

EPA 2020 ABSTRACT SUPPLEMENT

European Psychiatry

THE JOURNAL OF THE EUROPEAN PSYCHIATRIC ASSOCIATION



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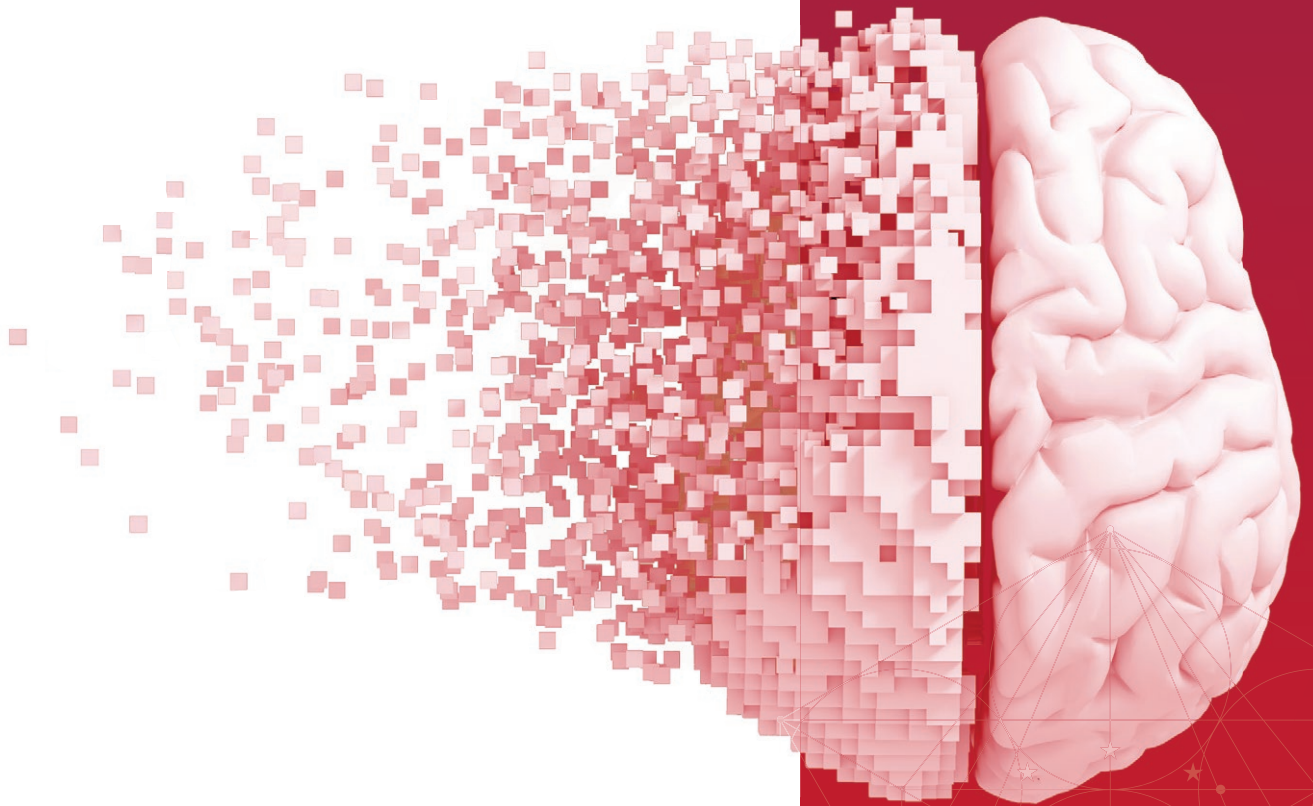
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EPA 2020

28TH EUROPEAN
CONGRESS OF PSYCHIATRY

4-7 July 2020

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The Abstracts of the 28th European Congress of Psychiatry - 2020 are published as a Supplement to *European Psychiatry* and have been peer-reviewed by the Local Organising Committee of the European Congress of Psychiatry.

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European Psychiatry (ISSN 1778-3585 (Online) 2020 (volume 63). Published by Cambridge University Press.

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Contents of the Supplement are available on the journal website:
<https://www.cambridge.org/core/journals/european-psychiatry>

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$p < 0.05$. The reported study was funded by RFBR according to the research project № 18-315-20019.

