Article: 1030

Topic: EPW12 - e-Poster Walk Session 12: Treatment Practice

New Approaches to Psychotic Agitation: Staccato Loxapine

A. Fontalba-Navas¹, I. Caparros-del-Moral¹

¹Mental Health, Área Gestión Sanitaria Norte Almería, Huercal-Overa, Spain

Introduction:

Psychomotor agitation is characterized by a significant increase in or inappropriate motor activity, from minimal anxiety to uncoordinated movement without purpose, accompanied by alterations in the emotional sphere.

Psychiatric causes includes schizophrenia, schizoaffective disorder and bipolar disorder

Case:

47-year-old patient with a diagnosis of paranoid schizophrenia with 25 years of evolution. Compensated during the last 5 years. She comes to the hospital with her husband.

She presents psychomotor agitation characterized by a megalomaniac delusion ('I'm a virgin', 'this is not my husband, my husband is someone else and he is dead, this is a double') delusional interpretations of the environment ('I won't sit down, because you're going to steal my movement'), irritability, dysphoria, vocal and behavioral disturbances such as insults or increased motor gestures like bumps against the furniture.

- T 0 (00 min) PEC score scale: 18

Inhaled administration of Adasuve (Staccato loxapine)

- T1 (08 min) The psychomotor agitation stopped. PEC score scale: 7
- T2 (60 min) No adverse effects. She continued to be stable. PEC score scale: 6 Discussion:

Taken to the extreme, agitation in psychosis can be a serious risk to the patient, family members, health workers and the environment.

It requires immediate action to ensure patient safety, to achieve an appropriate and effective approach to agitation, aggressive or violent behavior.

An effective treatment of an episode can facilitate future interventions.