

## EPV0562

### The Lester Tool : An audit of its use on an acute psychiatry inpatient wards.

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**Introduction:** People with severe mental illness have an increased vulnerability to cardiovascular disease due to multiple biopsychosocial factors and a potential adverse effects of longer term treatment with anti-psychotic medications. Treatment of severe and enduring mental illness with antipsychotic medications is likely to cause metabolic changes leading to weight gain and dyslipidaemia, thus increasing risk of cardiovascular disease. Cardiometabolic risk screening can be done using Lester Tool which also provides recommendations for interventions.

**Objectives:** To identify the compliance to Lester Tool in the monitoring of cardiometabolic risk factors and intervention provided on acute psychiatry inpatients.

**Methods:** We carried out a retrospective audit of 30 patients on regular antipsychotic medication on an adult inpatient ward in Macclesfield, United Kingdom. Electronic records were reviewed to establish whether the smoking status, lifestyle, BMI, blood pressure, blood glucose and blood lipid were documented with evidence of interventions being provided.

**Results:** Of all 30 patients, none had shown compliance to all the parameters within the Lester Tool. 100% of the smoking status was documented, amongst which 78% were provided with interventions. 7% has lifestyle and diet status documented, of which 50% were given dietary advice. 80% had BMI documented, amongst which none were provided with any intervention. 90% had blood pressure documented, of which 50% were given any intervention. 40% had blood glucose documented, of which all were provided with intervention. 57% had blood lipid documented, of which none were provided with any intervention.

**Conclusions:** Our results have shown the need of further awareness on the usefulness of the Lester Tool in an acute inpatient ward. Our recommendation would be to regularly train and educate inpatient staff to ensure that all the necessary parameters be monitored and provided with interventions.

**Disclosure of Interest:** None Declared

## Intellectual Disability

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### Neuropsychiatric symptoms related to agenesis of the corpus callosum. A case report

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**Introduction:** We present the case of a 41-year-old male patient with multiple psychiatric diagnoses, he was diagnosed with agenesis of the corpus callosum, which explains his clinical presentation.

**Objectives:** The objective is to carry out a brief review of the symptoms associated with the agenesis of the corpus callosum.

**Methods:** The patient has been diagnosed with ADHD, cyclothymia, depressive anxiety disorder and social phobia. He has been treated with a multitude of drugs such as antidepressants, anxiolytics, stimulants and even low-dose antipsychotics. Despite the pharmacological treatments received, as well as the therapies, the patient's functionality has progressively worsened, to the point of restricting going out of the home or maintaining a stable job.

Biographical data were collected, including psychomotor retardation and inappropriate laughter. He showed mannerisms such as fluttering and low frustration tolerance. He was slow to respond to his name and showed little affective resonance with his sister and parents. Restrictive interests, especially with English culture, for which he later studied English philology. On the other hand, his mother explains that he had no symbolic play and that, from early childhood, he had difficulties in relationships with peers.

Due to the aforementioned clinical manifestations, the functional worsening and the examination carried out in the consultation room, it was decided to extend the study with a brain MRI, where an agenesis of the corpus callosum was observed.

**Results:** Agenesis of the corpus callosum is a malformation of the central nervous system, which affects one in every 4000 births. It can be partial or complete, and occurs between the 7th-20th week of gestation.

Agenesis of the corpus callosum presents with a triad of symptoms:

- Reduced interhemispheric communication of sensory-motor information.
- Increased information processing time
- Difficulty in abstract thinking.

This triad causes difficulties not only cognitively, but also socially. There is difficulty in integrating and learning new verbal and visual information. Tendency to literalism, with difficulty in understanding double meanings. They also have difficulty understanding non-verbal language and reading emotions, which makes interaction with peers difficult. All these symptoms can sometimes be confused with symptoms compatible with Autism Spectrum Disorder.

**Conclusions:** After the diagnosis and after focusing the patient's treatment on the most limiting symptoms of his daily life, an integrated approach was initiated, not only at a pharmacological level, with the use of antidepressants and anxiolytics, but also from a psychotherapeutic point of view, working on those areas in which the patient is most dysfunctional. He was accompanied in the disability application process, as well as helped in the search for associations for adults with ASD, finding there the answer to his symptoms and difficulties.

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## EPV0564

### Formal Caregivers in Intellectual Disability Facilities

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