Objectives: To review the different kinds of psychotic disorders that may arise in relation to epilepsia.
Methods: Literature review of scientific papers and classic textbooks on the issue, including references in both Spanish and English languages.
Results: From 2008 to 2011 our patient was hospitalized with episodes of different clinical features leading to different diagnoses (in 2008 the episode was compatible with a maniac phase and led to a diagnosis of possible Bipolar Disorder, in 2010 dissociative-like symptoms became more prominent and led to a diagnose of Dissociative Identity Disorder and in 2011 the symptoms pointed to an interictal depression), and a subsequent symptomatology that made clinicians consider a diagnose of unspecified schizophrenia. From 2015 to 2020 our patient suffered multiple decompensations resulting in up to six new hospitalizations, with psychotic symptoms in the shape of auditive hallucinations being consistent and affective symptoms varying widely. This evolution suggests a plausible diagnose of interictal chronic psychosis with bipolar-like affective episodes.
Conclusions: An extensive review of the available scientific literature shows, as so does this case, that along the course of an epileptic disease both schizophrenia-like psychosis and affective psychosis may arise, and that those might be divided along the categories of peri ictal and inter ictal disorders.

Disclosure: No significant relationships.
Keywords: psychosis; epilepsia; schizophrénia; bipolar

EPV0652

Investigation of early signs of peripheral artery disease in patients with schizophrenia using toe-brachial index

L. Jørgensen[1,2*], C. Tranekær Hostrup[1,2], S. Eggert Jensen[2,3] and R. Ernst Nielsen[1,2]

[1]Psychiatry, Aalborg University Hospital, Aalborg, Denmark; [2]Department Of Clinical Medicine, Aalborg University, Aalborg, Denmark and [3]Cardiology, Aalborg University Hospital, Aalborg, Denmark

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.2153

Introduction: Patients with schizophrenia have a reduced life expectancy compared to the general population, and cardiovascular diseases contribute to this. Peripheral arterial disease (PAD) is associated with excess all-cause mortality and specifically with cardiovascular morbidity and mortality. The risk factors for PAD, such as diabetes, smoking, hypertension, dyslipidaemia and obesity, are more common among patients with schizophrenia which could contribute to a possibly higher prevalence of PAD among patients with schizophrenia.
Objectives: To investigate PAD utilizing toe brachial index (TBI) in a population of patients diagnosed with schizophrenia with the purpose of establishing prevalence rates amongst newly diagnosed as well as more chronic patients.
Methods: A cross-sectional study of patients with schizophrenia (ICD10-diagnosis F20 or F25) with a study population of 57 patients diagnosed with schizophrenia within the last 2 years, psychiatric healthy controls matched by age, sex and smoking status and 142 patients with a schizophrenia diagnosis more than 10 years ago. The primary outcome is TBI in patients with schizophrenia stratified to the two subpopulations. The TBI will be calculated from the arm and toe systolic pressures. The toe pressures were measured using photoplethysmography (SysToe®, Atys Medical).
Results: No results are available yet. The cohort will be described by age, sex, smoking status, body fat percentage and physical comorbidities. The TBI of the two subpopulations will be compared with psychiatrically healthy controls using paired t-tests if data is normally distributed. If transformation is unsuitable, Wilcoxon test will be carried out instead.
Conclusions: No results are available yet. Results will be presented at the EPA's congress 2021.

Disclosure: No significant relationships.
Keywords: toe-brachial index; Mortality; atherosclerosis; Cardiology

EPV0652a

Historical path of paraphrenia

A. Hernández Mata*, A. Sotillos Gómez, P. Marco Coscujuela and B. Ordóñez Méndez

Psychiatry, Hospital Universitario de Getafe, Getafe, Spain

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.2154

Introduction: Paraphrenia is a psychotic disorder characterized by an insidious development of a vivid and exuberant delusional system, accompanied by hallucinations and confabulations, without a personality deterioration. It is considered to be an intermediate entity between the disorganization of schizophrenia and the systematization of a delusional disorder.
Objectives: Develop knowledge about paraphrenia as an individualized diagnostic entity and its historical path through the classical authors' texts.
Methods: Extensive research on the historical path of the paraphrenia diagnostic entity was carried out, as well as the current situation of the term.
Results: In the German psychiatry it was Karl Kahlbaum who first introduced the term of paraphrenia. Later many authors of the German psychiatry delved into this diagnostic entity. Emil Kraepelin described four different subtypes of paraphrenia: paraphrenia systematica, expansiva, confabulans and phantastica. However, other authors such as Kleist or Bleuler, considered paraphrenia should not be judge as an individualized diagnostic entity as it should be considered inside schizophrenia, so the term disappeared in the German psychiatry. In the French psychiatry, unlike the German, the independence of chronic psychosis from schizophrenias was recognized, so the term had a longer path. Henry Ey recognized four important clinical features in this disorder: paralogical thought dominance, megalomania, confabulation and integrity of relation with reality.
Conclusions: Currently the term paraphrenia is no longer considered an individualized diagnostic entity. In fact, in today's textbooks of psychiatry paraphrenia is considered a psychotic disorder that has nothing in common with the one described by the classical authors, and it is part of the late-onset psychosis.

