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Introduction: People with borderline personality disorder are at higher risk of repeating suicidal behavior. At the same time, numerous publications have demonstrated the relationship between cocaine dependence and suicide attempts of repetition.
Objectives: Review the relationship between cocaine addiction, borderline personality disorder and repeated suicide attempts. Present through a clinical case the effectiveness of a comprehensive and multidisciplinary therapeutic plan with different mental health devices.
Methods: To review the psychopathological evolution of a patient with a diagnosis of borderline personality disorder; dependence to the cocaine; Harmful alcohol consumption and suicidal behavior from the beginning of follow-up in mental health services to the present. Review the existing scientific evidence on the relationship between cocaine addiction and repeated suicide attempts. Analyze the eficacy of the different treatments available.
Results: This is a longitudinal and retrospective study of the psychiatric history and evolution of a clinical case since the implementation of an individualized therapeutic program and the favorable results obtained. Intensive outpatient follow-up was carried out for high suicide risk and hospitalization in a psychiatric hospitalization unit, day care centre and therapeutic community.
Conclusions: At present, the patient remains in abstinence with remission of suicidal ideation. The literature has shown the usefulness of intensive mental health follow-up programs to achieve remission of suicidal ideation and maintain abstinence from illegal substances.

Disclosure: No significant relationships.
Keywords: Borderline personality disorder; dependence to the cocaine; suicide attempts of repetition; individualized terapeutic program

EPV0114

Psoriasis and psychiatric disorders

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Introduction: Psoriasis is a common psychophysiological chronic skin disease with an important impact on patient's quality of life. The prevalence of psychiatric conditions in psoriasis may range from 24% to 90%. The mechanisms that may explain this relationship still remain debatable.
Objectives: The purpose of this work was to report two cases of psychiatric comorbidities associated with psoriasis and to discuss the possible etiopathogenic mechanisms behind this connection.
Methods: To report two cases of psychiatric comorbidities associated with psoriasis.
Results: Case1 Mr. A.K. is a 30-year-old male patient. He was admitted to our department in February 2020 for acute mania with psychotics features.the patient reported that since 2010, he was treated for psoriasis with local treatment (cortisone cream). The lesions did not grow or expand. Case2 Mr.A.B.is a 27-year-old male patient, with past history of psoriasis under local treatment. He is treated since 2019 in our department for schizophrenia.
Conclusions: High levels of pro-inflammatory cytokines observed in psoriasis may in part explain the associated psychiatric disorders. The psychodermatologic approach would be beneficial for the adequate management of patients suffering from psoriasis.

Disclosure: No significant relationships.
Keywords: psoriasis; Psychiatric comorbidities

EPV0115

Cytokines status in multiple sclerosis patients with comorbid recurrent depressive disorder

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Introduction: The presence of some common immunological pathogenesis mechanisms in multiple sclerosis and depression suggests the possibility of comorbid depressive disorder formation in multiple sclerosis patients, which significantly worsens their quality of life and patient's compliance. In this regard, the depressive pathology diagnosis in people suffering from multiple sclerosis acquires important scientific and practical value.
Objectives: The aim of the study was the cytokine status peculiarities identification in multiple sclerosis patients with comorbid recurrent depressive disorder (F33).
Methods: The cytokines content in patient's blood mononuclear cells culture supernatants was carried out by ELISA. The recurrent depressive disorder diagnosis was established based on ICD-10 criteria. The depressive disorders symptoms severity was determined according to the M. Hamilton and A.T. Beck depression scales, as well as during the clinical interview
Results: A higher production of IL-6 was noted in multiple sclerosis patients with mild recurrent depressive disorder (F33.00), in contrast to patients without the affective symptoms. The IL-1β, TNF-α, IL-6 contents in the blood mononuclear cells culture supernatants of patients with severe recurrent depressive disorder (F33.2) exceeded the corresponding parameters of patients with mild depressive symptoms. A direct correlation between the depression severity and IL-1β, TNF-α, IL -6 spontaneous production by blood mononuclear cells of patients with multiple sclerosis was found.
Conclusions: The severity of recurrent depressive disorder correlates with a change in the parameters of the cytokine status: severe depressive symptoms are accompanied by a change in the functional activity of immune cells and an increase in the production of cytokines synthesized by type I T-helpers.

Disclosure: No significant relationships.
Keywords: Multiple sclerosis; comorbid recurrent depressive disorder; Cytokines status

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