

larger samples and longer follow-up periods are needed to robustly inform evidence-based treatment for PNES.

Disclosure: No significant relationships.

Keywords: Psychogenic Nonepileptic Seizures; Conversion Disorders

EPV0040

Interpersonal Psychotherapy (IPT) for Posttraumatic stress disorder

J. De Jong

Parnassia Groep, Psyq Psychotrauma, Den Haag, Netherlands
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Introduction: Therapies focused on exposure like prolonged exposure (PE) or Eye Movement Desensitization and Reprocessing (EMDR) dominate the treatment of posttraumatic stress disorder (PTSD). There are many patients with PTSD who are not fully responding with exposure-therapies, or don't want exposure therapies at all. Many patients don't like to be confronted with elements of their traumatic experience. IPT has proven to be highly efficient in e.g. depression and bulimia and is promising as a treatment for PTSD while NOT using exposure. IPT aims to repair the damage trauma does to interpersonal trust and social functioning.

Objectives: Learn more about IPT. Learn more about the way IPT is used in the treatment for patients with PTSD (adaptations).

Methods: Literature review focused on IPT for PTSD.

Results: Among the consequences of PTSD are affective numbing, interpersonal hypervigilance, and social withdrawal (1). Numbness, an avoidance particularly of negative affect, makes it hard to read one's interpersonal environment. Thus in adapting IPT for PTSD, we devote the early part of treatment to affective reattunement: helping patients to identify their emotions and to recognize them as helpful social signals. Once patients can read their feelings, they can put them to use to handle relationships better, deciding whom they can trust and whom they can't. IPT for PTSD tends to focus on role transitions, which are usually inherent having been traumatized (2).

Conclusions: In the past there has been several kinds of research that show that group IPT and individual IPT reduce PTSD and depression in traumatized patients with PTSD.

Disclosure: No significant relationships.

Keywords: Interpersonal Psychotherapy; PTSD

EPV0041

BAD NEWS FOR HYPOCHONDRIACS: Covid-19 Associated Aggravation of Somatic Symptom Disorder with Psychotic Depression

S. Jesus*, A. Costa, G. Simões and P. Garrido

Baixo Vouga Hospital Centre - EPE, Psychiatry And Mental Health Department, Aveiro, Portugal

*Corresponding author.

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Introduction: The Covid-19 pandemic has brought with it far-reaching consequences that affect the mental health of a significant population. Those suffering from somatic symptom disorder (SSD) present a significant focus on physical symptoms, with excessive

thoughts and behaviours, to an extent that results in major distress and dysfunction. Aggravation of SSD could be associated with various stressors, including the current pandemic, and culminate in an increased severity of the base presentation.

Objectives: The authors present the case of an elderly man with previous diagnosis of SSD which began to aggravate and evolve into a depressive psychotic state, precipitated by the beginning of the Covid-19 pandemic.

Methods: The authors conducted a non-systematized literature review with focus on those articles most pertinent to the topic in question as well as presenting a clinical case as compliment.

Results: With the pandemic overwhelming the globe, the literature has demonstrated a significant correlation with aggravation of mental health and psychiatric cases. The patient in question was previously followed in consultation for SSD. With the pandemic acting as precipitating stressor, the patient demonstrated a significant aggravation in his base presentation with the development of psychotic depression. He was subsequently hospitalized with implementation of psychotherapeutic and psychopharmacological methods, with remission of the psychotic state, with poor response of the SSD.

Conclusions: External stressors are an important influence on psychiatric disorders. Whenever potential life stressors, especially those that exert influence on a global scale, the psychiatrist should be attentive to the possibility of significant aggravation of a stabilized clinical picture and offer support.

Disclosure: No significant relationships.

Keywords: Psychotic depression; covid 19; somatoform

EPV0042

Psychological characteristics of men with arterial hypertension according to the MMPI test

N. Chernus^{1*}, A. Sivkov², R. Gorenkov¹, S. Sivkov¹, A. Serdakova¹, A. Zolotovickaja¹ and T. Savina¹

¹the I.M. Sechenov First Moscow State Medical University: Moscow, Russia, The Outpatient Care Department, Moscow, Russian Federation and ²the I.M. Sechenov First Moscow State Medical University: Moscow, Russia, The Outpatient Care Department, Москва, Russian Federation

*Corresponding author.

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Introduction: The term hypertension means super-stress - psychoemotional. It is generally accepted that this condition is more inherent in men.

Objectives: Study psychological features of arterial hypertension patients depending on severity.

Methods: Examined 102 men, ages 31 to 62; the average age was 46.4 ± 0.32 years. Of these, with stage I AG 46 patients (1 group), with stage I AG 45 (2 group), with stage III AG 11 (3 group). Psychological status of patients was examined using the MMPI test.

Results: The averaged personality profile of patients showed that a profile exceeding 80 T points is typical for all comparison groups: 82,6%, 73,3%, 81,8%, in groups 1, 2 and 3, respectively. The first profile type in frequency was the profile with a leading peak on the first scale in combination with a moderate rise on the right scales: seventh-eighth: 63.7% of the total number of surveyed. This profile reflected mainly depressive tendencies. The second most frequent profile reflected alarming trends: an increase on the 2nd scale with the main peak at 7. Persons with depressive manifestations were characterized by a focus on compliance with the normative criteria of the social

environment, with anxious manifestations, personal characteristics were manifested by hostility, irritability, chronic social maladaptation

Conclusions: Thus, the psychoemotional conditions identified are characterized by frustration, high levels of anxiety, interpersonal disorders, reduced performance, which may be considered mental health disorders

Disclosure: No significant relationships.

