Disorders (may be a combination)	Before surgery (n,%)	2 weeks after (n,%)	18 months after (n,%)
Emotional and volitional	27 (60%)	27 (60%)	15 (33%)
Cognitive - Korsakov syndrome	18 (40%) 4 (9%)	27 (59%) 8 (18%)	18 (40%) 7 (15%)
Personality	21 (46%)	25 (55%)	23 (51%)

Results: In the late postoperative period, mental disorders were detected in 75% of patients (Table 1). Table 1. Dynamics of the main psychopathological symptom complexes (n = 45).

The table shows that emotional-volitional disorders have a clear positive dynamics by 18 months after surgery compared with the preoperative level. Korsakov's syndrome and personality disorders are less favorable. 23 patients (52%) returned to their previous profession; 22 (48%) stopped working due to a severe degree of disability, of which 7 (15%) need constant supervision.

Conclusions: The positive dynamics of psychopathological symptoms is observed only within 1.5 years after the removal of the craniopharyngioma, in the future they remain without a tendency to improve. 22 patients (48%) stopped working. The most severe degree of disability is 15% patients.

Disclosure: No significant relationships.

Keywords: Mental disorders; emotional and personality disorders; craniopharyngioma; postoperative period

EPV0110

Huntington's disease- a case of early psychiatric symptoms and suicide

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Introduction: Huntington's disease is typically an inherited neurodegenerative disorder with autosomal dominant transmission. Early disease symptoms can include depression and behavioral changes, while physical and cognitive symptoms become evident later. Suicide and suicidal ideation are more frequent in these patients than on the general population. We present the case of a 50-year-old female patient with a history of depression and suicidal intents previous to her diagnosis. The patient committed suicide approximately 20 years after the beginning of her psychiatric symptoms.

Objectives: To report a clinical case of early psychiatric symptoms and suicide in Huntington's disease; To raise awareness for these comorbidities and for an adequate intervention in suicide prevention.

Methods: The information was obtained by interviewing the patient and her family and by reviewing past medical reports. A brief literature review using the keywords "suicide", "Huntington's disease" and "psychiatric symptoms" was performed on PubMed.

Results: The patient had a history of depression and five hospital admissions for suicidal intents during the ten years prior to the diagnosis. After the diagnosis and the beginning of physical

symptoms, she maintained suicidal ideation until she committed suicide ten years later.

Conclusions: This clinical case underlines the importance of being alert for early psychiatric symptoms of Huntington's disease, especially if considering the patients' probability of developing it. It also reinforces the need for suicidal ideation regular assessment and for pharmacological and non-pharmacological targeted therapy. Further investigation should be taken to understand which factors increase the risk for suicidal behavior and which moments during disease progression are crucial for prevention.

Disclosure: No significant relationships.

Keywords: huntingtons; huntingtonsdisease; Depression; Suicide

EPV0112

Let's talk about it: An atypical case

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Introduction: Cross-sectional studies report the high comorbidity of substance use (SUD) with eating disorders (ED). This case report aims to describe a case of anorexia nervosa and alcohol use disorder in a 18 year old male.

Objectives: Based on the need to formulate protocols, we aim to conduct a systematic review on the recent literature research on this coexisting psychiatric disorders.

Methods: Relevant studies were sourced from published literature and reviewed.

Results: The prevalence of ED is higher in women than in men, with a ratio of 7:1; however it is the latter that present the most serious clinical pictures. It should be also noted that no all types of ED present the same comorbidity, but rather those with bulimic symptoms are the ones that most resort to substance abuse, so the distinction between subtypes is highly relevant.

Conclusions: It is important that clinicians are aware of the severity of this combination and the need for a specific and careful management. Also important to taking into account the limited bibliography on the subject, it is especially important to expand research.

Disclosure: No significant relationships.

Keywords: alcohol use disorder; eating disorders; Addiction; Dual pathology

EPV0113

Relationship between suicide attempts of repetition and dependence to the cocaine: Report of clinical case

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