

Results: The presence of anxious symptoms, affective instability, feelings of emptiness and hopelessness as well as impulsivity can give rise to scenarios in which the decision-making capacity is impaired, being necessary to resort to legal means that allow us to prioritize the well-being of the patient.

Conclusions: The decision-making capacity can be altered in crisis situations in borderline personality disorder, having legal tools at hand that allow us to carry out actions to preserve the physical state of patients.

Disclosure: No significant relationships.

Keywords: borderline; legal; personality; disorder

EPV0996

Traumatic brain injury, antisocial personality disorder and alcohol

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Introduction: Traumatic brain injury (TBI) can cause changes in the personality and behaviors. History of TBI has been associated with violent behavior and substance abuse.

Objectives: Presentation of a clinical case of a patient with antisocial personality traits who suffered a TBI and abuses alcohol.

Methods: We conducted a bibliographic review by searching for articles published the last 5 years in Pubmed

Results: We present the case of a 48-year-old male patient with a history of myoclonic epilepsy, who suffered a TBI in a car crash. During his stay at ICU antisocial and borderline personality traits were found. When he came to consultations, he presented signs of alcohol intoxication (verbiage with hasty and dysarthric speech, and psychomotor incoordination). He acknowledges daily alcohol intake, although he minimizes it. During the interview he is irritable, prone to anger when contradicted and boasts of episodes of heteroaggressiveness and violence that he has carried out in the past. He reports morning sickness and tremors, but does not accept that they may be due to alcohol withdrawal. There is no motivation for change.

Conclusions: It has been determined that history of TBI is more frequent in individuals with antisocial personality. TBI has been linked to violent behaviors, poor inhibitory control, engaging in illegal acts and higher rates of substance abuse. However, the causal relationship between antisocial behavior and TBI has yet to be clarified, as the available evidence does not show which comes first. More research is needed in the future that takes into account the temporal sequence of events.

Disclosure: No significant relationships.

Keywords: traumatic brain injury; alcohol; antisocial behavior

EPV0997

Considering Envy and Rivalry within the nomological network of pathological narcissism: an empirical study

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Introduction: Few is known regarding the intervening variables between pathological narcissism and sadism personality. Specifically, envy is a psychoanalytical construct that appears especially promising in illuminating such relationships.

Objectives: To extend the knowledge regarding the nomological network of pathological narcissism.

Methods: We administered to a sample of Italian adults a battery of self-report questionnaires including the Italian version of the Benign and Malicious Envy Scale, the Assessment of Narcissistic Personality, The Narcissistic Admiration and Rivalry Questionnaire and the Pathological Narcissism Inventory.

Results: First, the Italian version of the Benign and Malicious Envy Scale showed good fit indexes confirming the original factorial structure as well as configural invariance. We found that only the grandiosity facet of the Pathological Narcissism Inventory, the Rivalry subscale of the Narcissistic Admiration and Rivalry Questionnaire and the Malicious subscale of the Benign and Malicious Envy Scale positively and significantly predicted Assessment of Narcissistic Personality scores. Moreover, throughout a structural equation modeling approach, the hypothesis that rivalry and malicious envy both mediate the relationship between grandiosity and sadism was empirically supported.

Conclusions: The use of the Benign and Malicious Envy Scale resulted to be promising in the investigation of the nomological network of pathological narcissism. Limitations and future directions are discussed.

Disclosure: No significant relationships.

Keywords: narcissism; envy; Rivalry

EPV0998

Antisocial personality disorder: what else can be done?

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Introduction: Antisocial personality disorder (ASPD) is an under-researched mental disorder, and these patients are often excluded from mental healthcare and thus from studies. The consequences of antisocial behavior result in great burden for the patients, victims, family members and for society, and it is associated with criminality, substance use and relationship difficulties.

Objectives: The aim of this abstract is to review the current possibilities of treatment, and its efficacy.

Methods: We present a revision of the state of the art on treatment of ASPD, drawing from *PubMed* and using the keywords

“Antisocial personality disorder” and “treatment”, in a time period ranging from 2011 to 2021, inclusive.

