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EV1244
Psychosis and psoriasis, the skin talks
the truth
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Introduction  It is well known about relation between skin and
mind, not only due to their mutual origin, but also by their illness
expression parallelism. We report a case to show that reciprocity.
Personal antecedents  Woman, 42-year-old, single. She only suf-
fers from a skin disease; mild psoriasis guttata placed in both
elbows and knees. She treated it with local treatment (cortisone
cream) during seasonal pruritus and the lesions did not grow or
expand. She was hospitalized due to psychotic symptoms (paranoid
delusions with her colleagues) and started antipsychotics treat-
ment (risperidone 12 mg per day and olanzapine 10 mg per night).
By the same time, she suffered a psoriasis crisis. Her psoriatic
plaques increased their sizes and her chest and both thighs were
affected too. She complained about grave pruritus. All her med-
cal test results were normal. After that, the patient improved her
psychotics’ symptoms, but she started with agoraphobic signs and
seclusion at home. Psoriasis were even worse than before and she
needed metrotexate to treat it. Being introduced to escitalopram
15 mg per day, anxiety and depression symptoms disappeared and
her grave psoriasis became the mild one that she knew.
Conclusion  Schizophrenia was associated with a greater variety
of autoimmune diseases than was anticipated. Studies found evi-
dence for a shared genetic etiology between schizophrenia and
psoriasis. Despite that, we think that the study of psychopathol-
gy can amplify our understanding about the etiopathogenesis of
psoriasis and associated mental disorders.
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EV1245
Frontotemporal dementia
misdiagnosed as schizophrenia or
other psychiatric disorder
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Introduction  Frontotemporal dementia (FTD) encompasses a
group of clinical features that include personality and behavior-
changes (disinhibition, social isolation, antisocial behavior,
compulsion) and executive dysfunction (poor planning, loss of
judgment and loss of insight). These features may lead to an incor-
rect diagnosis of a primary psychiatric disorder.
Objectives  To emphasize the difficulties in making a clinical
distinction between early frontotemporal dementia and other psy-
chiatric diseases.
Methods  We describe 11 patients who suffered from FTD, while
initially had diagnosed with primary psychiatric disorders.
The cor-
rect diagnosis was achieved by psychiatric and neuropsychological
evaluations (WAIS SCALE, ACE-R, MMSE), neuroimaging studies
(MRI 7/11, SPECT 8/11) and applying the international consensus
criteria for FTD.
Results  All patients (5 males and 6 females) were initially diag-
nosed with psychiatric disorders: schizophrenia (2/11), bipolar
disorders (4/11), depression (5/11), schizoaffective disorder (1/11),
somatization disorder (1/11), personality disorders (2/11), malin-
gering (1/11), alcohol dependence (1/11), while 5 patients had more
than one diagnosis. The age of onset varied from 19 to 53 years old.
Final diagnosis of FTD was delayed on average 6,5 years from the
onset of symptoms.
Conclusion  Clinicians should be familiar with the clinical entity
of FTD and its difficult distinction from other psychiatric disorders.
A possible hospitalization of a patient with FTD in a psychiatric
department and the social impact that it brings may be avoided. On
the other hand, the proper care of FTD patients (pharmacological
and psychosocial) improves the quality of life of patients and their
caregivers.
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EV1246
Validation of the Portuguese version of the consumer experiences of stigma questionnaire (CESQ)
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Introduction  Tackling stigma and discrimination is a major con-
cern worldwide as demonstrated e.g. in the European Mental
Health Action Plan. We need valid and feasible indicators to assess
the stigma of mental illness. In Portugal, validated scales focused
on mental health consumers’ personal experiences of stigma are
scarce. The consumer experiences of stigma questionnaire (CESQ)
(Wahl, 1999), developed in collaboration with the National Alliance
for the Mentally Ill, focuses on users’ real life experiences. Although
it was validated in different countries, some psychometric proper-
ties (e.g. test-retest reliability) are to be tested.
Objectives  To further assess CESQ psychometric properties and
to validate its Portuguese translation.
Methods  The CESQ Portuguese translation was developed in col-
laboration with the author (Otto Wahl), using standard translation
and back-translation procedures. The acceptability of items was
assessed in pilot studies and discussed in groups also involving
health professionals. The measure was then used in a convenience
sample of 122 persons with severe mental illness. Assessments
included test-retest reliability (n = 48). A factor analysis was also
conducted.
Results  Overall, the CESQ translation proved acceptable and
missing items were few, not compromising the analysis. The intra-
class correlation coefficient (ICC) for test-retest reliability was 0.83
[95% CI 0.71–0.90] and Cronbach’s alpha for internal consistency
was 0.80 [95% CI 0.75–0.85]. In the principal component analy-
sis, factor loadings confirmed the two originally reported domains:
stigma and discrimination.