Keywords: hypertensive men; anxiety; frustration

EPV0043

Features of the Psychoemotional status of Patients with Type 2 Diabetes Mellitus

N. Chernus*, L. Kamynina, R. Gorenkov, A. Sivkov, T. Savina, A. Serdakova, S. Sivkov and A. Zolotovickaja

The I.M. Sechenov First Moscow State Medical University: Moscow, Russia, The Outpatient Care Department, Moscow, Russian Federation

*Corresponding author.

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Introduction: The study of the personal characteristics of patients with SD2 continues to be an urgent problem.

Objectives: Study the features of the psychoemotional status of patients with type 2 diabetes mellitus

Methods: The study included 62 patients with T2DM (HbA1c $7.3 \pm 1.3\%$) and visceral obesity (Grade 2) were included mean age 56.1 ± 2.4 ; BMI: 34.8 ± 2.3 . Research methods: the Beck test, the Hamilton scale, the Spielberger-Hanin questionnaire

Results: Clinical signs of anxiety-depressive disorders were detected in (47) 75.8% of patients. - 1 group, 15 patients - 2 comparison group (without affective disorders). Beck's test: 23.5 ± 0.5 against 10.6 ± 0.3 and Hamilton's shock 22.4 ± 0.4 against 7.9 ± 0.2 revealed a reliable difference between groups ($p < 0,001$). In both groups of patients on the Spielberger-Hanin scale, moderate reactive anxiety was identified: 44.9 ± 0.7 versus 36.7 ± 0.5 point, which is significantly higher ($p < 0,001$) in patients of the 1 group. The level of personal anxiety 56.0 ± 0.5 versus 37.5 ± 0.4 points, which also revealed a reliable difference between groups ($p < 0,001$).

Conclusions: The findings suggest a high incidence of anxiety-depressive disorders in patients of patients with T2DM and visceral obesity, which should be considered in pathogenetic therapy for these patients.

Disclosure: No significant relationships.

Keywords: anxiety-depressive; 2 Diabetes Mellitus

EPV0044

Conversion disorder in an 18-year-old boy: a case report

C. Vilella Martín*, P. García Vázquez, P. Fernández Perea, Y. Barrera García, A. Serrano García, J. De Santiago Sastre, R. Gómez Martínez and C. Franch Pato

Complejo Asistencial Universitario de León, Psychiatry, LEÓN, Spain

*Corresponding author.

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Introduction: Conversion is the transformation of a conflict (unconscious) into a somatic symptom or a "non-verbal way of expressing psychological discomfort", through somatizations. The disorder suggests a neurological or medical disease, associated psychological factors appear and is not produced intentionally.

Objectives: To describe a case of conversion disorder.

Methods: Retrospective review of clinical records and complementary test, including psychiatry, electrophysiology and neurology.

Results: An 18-year-old boy came to the emergency room for paralysis. He has anesthesia of lower limbs. He shows indifference towards this symptoms. He denies any stressful situation. On examination, no psychotic or affective symptoms were observed. Belle indifference. Blood tests and a cranial CT scan were performed without alterations, so the patient was admitted for study. The electromyogram, lumbar puncture and cranial magnetic resonance show negative results. Suggestion is carried out, proving effective and recovering gait and sensitivity. These episodes are repeated up to 4 times until finally, during an interview with the family, episodes of bullying come to light. We work in therapy with a diagnosis of conversion disorder.

Conclusions: The most frequent symptoms in conversion disorder are mutism, paralysis, anesthesia, blindness and seizures. It is usually monosymptomatic for each patient. Diferencial diagnosis with neurological pathology should be made.

Disclosure: No significant relationships.

Keywords: conversive disorder

EPV0045

Body Image disturbance in patients with cancer

A. Guerhazi*, S. Hentati, F. Guerhazi, R. Masmoudi, I. Baati, I. Feki and J. Masmoudi

Hedi Chaker University Hospital, Sfax, Tunisia, Department Of Psychiatry A, Sfax, Tunisia

*Corresponding author.

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Introduction: Cancer and its treatments have been shown to have a negative psychological effect on many cancer patients. One of these effects is often described as body image disturbance.

Objectives: To assess body image in cancer patients and its association with clinical variables.

Methods: This was a cross-sectional study, conducted over 1 month, involving 100 cancer patients followed in the oncology department at the Habib Bourguiba University Hospital in Sfax (Tunisia). All participants completed a 10-item Body Image Scale (BIS) questionnaire to assess body image dissatisfaction.

Results: These results showed that half of the patients were female, and 70% of them were married. Their mean age was 51.96 years with extremes ranging from 41 to 60 years. Their level of education did not exceed primary school in 61% of cases, and 68% of them were unemployed. A total of 58% of patients received chemotherapy and 44%, 25%, and 11% of persons were affected by breast, digestive and cavum cancer, respectively. Impaired body image was noted in 81% of cases with an average BIS score of 15.39. An altered body image was statistically correlated with female sex ($p = 0.005$), absence of professional activity ($p = 0.032$), and the presence of anxiety-depressive symptoms ($p = 0.008$).

Conclusions: In this study most of the cancer patients had body image disturbances. Therefore, it is to the health team and nurses that take the concept of body image more serious and make use of some interventions to minimize the possible side effects.

Disclosure: No significant relationships.

Keywords: chemotherapy; cancer; body image; Body Image Scale (BIS).