

## EV136

**Body dysmorphic disorder and psychosis: A case report and review of literature**

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**Introduction** Patients with body dysmorphic disorder (BDD) are concerned about a slight or non-existent defect on their appearance, causing significant stress and interfering on their social and professional life.

Despite its prevalence and psychosocial impact, this disorder remains unknown by many clinicians.

**Methods and objective** Through a review of literature and illustration in our case report we will define: the symptomatology of this pathology, psychopathological models of the disorder and the etiopathogenic assumptions associated with it, in terms of risk factors and neurobiological correlations.

**Case report** Patient 33 years old unmarried having been the victim of an AVP at the age of 25 years causing him a head injury above right eye for which he undergoes cosmetic surgery three times but the patient still not satisfied with installation of psychotic and delusional disorders requiring the use of antipsychotics.

**Conclusion** The complexity of body dysmorphic disorder should not discourage clinicians to confront this disease. The management requires more than putting under medical treatment associated to psychotherapy, we also need a good relationship of trust and maintain effective working alliance.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1121>

## EV137

**When a hypochondriasis forced a patient to emigrate**

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**Introduction** Illness anxiety disorder, or hypochondriasis, is one the most difficult and complex psychiatric disorders to treat.

**Objectives** To describe a case of a patient with illness anxiety disorder and summarize the most important aspects on this theme.

**Methods** Interviews with the patient and literature review searching the PubMed/MEDLINE were performed.

**Results** A 42-year-old married man, dentist, Angolan citizen, who had recently arrived in Portugal, was referred to psychiatry assessment during his hospitalization in medicine service, after an exhaustive medical evaluation. He was excessively anxious and worried about having a severe heart disease because he has gradually become more aware of palpitations and chest pain. Although negative results of the examinations he was worried that “something has been missed”. After he had consulted several medical providers in Luanda, he decided to seek medical advice in Portugal. Patient believed that his symptoms exacerbated with activity and intake food, so he gradually restricted them. Due to his health anxiety, he stopped his work and lost 36 kilos. Shortly before the onset of the clinical picture, his daughter was hospitalized for the first time.

**Conclusion** Illness anxiety disorder often begins in early to middle adulthood. Its core feature is the fear or idea of having a serious

disease, based on the misinterpretation of bodily signs and sensations as evidence of disease, which persists despite appropriate medical evaluations and reassurance. This patient fulfills the DSM-5 criteria of illness anxiety disorder and has a clinical profile similar to those found in literature.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1122>

## EV138

**Psychogenic astasia-abasia: A case report and a review of the literature**

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**Introduction** Psychogenic movement disorders are the result of a psychiatric rather than a primary neurological disorder. Astasia-abasia refers to the inability to stand or walk despite having good motor strength and conserved voluntary coordination.

**Objectives** Starting from a case report of a patient with an unusual gait disturbance the author intends to discuss the history and knowledge evolution on psychogenic gait disorders until the present time.

**Aims** To debate the nosology, clinical features, diagnosis and treatment of psychogenic movement disorders.

**Methods** Non-systematic review of the literature. Case presentation with the exhibition of a video showing the patient's gait.

**Case presentation** A 48-year-old female was admitted to a psychiatry ward after attempting to commit suicide by cutting her throat. On day 3, she suddenly could not walk or stand without help. The neurological examination revealed some inconsistencies and all laboratory, electroencephalogram, and imaging studies performed were normal. After 2 weeks of treatment she started gradually getting better until the full recovery.

**Discussion** The gait disturbance presented might be regarded as a form of astasia-abasia. This term was first coined by Paul Blocq (1888) when he described a group of patients who showed inability to maintain an upright posture. Similar movement disorders were previously described as hysteria by authors like Charcot. Nowadays, these case descriptions would be likely considered cases of conversion or psychogenic gait disorder.

**Conclusion** The etiology of these disorders is still not very well understood. These patients usually benefit from a multidisciplinary approach that includes psychiatry, neurology, physiotherapy, among others. Pharmacological and non-pharmacological treatments should address the underlying psychiatric condition.

**Disclosure of interest** The author has not supplied his declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1123>

## EV139

**Psychotherapy anxiety and phobic disorders**

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The aim of the study: the development of a comprehensive system of psychotherapy and psychocorrection of anxiety disorders of neurotic case, based on the study of their clinical structure and peculiarities of emotional damages.

**Methodologies** Spielberger, Eysenck Personality Questionnaire (EPQ), the Hamilton Rating Scale for Depression (HRSD), the study of accentuation of personality by K. Leonhard.

**Scope and contributing research** One hundred patients with diagnostic categories: F41.0 – Panic disorder (episodic paroxysmal anxiety), F41.1 – Generalized anxiety disorder, F41.2 – mixed