode in a patient with a frontal meningioma

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Introduction Psychiatric symptoms are common among brain tumor patients. Meningiomas are the most common benign brain tumors accounting for 13 to 26% of all intracranial tumors and might present exclusively with psychiatric symptoms. To diagnose a manic episode according to DSM-5 criteria the episode must not be attributable to the physiological effects of a substance or to another medical condition.

Objectives/aims Describe a case of first manic episode with a frontal meningioma along with a brief review of available literature.

Methods The case we report is based on information collected from interviews with the patient and the family members as well as from the clinical files. The literature review was performed using the PubMed database.

Results We describe the case of a 58-year-old woman presenting with symptoms of a first manic episode with psychotic features. There were no previous hypomanic or major depressive episodes. In order to exclude organic causes a brain CT scan was performed that revealed a possible frontal lesion. A brain MRI confirmed the presence of a frontal meningioma with an approximate diameter of 1.4 cm.

Conclusions The majority of the cases described in the literature refer to large tumors presenting with major depressive symptoms. Given the absence of similar cases in the literature, it seems unlikely that such a small benign lesion may cause a manic episode with psychotic features. Nevertheless, we cannot exclude that possibility.

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EV206

Differences in plasma concentration of acylethanolamides and acylglycerols in paired samples of bipolar patients and first- and second-degree relatives

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Introduction Endocannabinoid System (ECS) has been highlighted as one of the most relevant research topics by neurobiologists, pharmacists, basic scientists and clinicians (Skaper and Di Marzo, 2012). Recent work has associated major depressive disorder with the ECS (Ashton and Moore, 2011). Despite the close relationship between depression and bipolar disorders, as far as we know, there is no characterization of ECS and congeners in a sample of patients with bipolar disorders.

Aims and objectives The objective of this work is to characterize the plasma levels of endocannabinoids and congeners in a sample of patients with bipolar disorders.

Method The clinical group was composed by 19 patients with a diagnosis of bipolar disorders using SCID-IV (First et al., 1999). The control group was formed by 18 relatives of first- or second-degree of the patients.

The following endocannabinoids and congeners were quantified: N-palmitoleylethanolamide (POEA), N-palmitylethanolamide (PEA), N-oleylethanolamide (OEA), N-stearylethanolamide (SEA), N-arachidonylethanolamide (AEA), N-dihomo- γ -linolenylethanolamide (DGLA), N-docosatetraenylethanolamide (DEA), N-linoleylethanolamide (LEA), N-docosahexaenylethanolamide (DHEA), 2-

arachidonoylglycerol (2-AG), 2-linoleoylglycerol (2-LG), and 2-oleoylglycerol (2-OG).

Results The result showed statistically significant lower levels of AEA, DEA and DHEA in clinical sample. Previous research also identified lower levels of AEA in depressed women (Hill et al., 2008, 2009). Until date, it is unknown if DEA and DHEA have some effect on EC receptors, and whether they have some direct effects on endocannabinoids.

Conclusions It would be necessary to carry our other research with a larger sample, which could allow the control of potential confounding variables.

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EV210

Evolution of bipolar disorder in dual pathology

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Introduction The substance use is common among people with a diagnosis of bipolar disorder. In addition, alcoholism and bipolar disorder coexist with a high frequency. This association is higher in men than in women, and this consumption is the factor that most strongly influences the hospitalization.

Objectives To analyze the clinical, epidemiological, diagnostic approach and evolution of bipolar disorder and alcoholism.

Methods Review of the subject on recent articles of alcoholism in bipolar disorder.

Results The stages of mania associated with alcohol consumption up to 40% of cases and are more common at this stage that in depressive. This association is greater than that which occurs between alcoholism and schizophrenia or depression. Patients with bipolar disorder who have mixed and irritative states and those with rapid cycling have a prevalence of alcohol consumption and substance use higher than those who do not use substances. It has also been observed that the consumption of alcohol and substance use can change the symptoms of mania and turn them into a mixed state symptoms. It also states that rapid cycles can be precipitated by increased alcohol consumption during rotation from mania to depression.

Conclusions The association of bipolar disorder with addictive behaviors is a factor that worsens the prognosis and comorbid alcohol itself is associated with a poor prognosis. Close monitoring of bipolar patients and especially in those who consume alcohol is very important.

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EV212

Assessing risky sexual behavior among patients with bipolar disorder in euthymic period

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Introduction Risky sexual behaviors are typically seen in patients with bipolar disorder, especially during the manic phases.

Disinhibition, impulsivity and risk taking expose these patients to unplanned pregnancies and sexually transmitted infections.

However, there is a lack of studies regarding these behaviors in stabilized bipolar patients during euthymia.