behavioral variant, but doesn´t show frontotemporal atrophy in neuroimaging and doesn´t progress to frank dementia over the years.
Objectives: Presenting a review of phenocopy syndrome of frontotemporal dementia.
Methods: Search on Pubmed® and Medscape® databases with the following keywords: "frontotemporal dementia and phenocopy" or "FTD phenocopy". We focused on data from systematic reviews and meta-analyzes published in the last five years. The articles were selected by the authors according to their relevance.
Results: Mutations in GRN and MAPT gens and genetic expansion of C9orf72 have been identified. The discovery of the C9orf72 expansion in psychiatric disorders (psychosis, bipolar disorder or depressive disorder), for some authors, represents that phFTD is a psychiatric pathology. In fact, there's a higher frequency of psychiatric and psychological symptoms in phFTD compared to the variants of FTD. Usually are male patients who don´t have significant cognitive deficits, with preservation of executive functions and episodic memory. Until now, there are no definitive biomarkers of the disease. The prognosis is more benigne, unlike FTD, which has an average survival of 3 years since diagnosis.
Conclusions: phFTD is a clinical and scientific challenge. The neurobiological bases remain unknown, requiring further studies in this field. The identification of markers that can differentiate patients with typical FTD and phFTD can facilitate prognosis orientation and pharmacological an non-pharmacological treatment.

Keywords: frontotemporal dementia; Phenocopy syndrome; FTD phenocopy

EPP0836

Sexual well-being in old age

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Introduction: Older adults who engage in sexual activities may benefit from increasing psychological and physical well-being, which may contribute to reduce a number of physical and mental health problems.
Objectives: To analyze sexual well-being (SWB) in older adults' perspective and to examine the potential explanatory mechanisms of a SWB overall model, in an older cross-national sample.
Methods: Measures were completed, using a variety of appropriate methods, including demographics and interviews. Complete data were available for 326 older adults aged between 65-102 years. Data were subjected to content analysis. Representation of the associations and latent constructs were analyzed by a Multiple Correspondence Analysis (MCA).
Results: The most prevalent response of the interviewed participants for SWB was "touching and caring" (18.0%). A three-dimension model formed by "care and well-being", "attractiveness, intimacy and touching", and "sexual intercourse and pleasure" was presented as a best-fit solution for English older adults. SWB for Portuguese older adults were explained by a three-factor model: "health and desire", "care, eroticism and affection" and "penetration sex".
Conclusions: The outcomes presented in this paper emphasized the need to explore the diversity of indicators of SWB among older adults and the cultural differences of a SWB model for older adults.

Keywords: multiple correspondence analysis; sexual well-being; Portuguese older adults; English older adults

EPP0838

Delirium at the elderly patients with alcohol withdrawal syndrome

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Introduction: The psychoses in patients with dependence of alcohol are in many cases polyethiologic, this is especially common in the elderly due to accumulation of various somato-neurological pathologies.
Objectives: 88 men, with alcohol withdrawal syndrome accompanied by delirium; the average age - 70,4 ± 3,9 years, duration of alcohol abuse - 27,4 ± 6,5 years.
Methods: clinical, psychopathological and statistical
Results: The psychoses in patients with dependence of alcohol are in many cases polyethiologic, this is especially common in elderly due to accumulation of various somato-neurological pathologies. One of such factors is alcohol dependence syndrome and alcohol withdrawal. ICD-10 allows sharing out delirium with mixed etiology F05.8; this category can include patients when there is a severe alcohol withdrawal condition and somato-neurological pathology that can be an independent factor in the delirious syndrome. 88 elderly patients with were examined in state of alcohol withdrawal. All patients had delirious syndrome. Patients were divided into 2 groups: 1st – patients with a condition of alcohol withdrawal with delirium; 2nd - patients with a delirium of mixed etiology (the factor of the presence of dyscirculatory encephalopathy, was considered a competing factor in the onset of delirium). Some differential-diagnostic signs of the studied disorders were established. In the case of prolongation of psychosis, the clinical picture was similar in both groups, which was explained by exacerbation of the existing somatic pathology.
Conclusions: Estimation of the leading factor in the emergency of acute psychosis in patients with alcohol withdrawal syndrome is of great practical importance for selection of therapeutic tactics.

Keywords: alcohol withdrawal syndrome; delirium; elderly patients

EPP0839

Psychosis as a symptom of Vitamin B12 deficiency. Report of one case.

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Introduction: Vitamin B12 deficiency may cause neurological and psychiatric symptoms, especially among elderly patients. Two

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