#### **EPP1008**

## Postictal psychosis in a psychiatric pacient, about a case

M. V. López Rodrigo\*, M. Palomo Monge, A. Osca Oliver, V. Ros Fons and F. Tascón Guerra

Psiquiatría, Hospital Nuestra Señora del Prado, Talavera de la Reina, Spain

\*Corresponding author. doi: 10.1192/j.eurpsy.2023.1283

**Introduction:** Postictal psychosis is the most frequent psychosis in epileptic patients, appearing between 3-8% of them. As temporary criteria, it must appear in less than a week after the epileptic crisis, with a duration of between 15 hours and 3 months.

**Objectives:** We present the case of an 82-year-old patient admitted to the ED due to an epileptic seizure. Request evaluation for agitation and disorientation.

**Methods:** This is an 82-year-old patient diagnosed with epilepsy for 5 years, with unwitnessed seizures, under treatment with levetirazetam. In the last consultation with neurology, the differential diagnosis was raised with anxiety crises due to normal intercritical EEG. The patient went to the emergency room after a partial crisis, presenting a post-critical state and beginning hours later with disorientation in time and place, manifesting delusions of religious content, as well as visual hallucinations of the same type, presenting agitation that required pharmacological and mechanical restraint. **Results:** Admission to the Neurology Service was decided, with a good response to treatment with a typical intramuscular antipsychotic, with complete remission of the condition in 48 hours. Small areas of ischemia compatible with the patient's age are observed in the cranial CT and the EEG shows slowed global activity.

**Conclusions:** Postictal psychosis is a phenomenon of low prevalence, however, it is important to take it into account. It is important to recognize the postictal "lucid" period in patients with a family or personal history of psychiatric illness and seizures with compromised consciousness.

Disclosure of Interest: None Declared

#### **EPP1009**

## Dysfunction of microstructure and metabolism in corpus callosum in juvenile schizophrenia

M. Ublinskiy<sup>1\*</sup>, A. Manzhurtsev<sup>1</sup>, T. Akhadov<sup>1</sup> and I. Lebedeva<sup>2</sup> <sup>1</sup>Radiology, Clinical And Research Institute Of Emergency Pediatric Surgery And Trauma and <sup>2</sup>Psychiatry, Psychiatry- National Mental Health Research Centre, Moscow, Russian Federation \*Corresponding author. doi: 10.1192/j.eurpsy.2023.1284

**Introduction:** The corpus callosum (CC) is one of the important structures responsible for communication between the brain hemispheres. Its role is particularly important in cognitive tasks performance, information processing, concentration of attention, in

mnestic processes. The corresponding dysfunctions are the major symptoms of schizophrenia, and hence, structural characteristics of CC in schizophrenics are in the focus of attention.

**Objectives:** The aim of the study was to analyze the microstructural and metabolic features of the corpus callosum in recently onset schizophrenia.

**Methods:** The study was carried out in 13 men with juvenile endogenous paroxysmal psychosis (disease standing ≤ 5 years after first manifestation) aged 17-27 years (median  $22.0\pm3.1$  years). The studies were carried out during unfolding remission or in remission. Control group consisted of 15 mentally healthy young men (18-28 years). MRI and 1H-MRS studies were carried out on Achieva 3T MRI scanner device (Phillips). Diffuse tensor images were obtained in the axial plane using echo-planar pulse sequence. Diffuse gradients were applied in 32 noncolinear vectors. The spectra were recorded by single voxel 1H-MRS. The spectroscopic voxel (2×1×1 cm) was placed in the CC genu region. The PRESS sequence was used (TR/TE=1500/40 msec).

**Results:** Statistical analysis showed no abnormal diffusion values in the CC splenium in the patients. Significant changes in the parameters were found in the CC genu. The values of ADC and RD increased, while FA coefficient decreased in the CC genu of patients with the initial stage of schizophrenia; PD values were normal. The increase of RD in the presence of unchanged PD indicated a decrease of water diffusion velocity and anisotropy in the direction perpendicular to the axon orientation. A typical 1H-MRS of the CC genu was presented in Figure 1. The results of statistical analysis of metabolite signal intensities in the CC genu of patients and normal subjects were presented in Figure 2. NAA level was reduced significantly in the patients. No appreciable changes in Cho values in the CC genu were detected in the patients vs. normal subjects. **Image:** 



#### Image 2:



**Conclusions:** The increase of RD could be caused by several factors: impairment of myelin membranes, axon damage because of impairment of axon cytoskeleton, and changed organization of fibrils. Our results showed that RD increase in patients with early schizophrenia did not conform to active demyelination, which was proven by the normal level of Cho, while axon damage, shown by low level of NAA, did not lead to PD reduction.