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Conclusions The CESQ Portuguese version demonstrated good validity and reliability, replicating research using the original version and adding to the documentation of its psychometric properties.

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EV1247
Help-seeking behavior among patients and their relatives presenting to psychiatric unit in southern Sri Lanka
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Background Early recognition of the signs and symptoms of psychiatric illnesses is important as the delay would predict worse prognosis.

Aims To study the help-seeking behavior and sociodemographic factors of psychiatric patients presenting to Psychiatric Unit Teaching Hospital, Karapitiya.

Methods A descriptive cross sectional study. Sample drawn from patients presenting for the first time to Psychiatric Unit Teaching Hospital, Karapitiya. An interviewer administered questionnaire was used to collect data.

Results Age ranged from 13 to 76 years (n = 50). Males 34 (68%). Duration from onset of symptoms to first presentation ranged from 2 days to nine years, mean 2 years. Twenty-five (50%) had symptoms for more than one year. Sixteen (32%) stated to have attributed illness to supernatural courses as the reason to delay seeking medical help. None gave difficulty in accessing a psychiatric unit as reason for the delay. Twenty-six (52%) referred by nonpsychiatric medical professionals. Regarding alternative treatment engaged in prior to presentation to a psychiatric unit, eighteen (36%) tried to dispose of evil spirits with the help of yakaduru or kattadi, seven (14%) sought help from indigenous medical practitioners and twenty (40%) engaged in religious rituals. Thirteen (26%) sought nonpsychiatric medical treatment.

Conclusions A substantial number of patients suffering from psychiatric disorders present to psychiatric units delayed. As the majority were referred by nonpsychiatric medical professionals, alerting them regarding importance of early identification of psychiatric illnesses could help in reducing the delay.

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EV1248
Associations between cognition in parents with schizophrenia or bipolar disorder and their 7-year old high-risk offspring
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Objectives We will divide the parents into subgroups (cognitive impairment and good cognitive functioning) and use these subgroups to describe correlations with their offspring. Identifying associations between parents and offspring can add important clues to risk factors for schizophrenia and bipolar disorder and, on the long-term, help the development of more effective and potentially preventive treatments.

Methods This study is part of the Danish high risk and resilience study–VIA7. The VIA7 cohort consists of 522 children age 7 with zero, 1 or 2 parents diagnosed with schizophrenia or bipolar disorder and both of their biological parents. We assessed neurocognition and social cognition with a comprehensive test battery including: intelligence (RIST), executive functions (WAIS-IV, D-KEFS, CANTAB), verbal memory (TOMAL2), attention, emotion recognition, decision making and response control (CANTAB), theory of mind (animated triangles) and social perception (TASIT). Parental subgroups were based on the 95% CI of the controls (cognitive impairment < 95% CI and good cognitive functioning > 95% CI).

Results Data analysis is ongoing and results will be presented at the conference.

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EV1249
Gynecological consultations during the period of untreated psychosis
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Background Twenty-one percent of women with first episode of psychosis in the south Granada between 2008 and 2014 went to hospital emergency during the duration of untreated psychosis (DUP) aiming a gynecological consultation caused by psychotic symptoms. Only one in five was referred to mental health services.

Aims To improve difficulties detecting cases during the prodromal phase, we aim to analyze the patient’s profile and reasons for consultation and study whether there are variables that facilitate referral to specialist intervention.

Methods A retrospective clinical–cases review of medical histories was made searching for sociodemographic variables, drug consumption, emergency services consultations and psychotic prodromal outcomes.

Results They were single women between 18–32 years. Sixty percent reported cannabis consumption. All of them live with family. Eighty percent were studying or unemployed. Three types of emergency consultations were reported with a similar incidences: order the emergency–contraception-pill, a pregnancy test or “a scan to check virginity/a nonconsensual relationship”. During the initial exploration, about 40% were under the influence of drugs.