

Additionally, the case of a 35-year-old female with BPD who developed neurosyphilis is presented, demonstrating the complexities in distinguishing between overlapping psychiatric symptoms. The case also emphasizes the importance of comprehensive care.

Results: The psychiatric symptoms of neurosyphilis, such as impulsivity, mood instability, and cognitive dysfunction, significantly overlap with those of BPD, complicating diagnosis and treatment. Literature indicates that neurosyphilis occurs in 0.5% to 2% of untreated syphilis cases. Common psychiatric manifestations of neurosyphilis—such as irritability, cognitive decline, and affective dysregulation—are often misattributed to underlying psychiatric disorders, leading to delays in proper treatment. In the case of the 35-year-old patient, her longstanding BPD symptoms, including emotional instability and impulsivity, worsened with the progression of neurosyphilis. Cognitive testing revealed mild impairment, which was consistent with the cognitive decline seen in neurosyphilis, further complicating the clinical picture.

Conclusions: This case underscores the critical need for timely syphilis screening, particularly for individuals with a history of untreated or inadequately treated infections. Early diagnosis and treatment of neurosyphilis can significantly improve cognitive and psychiatric outcomes while promoting overall wellness. Routine sexually transmitted disease screenings, especially in psychiatric populations, can prevent severe neuropsychiatric complications and support holistic well-being. Given the global resurgence of syphilis, a proactive approach to sexual health is essential in fostering both mental and physical health.

Disclosure of Interest: None Declared

EPP217

Neuropsychiatric Symptoms in Huntington's Disease: A Case Report on Manic and Psychotic Features Huntington's disease (HD)

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Introduction: Huntington's disease (HD) is a hereditary neurodegenerative disorder marked by progressive declines in motor, cognitive, and psychiatric functions. This case report presents a 45-year-old female patient with HD who displayed significant manic symptoms, which later evolved into acute psychosis. Notably, her neuropsychiatric symptoms emerged months before motor deficits. This case aims to raise clinician awareness of the interplay between neuropsychiatric symptoms and HD.

Objectives: Analyze early neuropsychiatric manifestations, particularly manic and psychotic symptoms; highlight the importance of recognizing these symptoms before the onset of motor dysfunction; and explore the neurobiological mechanisms underlying, including neurotransmitter dysregulation and structural brain changes.

Methods: A comprehensive clinical evaluation was conducted for the patient. Her psychiatric history was assessed using standardized tools, including the Young Mania Rating Scale (YMRS) and the Positive and Negative Syndrome Scale (PANSS).

Neuroimaging, including computed tomography (CT), assessed structural brain changes in regions related to mood regulation and psychosis, such as the striatum and prefrontal cortex. A literature review correlated these findings with existing research on neurobiological mechanisms in HD, focusing on neurotransmitter systems and brain morphology.

Results: Initially, the patient exhibited manic symptoms such as elevated mood and irritability, with moderate severity noted on the YMRS. Within a month, her condition escalated to acute psychosis, featuring auditory hallucinations and paranoid delusions, as reflected by moderate PANSS scores. Neuroimaging revealed structural changes consistent with HD, including striatal atrophy and prefrontal cortex alterations. These findings supported the hypothesis of neurotransmitter dysregulation, particularly involving dopamine and serotonin.

The management plan included mood stabilizers and antipsychotics, such as valproic acid and risperidone, along with temporary benzodiazepines to manage agitation. This approach led to a significant reduction in both manic and psychotic symptoms, improving the patient's overall quality of life through integrated psychiatric care.

Conclusions: This case underscores the importance of recognizing early neuropsychiatric symptoms, particularly manic and psychotic features, in HD patients. The emergence of these symptoms prior to motor dysfunction calls for heightened clinician awareness, as early identification can facilitate timely interventions and enhance patient outcomes. The observed structural brain changes and neurotransmitter dysregulation suggest underlying neurobiological mechanisms, warranting further research in the broader HD population. A multidisciplinary approach is essential for effectively managing the interplay of neuropsychiatric symptoms.

Disclosure of Interest: None Declared

EPP218

Test-Retest Reliability and Informant Consensus Pilot Study of the BRIEF-A in the Non-Clinical Spanish Population

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Introduction: Executive functions (EEFF) are different cognitive aspects that allow us to find solutions and adapt to changes. There are several traditional instruments that assess these processes, but they are difficult to generalize to the subject's real environment.

Objectives: To analyze the test-retest reliability of the adaptation of the BRIEF-A to the Spanish population with a non-clinical sample, as well as studying the informant consensus between the Self-report and Informant report forms that this instrument presents.

Methods: The questionnaire has been administered to 58 subjects from the general population (Self-report version) and 58 informants who adequately knew each subject (Informant report version) at baseline and at 4 weeks follow-up in order to study the test-retest reliability. Statistical analysis was carried out using the Pearson Correlation Coefficient to study the test-retest reliability. Self-reports

and Informant reports mean scores were also compared using the Student's T-Test for paired samples.

