EPV0094

Aggression and its association with childhood trauma in euthymic bipolar disorder patients

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Introduction: Aggression and negative behaviours are used to be present in individuals with bipolar disorder, who are sensitive to life events. Thus, many studies investigated the emergence of impulsivity and aggression in the developmental process and revealed its relationship with childhood adversities.
Objectives: The aim of this study was to determine the relationship between childhood trauma and aggressive behaviour in euthymic patients with bipolar disorder.
Methods: It was a cross-sectional descriptive and analytical study involving patients diagnosed with bipolar disorder and followed in the psychiatric department at the University Hospital ofSfax (Tunisia).
All subjects completed the Childhood trauma questionnaire (CTQ) and the Buss–Perry Aggression Scale (BPAS). Euthymiawas defined as a score on the Montgomery-Åsberg Depression Rating Scale (MADRS) not higher than 14 and by a score on theYoung Mania Rating Scale (YMRS)not higher than seven.
Results: We included 35 patients. Their mean age was 46.69 ± 12.01 years with a sex ratio (M/F) =0.45. Most of them lived in urban areas (91.42%) and had a moderate socioeconomic level (88.57%).
The most frequent trauma type was physical neglect with 74.28%, followed by emotional abuse (42.85%), emotional neglect (42.85%), physical abuse (37.14%) and sexual abuse (31.42%).
The mean score of CTQ was 58.57 ±9.51. Theaverage total score of BPAS was 82.26 ±14.57.
The mean scores of subscales of BPAS were 25.49±4.59 for physical aggression, 13.74±3.51for verbal aggression, 19.14±6.22 for anger and 23.89±5.57 for hostility.
A statistically significant and positive correlation was determined between CTQ and BPAS (p=0.011). The score of BPAS was significantly correlated with physical abuse (p=0.003) and physical neglect (p=0.014).
Conclusions: The relationship between CTQ and BGHA scores suggests the possibility that childhood trauma may be one determinant of aggression in patients with bipolar disorder. Considering the childhood trauma history in the evaluation of these patients may prevent their aggression and thus their psychosocial functioning.

Disclosure of Interest: None Declared

EPV0095

Therapeutic compliance of bipolar women during the perinatal period

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Introduction: Bipolar disorder (BD) is a chronic and disabling disease. Its prognosis is largely conditioned by tretment adherence. The pregnancy and post partum are considered as a period of high vulnerability and risk of relapse. According to the literature, no study has investigated treatment adherence in this population.
Objectives: The purpose of this study was to compare medication adherence among 3 groups of bipolar patients: in the postpartum period, one year before the conception , and outside the perinatal period. As a secondary objective, we compared intentional and unintentional adherence among these three groups of patients, as well as adherence dimmensions related to behaviors, attitudes and tolerance.
We also studied concerns and perceived need for treatment and the presence of potential confounders.
Methods: This is a post hoc study conducted using a research protocol entitled RsBip, (NCT03595670), descriptive, monocentric and open. Patients with a diagnosis of bipolar disorder established by a psychiatrist, having a pregnancy project, pregnant, or having given birth since less than one year, and their age-matched controls were included in analysis. All the patients are recruited within the expert center for bipolar disorders in the University Hospital of Marseille. Standardized and validated questionnaires such as the MARS, the BMQ and the HADS were used.
Results: 112 patients participated in the RsBip study. After exclusion of men, women over 50 years of age and women who did not answer the gyneco-obstetrical history questionnaire, 46 patients with a diagnosis of bipolar disorder were included in our study. Among them, 12 patients had a pregnancy plan within the year, 3 patients were pregnant at the time of inclusion, 8 patients had given birth within the year, and 23 patients constituted the "control" group. The characteristics of the population were similar. Our main hypothesis was partly confirmed since compliance with treatment decreases in the postpartum period, and more precisely intentional compliance and dimensions related to behaviors and attitudes.
Conclusions: Post-partum period is associated with low adherence in BD. The implementation of a specific therapeutic education for patients and the promotion of a shared medical decision as soon as the pregnancy is planned could be proposed.

Disclosure of Interest: None Declared

EPV0096

Case report: Improvement of chronic mania after Steven-Johnson syndrome

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Introduction: Stevens-Johnson Syndrome is a rare life-threatening condition characterized by severe mucocutaneous epidermal necrolysis and detachment of the epidermis. The condition centers around a delayed-type hypersensitivity reaction with a complex etiology stemming from a variety of causes.
Objectives: To present the case of a patient with a diagnosis of intellectual disability, bipolar disorder and epilepsy who, 14 days