Methods: This was descriptive and analytical cross-sectional study, carried out with patients followed for type 2 diabetes at the endocrinology consultation.
The participant's sociodemographic and clinical information was obtained through face-to-face interviews and medical records.
DD was assessed using the Arabic version of diabetes distress scale (DDS-17). The DDS contains 17 items, each rated on a 6-point Likert scale. The scale yields a total diabetes distress score, and scores for four subscales: emotional burden, regimen distress, physician distress and interpersonal distress.
Results: There were 103 subjects. The mean age was 59.31 ±10.83 years with a sex ratio (M/F) = 1.19.
Median duration of diabetes was 7 years **(IQR 3 ; 12** years). Among our patients, 31.1% of patients had properly controlled diabetes (HbA1c < 7%) and 41% had at least one diabetes complication.
The prevalence of diabetes related distress was 70.90% in which emotional distress was the most prevalent (78.60%) domain.
Low socio-economic level (p=0.001), married status (p=0.034) having diabetes complications (p=0.008) younger age at onset of diabetes (p=0.001) were associated with diabetes related distress. Poor HbA1c control (HbA1c≥7%) was significantly correlated with DD (p≤0,001).
Conclusions: Our study suggests that diabetes related distress was highly prevalent in type 2 diabetes patients in Tunisia. Active screening for DD should be an integral part of diabetes care.

Disclosure of Interest: None Declared

EPV0282

A case of Pathological Laughter in a patient with recurrent stroke

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Introduction: Stroke survivors frequently deal with neuropsychiatric sequelae - depression, anxiety and apathy being the most common ones. Pathological laughing and crying (PLC) is a post stroke condition characterized by brief, intense uncontrollable crying and/or laughing due to a neurological disorder. Prevalence of PLC post stroke has been reported to be 15-20%. Pathological laughter (PL) is commonly associated with bilateral or diffuse cerebral lesions. Ischemic injury involving the internal capsule and basal ganglia seems to be associated with emotional disorders.
Objectives: To discuss an uncommon case of pathological laughter developing after recurrent infarct.
Methods: A 32-year-old male patient presented to the medical emergency for complaints of slurring of speech since 7 hours. On examination, patient was alert, oriented, with blood pressure 150/90 mmHg. He had a history of similar stroke 2 years prior to current complaints and was on treatment for hypertension since then.
Baseline investigations were done. MRI brain revealed *acute lacunar infarcts in bilateral ganglio-capsular region*, chronic small vessel ischaemic changes in B/L periventricular white matter (Fazeka grade 2) and micro-haemorrhages in various brain regions. Patient was managed conservatively (antiplatelets, statins, antihypertensives).
Patient was then referred to Psychiatry department for uncontrollable laughing spells, which started few hours after onset of above complaints. These occurred without any provocation, every 1-2 hours, lasting for several seconds to a minute, and relieved spontaneously. Patient was aware of episodes and found them embarrassing socially. Mental status examination revealed no mood features or other abnormalities.
Patient was prescribed Escitalopram, but shifted to homeopathic medicine and was lost to follow up. Telephonic interview one year later revealed that while other complaints have remitted, patient still has laughing spells of similar quality and frequency.
Results: Discussion: In post stroke PLC, pathological crying represents about 80% cases, while Pure Pathological Laughing, as in the present case, is uncommon. It is generally seen in diffuse CNS pathologies (eg. multiple sclerosis) or bilateral – ischaemic or degenerative.
In case of strokes, PL may herald symptom onset, or may immediately follow focal deficits. The aetiology of PLC is unknown; monoaminergic neurotransmission may be altered in post stroke PLC. SSRIs are regarded as first choice treatment agents, given their greater tolerability overall.
Conclusions: Pathological laughter is a comparatively uncommon but recognisable and treatable post stroke sequela, more commonly seen in bilateral lesions. Patients often describe PL as distressing and socially disabling, but awareness about this condition and available treatments is lacking.

Disclosure of Interest: None Declared

EPV0283

Juvenile fibromyalgia, a frequently missed disorder: a case report and literature review

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Introduction: The clinical features of juvenile fibromyalgia were first described by Yunus & Masi in 1985. In the US, it is estimated that about 6% of adolescents between 15 and 19 years of age suffer from juvenile fibromyalgia. However, this entity remains "a poorly defined disorder", being excluded from the main diagnostic classification systems.
Objectives: The goal of our work is to present and discuss a case-based review of juvenile fibromyalgia.