Introduction: Studies on psychiatric patients have shown that the presence of autistic traits affects the effectiveness of the treatment, decreasing the likelihood of positive clinical outcomes.
Objectives: The aim of the present study is to investigate which are the areas of overlap between psychiatric symptoms and the traits of the autism spectrum using a bayesian approach.
Methods: A sample of 190 adult psychiatric patients, diagnosed with schizophrenia, bipolar disorder, major depression, and personality disorder participated in the study. The RAADS-R questionnaire was used to assess the presence of autistic traits. The severity of psychiatric symptoms was measured with the BPRS and PANSS scales, the perceived well-being and disability using the Whodas and Whoqol scales, the TOL and STROOP for the measurement of executive functions, the attentional matrices for visual-spatial attention, the Raven for general cognitive skills.
Results: No difference emerged between the diagnoses regarding the presence of symptoms of the autism spectrum, which affects 64% of subjects. Logistic regression showed that the severity of symptoms measured as BPRS and PANSS predicted the probability of having autistic traits. Bayesian regression showed that specific autistic traits are indicative of executive functions deficits. Namely, motor impairment severity measured at RAADS is strongly predicted by rule violation with number of correct moves measured at TOL. The other executive functions seemed to be only moderately linked to autistic traits.
Conclusions: These results provide new information about the expression of comorbidity with autism in psychiatric patients.

Keywords: executive function; Bayesian model; autistic traits; Psychiatric symptoms

EPP0220

Parkinson's disease and depression

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Introduction: Parkinson's disease has long been considered as a neurodegenerative disorder of pure motor expression. Motor dysfunction in Parkinson's disease and other parkinsonian disorders is frequently accompanied by nonmotor signs and symptoms, including cognitive impairment, apathy, anxiety, and depression. Among psychiatric disorders comorbid with Parkinson's disease, depression is probably the most important in terms of frequency and impact.
Objectives: The aim of this presentation was to illustrate the importance of considering depressive symptoms in patients with Parkinson's disease.
Methods: A case report describing a patient with depressive symptoms in a patient with Parkinson's disease and literature review.
Results: We report a case of a 57-year-old woman who presented symptoms of Parkinson's disease for two years. She was treated with Benserazide (Madopar). She was referred to our department for depressive symptomatology. The patient suffered from fatigue, insomnia, loss of sexual desire, sadness, anhedonia, and social withdrawal during the last three months. The diagnosis of depression was not immediately retained. Finally, a major depressive episode was diagnosed. Fluoxetine (20mg per day) was prescribed with clinical improvement.
Conclusions: The diagnosis of a depressive episode is most often complex, due to an overlap symptomatic of both disorders. The depression comorbid to Parkinson's disease because of its frequency and impact, requires specific identification and management early.

Keywords: parkinson's disease; Depression

EPP0221

Psychiatric disorders and somatic comorbidities.

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Introduction: People followed at the department of psychiatry have a high prevalence of somatic pathologies that are generally not taken optimal care of in time, which implies excess mortality rate among these patients.
Objectives: To study somatic comorbidities in patients followed at the department of psychiatry of the regional hospital of Gabes (Tunisia).
Methods: We conducted a retrospective, descriptive and analytical study carried out on a clinical population who consult for the first time at the psychiatry department at the Gabes regional hospital during the period from January 1st, 2010 to December 31, 2013. Sociodemographic, clinical and therapeutic data of the patients were assessed. Data were analysed using the software SPSS (20th edition).
Results: The number of patients consulting for the first time at the psychiatry department during the study's period was 1601 patients, with a mean age of 34 years and a sex ratio (M / F) of 0.96. Among these patients, 399 (24.9%) had somatic comorbidity. The most common somatic comorbidity was arterial hypertension (8.1% of patients, n=129 patients). Diabetes mellitus was ranked second with 99 patients (6.2%). The analytical study showed that depressive disorders were significantly more frequent in patients with hypertension ($p<0.001$), diabetes mellitus ($p<0.001$) and asthma ($p=0.026$).
Conclusions: Somatic comorbidities were frequent in patients followed by the department of psychiatry. Paying attention to somatic comorbidities must be part of the evaluation of these patients in order to coordinate effectively with the somatic doctors.

Keywords: Psychiatric disorders; Somatic comorbidities

EPP0223

The role of social acuity assessment in differentiating primary psychoses from drug-induced psychoses

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