Results: On the strength of cluster analysis 3 types of cognitive disturbances were found. The first type had 36% of patients ($n=18$) who predominantly have been registered pronounced lexical system, verbal associative productivity, attention and also working memory and performing function disturbances with relatively less lesion of vision, verbal memory and coordination. The second type had 30% of patients ($n=15$). In difference with first type, they had more pronounced attention, visual memory, performing function and coordination disturbances. The lack of verbal associative productivity and lexical system, against of moderate level of working memory disturbances were less than in first group. The third type had 34% of patients ($n=17$). It was shown with manifest lexical system decreasing on the background of less lesion of attention, working, visual and verbal memory, verbal associative productivity, performing function disturbances with almost secure coordination.

Conclusions: Neurocognitive deficits of patients with schizophrenia, who have anti-relapse antipsychotic therapy has three types of symptoms combination both for manifestations and for sickness severity.

Conflict of interest: No

Keywords: schizophrenia; psychosis; neurocognitive deficits; antipsychotic treatment

Schizophrenia and other psychotic disorders - Part VII

EPP1094

Psychoeducation in the complex treatment of patients with schizophrenia

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Introduction: Important role in the rehabilitation of patients with schizophrenia is played psychoeducation, that in recent years has been actively implemented in the system of rehabilitation measures in Ukraine.

Objectives: The aim of our work was to develop optimal approaches to use of psychoeducation in the rehabilitation of patients with schizophrenia. 159 patients of both sexes with diagnosed paranoid form of schizophrenia and 66 members of their families were examined.

Methods: During the study psychodiagnostic and clinical-psychopathological methods were used.

Results: Fifth-stage psychoeducational program for patients with schizophrenia and their relatives was developed on the basis principle of differentiated approach and principle of partnership between medical staff and patient. The psychoeducational program included comprehensive usage of information training, training for forming attachment to therapy and interpersonal interaction, training for improving compliance, cognitive-behavioral psychotherapy, problem-oriented discussions. There were qualitative reduction of psychopathological symptoms, normalization of emotional state,

severe positive dynamics of level of social functioning, the transition of the maladaptive types of attitude towards the illness into adaptive types, awareness of their role and responsibility for effectiveness of treatment, the feeling of support of relatives, which determines high level of perception of life quality on background of usage of antipsychotic drugs in combination with psychoeducational program.

Conclusions: We observed a positive dynamics of family functioning - the prevalence of an adequate attitude of relatives towards the illness, coupled with a high level of indicators of the family support scale on the background of the implementation of the psychoeducational program in the families of patients of the main group.

Conflict of interest: No

Keywords: quality of life; schizophrenia; psychoeducation; social functioning

EPP1100

Salvation by self-mutilation: the consequences of the delusional content in a first-psychotic episode.

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Introduction: Approximately 11% of patients with schizophrenia injure themselves at some point between the beginning of their psychosis and their first psychiatric consultation. Also, a recent systematic review concluded that acute psychosis, in particular first-episode schizophrenia, appears to be the main cause of major self-mutilation.

Objectives: To present a rare case of self-mutilation as a first-episode psychosis expression. To discuss the importance of the delusional content and the in the clinical picture.

Methods: The data was collected through patient and family interviews, as well as from his medical record. We searched Pubmed using MeSH terms: psychotic disorders OR schizophrenia and self mutilation for a literature review.

Results: A twenty-three years old male, without known psychiatric history, presented in the Emergency Department with finger traumatic self-amputation, acting under the influence of imperative auditory hallucinations pressing him to proceed "I would die if I hadn't cut, the Devil's voice told me that" (sic). He didn't intend to die, he was instead looking for salvation. Organic aetiology investigation was addressed with no relevant findings. Drug tests were negative. With risperidone 3mg bid, all sensory hallucinations remitted after four days in the ward, and he was discharged at day twelve with partial insight and residual grandiose and mystical delusions.

Conclusions: Psychotic symptoms started five years earlier, but his poor social background, and family acceptance of some bizarre behaviors may have delayed contact with psychiatry. This traumatic experience may have been avoided, as earlier intervention in psychosis may reduce the chance of self-mutilation since adequate antipsychotic treatment appears to be protective.

Conflict of interest: No

Keywords: imperative hallucination; self-mutilation; first-psychotic episode; schizophrenia