Results: The average age of our population was 44.37±15.45 years with a sex ratio (M/F) =0.66. Most of them lived in urban areas (60%) and half of them did not go beyond the primary school level. Most did not have a constant job (76.6%). The average number of previous thymic episodes was 2±1.33 times/year. A quarter of the patients (26.6%) had hypomanic symptoms in the intercritical phase and 20% had depressive symptoms. Hypomanic symptoms were correlated with tobacco use (p=0.035). Depressive symptoms weremore frequent in men (p=0.074). Functioninglevel was lower in subjects living in rural areas (p=0.065).
Conclusions: Our study suggests that residual symptoms were frequent with a significant functional impact. As a result, their identification and management are highly essential to improve the overall functioning of patients with bipolar disorder.

Keywords: bipolar disorder; disease residual minimal; depressive symptoms; manía

EPP0075

Five traits of personality in benzodiazepine-dependent patients with bipolar disorder

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Introduction: Benzodiazepines (BZD) are frequently prescribed to patients with bipolar disorder. The use of this medication can become problematic in some cases or even lead to dependence mainly in patients with personality disorders.
Objectives: To assess different personality traits in BZD-dependent patients with bipolar disorder
Methods: A cross-sectional descriptive and analytical study was conducted on euthymic bipolar patients (DSM-5) attending the psychiatric outpatient in Hedi Chaker university hospital of Sfax. We used the Benzodiazepine Cognitive Attachment Scale (ECAB) to determine dependent patients and the Ten Item Personality Measure (TIPI) scale to assess the five personality traits.
Results: Among the 61 included patients, 34 were BZD-dependents (55.7%). Their mean age was 52.12 ± 12.87 years. The sex ratio (M/F) was 0.54. A comorbid personality disorder was found in 18% of patients and the most frequent was histrionic personality (45.45%). According to TIPI, the highest scores of personality traits were conscientiousness, agreeableness and extraversion, with mean scores of 9.8 ± 2.78, 8.21 ± 3.15 and 7.98 ± 1.77 respectively. Having a comorbid personality disorder was not associated with BZD dependence. Regarding the dimensional approach using TIPI, the dimensions of extraversion, agreeableness and emotional stability were significantly negatively correlated with BZD-dependence (p 0.024; 0.006 and 0.01 respectively).
Conclusions: This study demonstrates that personality characterized by less extraversion, agreeableness, and emotional stability may increase the risk of BZD-dependence among bipolar patients. Such psychological factors should be taken into account in the risk-benefit assessment made in the planning of BZD treatment.

Keywords: traits of personality; benzodiazepine; dependence; bipolar disorder

EPP0076

Antidepressant-withdrawal mania - a case report

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Introduction: An uncommon adverse event of antidepressant discontinuation is the paradoxical withdrawal hypomania or mania. It is rarely described in the literature and its true incidence is unknown, may it be a consequence of underrecognition or misattribution.
Objectives: Alert clinicians of the uncommon Antidepressant-Withdrawal Mania
Methods: Report and discuss, based on online pubmed database, a case of Antidepressant-Withdrawal Mania with Citalopram
Results: A 34 year old woman, with a previous unipolar depressive episode, presents to the emergency department in june/2020 with anxiety, recurrent thoughts of death without a plan, low energy, anhedonia, loss of appetite, sadness and insomnia developing over a period of 7 months. She was prescribed Quetiapine 50 mg XR, Lamotrigine 100 mg, and sent to a psychiatry consultation. After a month and a half there was no important clinical improvement and Citalopram 20 mg was started. The patient reported slow improvement and by august she had a complete symptomatic response. In the beginning of september the patient stopped citalopram abruptly. Three weeks later, she was presented with an irritable mood, increased energy with decreased need for sleep, sweet cravings, easy irritability, racing thoughts, pressure to keep talking and suicidal thoughts. After 2 weeks of Quetiapine 300 mg XR id, Lamotrigine 100 mg id and Olanzapine 5 mg there was a partial symptomatic response.
Conclusions: Antidepressant withdrawal manic states are an under-recognized phenomena, with ill defined patho-physiological pathways and nosology. It is important to continue close follow up of the patient and to investigate whether it can be included on the bipolar spectrum.

Keywords: Antidepressant-Withdrawal Mania; adverse event of antidepressant discontinuation; bipolar spectrum; hypomania mania

EPP0077

Point of view and expectation of parents with children diagnosed with autism spectrum disorder enrolled in regular and special schools.

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Introduction: Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder that can cause social and professional harm in an individual.
Many teachers are unprepared to receive students with ASD. They find it difficult to communicate with other professionals or to comfort the family. And parents often do not feel that their children at school benefit socially and in their academic skills.
Objectives: To know the point of view and expectations of parents with children with Autism Spectrum Disorder about the academic future and professional life.