preservation of the affects pointed to a delusional disorder, the presence of auditory hallucinations and gradual loss of functionality are characteristic of schizophrenia. Some authors rejected the classic definition of Paraphrenia, but accepted that schizophrenia in the elderly could assume a paraphrenic form. In this case, the clinical picture and evolution are close to the classical description of the disorder.

Disclosure: No significant relationships.
Keywords: Paraphrenia; psychosis; elderly schizophrenia

EPV0605

Folie a deux. On the subject of a case identified during confinement

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Introduction: Shared psychotic disorder or Folie a deux is an unusual mental disorder characterized by the transfer of delusions between two or more people who have a close relationship. An individual (inductor or primary) who suffers from a psychotic disorder, influences one or more individuals (induced or secondary). Delusional disorders or schizophrenia are the most commonly diagnosed disorders in the inductor individual.
Objectives: The objective of this study is to describe the clinical characteristics of an unusual entity such as shared psychotic disorder.
Methods: Description of a clinical case of shared psychotic disorder of a family treated in the emergency room during confinement.
Results: 47-year-old woman, goes to the emergency room with her husband. No psychiatric history. Both the patient and her husband verbalize delusions of harm and surveillance from neighbors. They also report that two of their children hold this belief. The mother, unlike the rest of the cohabitants, presents disqualifying auditory hallucinations. Her husband decides to take her to the emergency room because he finds her distressed, "between two realities" and aggressive when she is confronted about hallucinations. We start treatment with oral paliperidone in the mother and a subsequent follow- up, and a total remission of symptoms in all cohabitants.
Conclusions: As in other mental disorders, the correct diagnosis and subsequent referral are essential. The separation of the inductor individual from the induced one is useful for the correct management of this disorder. With timely intervention and a regular follow-up, the Folie a deux has a good prognosis.

Disclosure: No significant relationships.
Keywords: confinement; Folie a deux; Shared psychotic disorder

EPV0606

Pisa syndrome – a case report

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Introduction: Pisa Syndrome or pleurothotonus is a form of dystonia and often can arise as a side effect of antipsychotic treatment conditioning high morbidity and limiting management options. Despite the fact that the precise mechanism remains unclear, a neurochemical imbalance in dopaminergic and cholinergic transmission but also in serotoninergic and noradrenergic transmission can be a possible pathophysiologic mechanism, which can lead to changes in the axial axis with abnormal posture and marked lateral trunk flexion and abnormal gait.
Objectives: Regarding a clinical case, the authors intend to review the relevant and current literature on the relationship between psychotropic drugs and Pisa Syndrome.
Methods: Description of a clinical case by consulting databases of current and scientifically relevant articles.
Results: The clinical case reports a 48-year-old woman with a history of HIV and Substance Use Disorder, hospitalized for unspecific behavioral changes, characterized by mood changes, self-referential, persecutory and somatic delusional ideas, and delusions of the control of thought. She was medicated with antipsychotics and mood stabilizers, with subsequent development of an acute-onset dystonic condition, characterizing the Pisa Syndrome. In this context, the dose of antipsychotics was lowered and anticholinergics were introduced, with progressive improvement of the clinical picture.
Conclusions: Pisa Syndrome, previously seen as a rare adverse effect, can occur as a dystonic reaction related to the use of psychotropic drugs, so its use should be judicious. Further studies are needed to understand the extent of this association and its pathophysiological mechanisms in order to guide more rigorous therapeutic lines.

Disclosure: No significant relationships.
Keywords: Pisa Syndrome; Antipsychotics; dystonia; abnormal posture

EPV0607

Cotard syndrome in a patient with multiple sclerosis: A case report

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Introduction: "Cotard syndrome" is a rare condition characterized by a constellation of clinical features, including hypochondriac and nihilistic delusions, the most characteristic of which are the ideas that one is dead or that their organs do not exist. It is more commonly associated with psychotic depression and schizophrenia but can also be found in several neurological disorders. In the clinical practice it generally appears as an "incomplete Cotard", reduced to hypochondriac delusions attributed to the malfunction or occlusion of the organs, usually the digestive tract and abdominal viscera. Consequently it is common for these patients to reject food

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