The decrease of NAA level detected in our study indicated axonal damage in the CC genu of patients in the early stage of schizophrenia. The increase of RD in the presence of normal Cho level seemed to indicate disorders in the axon cytoskeleton damage, but not active demyelination.

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Pain / Philosophy and Psychiatry / Precision Psychiatry / Psychophysiology

### **EPP1010**

# The Pain of Unjust Losing. The feeling of injustice and the perception of pain

E. Wojtyna<sup>\*</sup> and A. Mucha

Institute of Psychology, University of Silesia, Katowice, Poland \*Corresponding author. doi: 10.1192/j.eurpsy.2023.1285

**Introduction:** Social pain is a phenomenon where you feel pain in response to a social stimulus such as feelings of loss, exclusion, and injustice. In today's world, people often experience unfair treatment. A special case is a situation in which the individual has aroused commitment, but there is no consequence in the form of the expected gratification.

**Objectives:** The study aims to determine the impact of losing and unjust losing on the perception of pain.

Methods: The study involved 80 people who were randomly assigned to one of the following groups: win, lose, unfairly lose

and control. The first three groups participated in a "paper-scissorstone" game that was created in which they played against a false opponent. The game was constructed in such a way as to obtain the result provided for each group. The "unfairly lose" group received negative points for both a loss and a draw. The control group was only watching the play of two other players. Pre- and post-game pain thresholds and pain tolerance were tested in each group. Pain severity was also assessed. The pain was generated by a thermal stimulus using the TSA-II neuroanalyzer. Pain severity and involvement in the game were analyzed with the VAS scale.

**Results:** The level of involvement in the game was identical in all three experimental groups. The lowest pain nuisance was observed after the game in the "win" group. The pain was the most strenuous in the group that was unjustly lost. In the group of "unfairly lose", the pain tolerance threshold decreased after the game.

**Conclusions:** Feelings of injustice can increase pain and pain sensitivity in people who, after inducing commitment, do not receive fair gratification.

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### **EPP1011**

## A systematic review to assess the use of psilocybin in the treatment of headaches

S. Bhanot<sup>1\*</sup>, M. C. Q. Lin<sup>2</sup>, S. Bains<sup>3</sup>, A. Monroe<sup>2</sup> and V. W. L. Tsang<sup>4</sup>

<sup>1</sup>Biochemistry and Biomedical Sciences, McMaster University, Hamilton; <sup>2</sup>University of British Columbia, Vancouver; <sup>3</sup>McMaster University, Hamilton and <sup>4</sup>Department of Psychiatry, University of British Columbia, Vancouver, Canada \*Corresponding author.

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**Introduction:** Psilocybin is a naturally occurring psychedelic compound whose effects have been seen in studies for treatment of depression, anxiety and pain management. Given its structural similarities to 5-hydroxytryptamine, a monoamine controlling brain modulation of pain input, preliminary studies sought to test serotonergic interactions of psilocybin with headaches.

**Objectives:** Explore efficacy of psilocybin as treatment for individuals with headaches, including migraines, essential headaches, cluster headaches and unclassified head pains.

**Methods:** Studies were found from six major databases, with inclusion criteria consisting of participants with any type of headache using psilocybin as a treatment. Each study was independently screened by two reviewers at two stages, with inconsistencies reviewed by a third, senior reviewer.

**Results:** The systematic review evaluated eight articles. Benefits of macrodosing were explored in one study which reported higher levels of pain relief in comparison to microdosing and conventional pain medications. Top benefits of microdosing as reported by participants included convenience, perceived safety and reduced side effects when compared to hallucinogenic doses of psilocybin. Participants across five studies reported improvements to their headaches as characterized by changes in frequency, intensity,