Results: The calculated correlations were significant for all the scales and indices in both the Self-report and the Informant report versions, and relatively strong in all the cases with values ranging from 0.62 to 0.89 except for the Task Monitor scale in the Self-report form, which presented a moderate correlation ($r = 0.31$). When it comes to the T-Test, mean differences between the two samples were also statistically significant in all the cases.

Conclusions: Test-retest reliability of the BRIEF-A is adequate in the non-clinical Spanish population, and the scores obtained in the first occasion remain relatively stable in the second. Furthermore, the informant consensus is observed to be low, therefore showing the utility of gathering data from different informants, since that can provide a better approach of subjects EEFF. Further research with clinical population would be necessary to validate this tool and perform a complete assessment.

Disclosure of Interest: None Declared

EPP219

Perceived hope affects mental health among Portuguese Adults in year three of the COVID-19 Era: The mediation role of well-being

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Introduction: In recent years, more and more researchers have found positive psychological changes after experiencing stressful events. When people are exposed to stressful events, a sense of hope and psychological well-being, as significant positive psychological traits, can lessen the negative effects of psychological imbalance and help them cope with their worries in life in a more positive way, effectively promoting and protecting their mental health.

Objectives: This study aims to examine the mediating role of well-being in the relationship between people's perception of hope and mental health.

Methods: The present research was performed using a convenience (or snowball) sampling method obtained in the context of the Hope Barometer research program in 2023. Inclusion criteria were being an adult (aged ≥ 18 years); providing e-consent; having internet access; and understanding the Portuguese language. An online survey including information sheet, demographic questions, and three instruments, namely: Dispositional Hope was measured through the Perceived Hope Scale [PHS]; Mental health status was evaluated by General Anxiety Disorder-7 items; and, well-being measured by the Mental Health Continuum Short Form (MHC-SF). We employed the PROCESS macro for SPSS (model 4: mediation analysis) to evaluate our model.

Results: The most frequently reported demographic categories were female ($n=402$), married ($n = 206$), have children ($n = 344$), graduated ($n = 442$), and with religious/spiritual affiliation ($n = 400$). The mean age was 47.72 ± 11.86 years old. Dispositional hope were significantly and positively correlated with mental health. We conducted a mediation analysis to examine whether mediates the relationship between dispositional hope and mental health. The indirect effects for hedonic well-being ($\beta = 0.28$; 95% CI

[0.02, 0.36]), psychological well-being ($\beta = 0.14$; 95% CI [0.06, 0.19]), and social well-being ($\beta = 0.06$; 95% CI [0.008, 0.073]) were all significant, indicating a mediating effect.

Conclusions: Given the COVID-19 pandemic and its consequences have caused a variety of psychological distress such as fears, worries, and anxiety among people worldwide, this study underlies the mechanism between positive psychological resources such as perceived hope and well-being of individuals during the times of crisis of COVID-19 affects their mental health.

Disclosure of Interest: None Declared

EPP220

The weight of office? A systematic scoping review of mental health issues and risk factors in elected politicians across democratic societies

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Introduction: The mental health status and capacity to govern of democratically-elected politicians have become significant topics of interest, which have attracted speculation in the media and beyond. In fulfilling demanding and high-stress positions, politicians could encounter distinctive risk factors that may harm their mental well-being, yet existing research literature about this topic remains underexplored.

Objectives: This scoping review aimed to systematically examine the breadth of available evidence on mental health issues and risk factors affecting democratically-elected politicians and to identify future research needs.

Methods: Using pre-defined eligibility criteria based on JBI guidelines, a systematic keyword search was conducted in May 2024 of MEDLINE, Scopus, and APA PsycNet, supplemented by snowballing techniques. Only studies reporting primary, empirical evidence on mental ill-health or risk factors with adverse psychological correlates from serving politicians in "Full" or "Flawed" democracies (per the Democracy Index) were included from 1999-2024. Titles and abstracts were screened and the full-text of potentially eligible literature was assessed before data extraction and synthesis.

Results: Eighteen sources met the eligibility criteria, cumulatively encompassing ~3,500 politicians across seven democracies, namely: Australia, Canada, the Netherlands, Norway, New Zealand, the United Kingdom, and the United States. Four sources (22.2%) explored general psychopathology trends, revealing varying but sizeable rates of mental ill-health and high-risk alcohol consumption. The other fourteen studies (77.8%) provided evidence on risk factors; twelve underlined the psychological toll of violence and two investigations highlighted the injurious effects of specific occupational conditions. Notably, exposure to violence often precipitated detrimental mental health outcomes, with certain data indicating a disproportionate impact on female officeholders.

Conclusions: Existing research literature suggests that democratically-elected politicians face considerable mental health challenges,