Disclosure: No significant relationships.
Keyword: Paraphrenia

https://doi.org/10.1192/j.eurpsy.2021.2154 Published online by Cambridge University Press

Sexual medicine and mental health

EPV0653

Sexual and reproductive health (SRH) needs of women admitted to eileen skellern ward (ES1) psychiatric intensive care unit (PICU)

E. Rose[1], L. Blake[1]*, E. Covshoff[2], F. Sethi[1], R. Rathouse[1], A. Wilson[1], A. Bolade[1] and R. Pittrof[2]

[1]Psychiatric Intensive Care Unit, THE MAUDSLEY HOSPITAL, LONDON, United Kingdom and [2]Camberwell Sexual Health Clinic, KINGS COLLEGE LONDON, LONDON, United Kingdom

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.2155

Introduction: PICU inpatients are likely to be at increased risk of having unmet SRH needs due to barriers to accessing services. Since May 2018, an in-reach SRH assessment has been available to all psychiatric inpatients on ES1 ward, if referred. Analysis of referrals over 15 months identified only 24 had been made during this time.
Objectives: To assess the SRH needs of women admitted to ES1 PICU, the feasibility of providing a SRH in-reach clinic, and the acceptability of delivering a nurse lead referral programme.
Methods: A bi-monthly SRH in-reach clinic and a nurse led SRH referral pathway were implemented on ES1 over a seven-month period. A staff training needs assessment was performed followed by training, a protocol was developed, staff attitudes were explored, and patient engagement was sought.
Results: A total of 41% (32/77) of patients were referred, which was a 29% increase. 53.1% (17/32) of the total referrals had a true SRH need, equating to a 10% increase and 22% (17/77) of all PICU admissions. 90% of referrals were made by nursing staff. A staff focus group (n15) highlighted the acceptability and perceived importance of offering SRH care in PICU, if interventions were appropriately timed and the patient's individual risk profile was considered.
Conclusions: Results identify that SRH needs for PICU admissions are greater than previously realised. Providing a nurse led referral pathway for an SRH in-reach clinic is acceptable, feasible and beneficial for PICU patients. This project has resulted in service improvements including offering asymptomatic STI testing to all PICU admissions.

Disclosure: No significant relationships.
Keywords: PSYCHIATRIC INTENSIVE CARE UNIT; WOMEN'S MENTAL HEALTH; SEXUAL AND REPRODUCTIVE HEALTH, SEXUAL MEDICINE AND MENTAL HEALTH

EPV0654

Homosexuallity in the eastern soceity

V. Mahasneh

Psychiatry, Private Clinic, Damascus, Syria
doi: 10.1192/j.eurpsy.2021.2156

Introduction: Everybody Knows the murmurs about homosexuallity that make harm to those humans especially in the Eastern Society.
Objectives: We (as Mental Health Professionals) should struggle against Stigma of Homosexuality as well as psychoeducate others about their human rights.
Methods: As a psychiatrist as well as EMDR Clinician Practitioner, i interviewed and still interview many clients who are homosexual. The first sessions, they are afraid to talk about their situation because of the Stigma as well as i am a Muslim, and their bad expeirence when they went to some psychiatrists who tortured them verbally. Withregard many of them tell me (i pray, fast, etc.), but their families and religious leaders say to them (you are not faithful) as judgement for them. Even me, i was attacked by some others (for example : Religious Leaders …) because i say homosexuality is normal.
Results: Homosexualls till now are tortured (Verbally, Physically and Sexually) in general, and especially in the Eastern Sosciety.
Conclusions: We should work more and more to psychoeducate others about homosexuallity especially the religious leadrers that those are humans and we should respect their human rights. And this Stigma should be DELETED from the MIND.

Disclosure: No significant relationships.

EPV0657

Deviations in psycho-sexual development of teenage girls and its legal consequences in modern society

L. Baranskaya

Psychiatry, Psychotherapy And Narcology, Ural State Medical University, Yekaterinburg, Russian Federation
doi: 10.1192/j.eurpsy.2021.2157

Introduction: When studying the multiple aspects of the problem of criminal offences of a sexual character committed by adult males towards teenage girls, the role of digital communication technologies is not taking into account.
Objectives: To reveal the negative aspects of social and family connections and the influence of digital communications on the formation of deviations in psycho-sexual development of teenage girls who had become victims of sexual delicts of a non-violent character.
Methods: We have studied the specifics of psycho-sexual behavior of seventeen teenage girls, aged 12-16 and their Internet and SMS correspondence with adult males by analysis of semantics and pathos-psychological markers.
Results: Intellectually, all the teenage girls are within normal age limits. They were bringing up in full, materially well-off families. Most of the girls' parents experience a formal attitude towards them. The disrupted emotional ties of the teenage girls with mother or both parents leads to deviations in the development of normal teenage reactions, sexual attitudes. Their feeling of loneliness within the family, forces them to turn towards support to Internet-society or other adults of the opposite sex to their parents' acquaintances. The desire to ascertain perfectionist expectations and self-assertion leads the teenagers to the realization of various forms of auto-destructive sexual behavior. They actively demonstrate in the Internet obscene photos of their genitals. While trying out their sexual importance, they persistently urge adult males towards sexual contacts.
Conclusions: Thus, the negative aspects of psycho-sexual development of teenage girls can disrupt their sexual behavior in adulthood.