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Introduction The severe disability of schizophrenia and its impairment in real-life functioning can improve with a treatment that stimulates personal resources such as peer-support by psychologist according to Cordiale and Montinari psychoanalytic model (2012) in a multidisciplinary team.

Objectives Supportive and narcissistic relationships sharing real life experience, according the cohesion of Self (Kohut 1971), promotes identification processes and improves pharmacological and psychiatrist treatment.

Methods Study participants were recruited for one year, according to diagnostic criteria of DSM V, from schizophrenic patients ($n=12$) of a Mental Health Department and of a private psychiatric department (DH) in an age between 23 and 36 years, tested by SAT-P and GAF scale.

Results All patients were treated with second generation antipsychotic and an integrated treatment with peer-support, (Galderisi et al., 2014).

Conclusions The valiance of real-life functioning in patients with schizophrenia depends on an integrated intervention that assures a function of flexible and not coercive restraint, allowing to stable relationship with territorial agency (network) (Chiesa, 2008).

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Folie à deux

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Introduction The induced delusional disorder or *folie à deux*, is a rare condition characterized by psychotic symptoms at least in two individuals in close association.

Objectives We report a case of shared psychotic disorder between mother and daughter. We briefly review both classical and current literature.

Methods We summarized the results from articles identified via MEDLINE/PubMed using “induced delusional/shared psychotic disorder” as keywords. We report a case of a woman who develops psychotic symptoms characterized by delusions of persecution. Her daughter started, during the first high school grade with referring sexual threats and having delusions of persecution lived by her mother like a fact. They have very symbiotic relationship. Seven years later, the mother has required hospitalization for chronic delusions.

Results The term *folie à deux* was first coined by Lasègue and Falret, they assume the transmission of delusions was possible when an individual dominated the other and existed relative isolation. Recent studies found no significant differences in age and sex, although described higher comorbidity with other psychiatric diseases. Relative to treatment, separation by itself is insufficient; an effective neuroleptic treatment is required.

Conclusions Our case meets criteria for shared psychotic disorder. The daughter, with a ruling attitude who dominates the relationship, was the inducer. The mother showed no resistance in accepting delusions and remains them active after separation. This leads us to consider the possible predisposition to psychotic illness by both patients.

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

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Headache and schizophrenia – A cross-sectional cohort study on prevalence, characteristics and management

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Introduction Headache is the most common pain reported by people with schizophrenia. Little research has been conducted into the characteristics and management of headaches in this population.

Objectives Determine the prevalence, type and management of headache in people with schizophrenia.

Aims Identify if best practice treatment of headache occurs and if changes are required to assure people receive appropriate management.

Methods One hundred consecutive people with schizophrenia and schizoaffective disorder completed an extensive, reliable and valid headache questionnaire. Based on the questionnaire responses two clinicians independently classified each person's headache as either migraine headache (MH), tension type headache (TTH), cervicogenic headache (CGH) or other headache type (OH). Any discrepancies were resolved by consensus agreement.

Results Twelve-month prevalence of headache (57%) was higher than the general population (46%) with no evidence of relationship between psychiatric clinical characteristics and presence of headache. Prevalence of CGH (5%) and MH (18%) were comparable to the general population. TTH (16%) had a lower prevalence. Nineteen percent of participant's headache was classified as OH type. No participant with MH was prescribed migraine specific medication. Only 1 of the 5 people whose headache was classified as CGH received manual therapy and none had been prescribed exercises. No people with TTH received manual therapy, exercise prescription or postural review.

Conclusions It is recommended that education is required for patients and mental health workers about headache classification and the appropriate care pathways for different headache types.

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15 years and counting – How are schizophrenic patients with long hospitalization time?

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Introduction Centro Hospitalar Psiquiátrico de Lisboa (C.H.P.L.), in Lisbon, Portugal, is the biggest psychiatric hospital in Portugal and one of the oldest still working. Along with acute inpatient clinics it has long duration inpatient units with 226 patients.

Objectives/aims Characterize and improve the therapeutic approaches in patients committed to the long duration inpatient unit with long hospitalization times and the diagnose of schizophrenia.

Methods During the month of September 2015 all patients, committed before 2000 who fulfilled the diagnosis criteria ICD 10, F20.X (Schizophrenia) were characterized regarding age, gender, time of hospitalization and were evaluated using the Positive and Negative Symptom Scale (PANSS).