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Response to Treatment in Patients with Catatonia Referred to a Liaison Psychiatry Service in a General Hospital.

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**Introduction:** Catatonia is a neuropsychiatric syndrome described in a variety of general medical, neurological and psychiatric conditions. Response to treatment has not been sufficiently studied in patients in this clinical setting.

**Objectives:** To determine the response to treatment of catatonia in patients referred to a liaison psychiatry service.

Aim: Prospective, descriptive study.

**Method:** All patients referred to liaison psychiatry were screened for catatonic phenomena with the Bush–Francis Catatonia Screening Instrument (BFCSI) between January and May 2012. Their response to treatment was recorded.

**Results:** 236 patients were referred. Thirteen (5,5%) met research diagnostic criteria for catatonia and 10 (4,2%) DSM - IV criteria. Nine of the 13 patients received treatment with oral lorazepam. Five underwent total remission with doses between 1.5-3 mg/day within 5-13 days of treatment initiation. Two cases received up to 3 mg/day for more than 5 days resulting in a very mild improvement, one of them did not improve following eight sessions of ECT. One patient who received up to 10mg/day, died of the complications of the background health problem and complications. One patient died after the first day of treatment with lorazepam 1 mg/day. Another patient died the day after the diagnosis of catatonia and prior to starting treatment. Three patients with associated delirium improved completely with treatment for the underlying cause.

**Conclusions:** Catatonia can be effectively treated. 62% of our patients treated with lorazepam achieved complete resolution of symptoms. 100% of de catatonic patients with delirium also completely improved after treatment of the underlying condition.