Results: There is little evidence of effective treatments for patients with ASPD and no intervention has been established as the treatment of choice for this disorder. Recent studies, found benefits from Mentalization-based treatment (MBT), that specifically targets the ability to recognise and understand the mental states of oneself and others, an ability compromised in these patients. Specifically, reduction of anger, hostility, paranoia, and frequency of self-harm and suicide attempts, as well as the improvement of negative mood, general psychiatric symptoms, interpersonal problems, and social adjustment were found.

Conclusions: ASPD is a condition that incurs substantial societal and individual costs. Although proper treatment is yet being discussed, MBT is a psychotherapeutic treatment that has shown some promising preliminary results. Thus, we believe that guidelines on the treatment of ASPD and possibilities for more systematical research, with prevention programs, is urgently needed.

Disclosure: No significant relationships.

Keywords: Treatment; Antisocial Personality disorder

EPV0999

Personality disorders and Juvenil Myoclonic Epilepsy

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Introduction: There is a high comorbidity between psychiatric disorders and juvenile myoclonic epilepsy (JME), observed in up to 58% of these patients; specifically, mood disorders, anxiety and personality disorders (PD). In some patients with PD there are nonspecific alterations in the EEG, which nevertheless sometimes involve pathology. The presence of personality disorders along with JME has been repeatedly described. Previous studies have emphasized the difficulties in treating patients with JME, which have been attributed to some specific psychiatric, psychological and psychosocial characteristics.

Objectives: Describing distinctive personality traits in JME

Methods: Review of scientific literature based on a relevant clinical case.

Results: 19-year-old woman, single. Psychiatric history since she was 12 due to anxiety-depressive symptoms, after being diagnosed with JME. 4 admissions in Psychiatry, with a variety of diagnoses: eating disorder, attention deficit hyperactivity disorder and borderline personality disorder. The evolution of both disorders has been parallel, presenting epileptic seizures due to irregular therapeutic adherence together with pseudo-seizures, which made difficult their differential diagnosis. In addition, he has had frequent visits to the emergency room for suicide attempts and impulsive behaviors.

Conclusions: In 1957, for the first time, distinctive personality traits were described in patients with JME: lack of control and perseverance, emotional instability, variable self-concept and reactive mood, which have been confirmed in subsequent studies. It is believed as

epilepsy progresses, patients tend to develop symptoms of depression, anxiety, social problems, and attention deficit. Therefore, these patients have difficulty in following medical recommendations, especially precautions regarding precipitating factors for seizures.

Disclosure: No significant relationships.

Keywords: juvenile myoclonic epilepsy; therapeutic adherence; Personality disorders

EPV1000

Psychometric Properties of the Arabic Big Five Inventory-2 Short Form among Undergraduates in Kuwait

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Introduction: The BFI-2-S assesses the domain level of the Big Five with three prototypical facets of each domain capturing approximately 91% of the total variance in the full BFI-2 domain scales and approximately 89% of the predictive power of the BFI-2 facets in German adaptations and their original American versions.

Objectives: The study aims to investigate the psychometric properties of the Arabic adaptation of the BFI-2 short form.

Methods: The Arabic version of the BFI-2-S a 30-item with 15 and NEO Five-Factor Inventory (NEO-PI-R) were administered to 1560 (576 males, 984 females) Kuwait University undergraduates with a mean age = 22.75 ± 3.81. The internal consistency reliability, factor structure, and convergent validity of the BFI-2-S with NEO-PI-R were assessed.

Results: Cronbach's alpha was satisfactory for N (0.79), E (0.73), O (0.73), A (0.76) and C (0.77). Results revealed significant gender differences in O, C & E with a favor for males and in N a favor with females. PCA showed that BFI-2-S five factors explains 64.38% of the total variance. However, the high mean correlations between the BFI-2-S and NEO-PI-R scales, with coefficients of (0.67) for the N, (0.66) for the E, (0.56) for the C, (0.61) for the A, and (0.58) for the C. The convergence between each BFI-2-S domain correlated substantially with the relevant NEO-PI-R domain scales, with the average correlation being .62.

Conclusions: The findings support the psychometric properties of the Arabic adaptations of the BFI-2-S as useful instruments for assessing the Big Five.

Disclosure: No significant relationships.

Keywords: Psychometric Properties ,BFI-2 Short

EPV1001

Attitude of mental health care professionals toward borderline personality disorder sufferers in Egypt

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Introduction: Awareness and knowledge about borderline personality disorder (BPD) is growing during the last decade in Egypt. Yet