Disclosure: No significant relationships.
Keywords: Autoimmunity; Autoantibodies; psychopathology; psychosis

Psychopathology

EPV0494

Looking at Self-Disorders through the Minnesota Multiphasic Personality Inventory (MMPI): An empirical exploration of the MMPI-derived Self-Disorder Scale

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Introduction: Trait-like anomalies of subjective experience have been empirically identified as schizophrenia-specific markers of vulnerability in several clinical and genetic high-risk populations. Recently, Parnas and colleagues have identified and preliminarily explored a composite score (i.e. Self-Disorder Scale, SDO) within the Minnesota Multiphasic Personality Inventory (MMPI) that approximates such construct). SDO differs from the MMPI psychoticism scale, and includes presents items very similar to Self Disorder investigated by EASE (Examination of Anomalous Self-experience).
Objectives: This study is a confirmatory analysis of the correspondence of Self-Disorder Scale (SDO) of the MMPI with some items of EASE, in a population of adolescents. These items are present in psychotic and in at risk mental state subjects.
Methods: We administered MMPI and EASE to 34 help seeker adolescent patients and correlate all dimensions of MMPI with EASE total score and its domains.
Results: MMPI SDO scores significantly correlated with schizophrenia-spectrum diagnosis and high-risk mental states.
Conclusions: SDO is an MMPI analogous of Self Disorders and can be used as a useful screener to detect patients at potential risk for schizophrenia spectrum disorders, that could be further explored with the EASE.

Disclosure: No significant relationships.
Keywords: Minnesota Multiphasic Personality Inventory; Self-Disorders; adolescence; schizophrénia

EPV0495

Melancholia. Historical evolution through a case report

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Introduction: The diagnosis of psychotic depression has its origin in the millennial term of Melancholia.
Objectives: A case of psychotic depression is presented to highlight its psychopathological characteristics and to make a historical overview of its origins.
Methods: We present the case of a 40-year-old male patient with a history of dysthymic mood who developed a major depressive mood, loss of self-care, decreased apetite, insomnia and repetitive speech with ideas of guilt and ruin of psychotic characteristics.
Results: Melancholy is a term used since the time of Hippocrates, who spoke of it as the state that appears after the prolongation of an intense period of sadness. It was extolled and self-attributed by authors such as Montaigne and branded as selfish by authors such as Cicero in the days when reason and madness formed a whole and distinguishing their limits was a complex task. Esquirol changed his name to Lypemania to get rid of its poetic nuances and framed it within partial insanity. Both he and the rest of the psychopathologists of the XIX century and early XX considered the melancholic as the great tormented, the one who despises himself and blames all ills, who suffers from apathy and above all presents a strong pain of the soul.
Conclusions: Later it was Falret and Baillarger who unified melancholy with mania in what they nominate as circular and dual-form insanity. This gave way to the Krapelinian entity of manic-depressive insanity, the direct predecessor of the current Bipolar Disorder, which includes the diagnosis of our clinical case.

Disclosure: No significant relationships.
Keywords: bipolar disorder; Historical evolution; Melancholia; psychotic depression

EPV0496

Revisiting hysterical psychosis: A case report

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Introduction: Holiender and Hirsch defined hysterical psychosis in 1964 and, while hysteria has a contemporary equivalent in somatoform/dissociation disorder, hysterical psychosis remains set adrift in the nosological understanding of psychiatric disorders.
Objectives: To present a case report of a hysterical psychosis and to review this nosological construct.
Methods: Clinical interview, consultation of clinical records and review of literature using the Pubmed platform.
Results: The authors present a case of a 38 year-old woman, admitted in a psychiatric emergency department for bizarre behavior, restlessness, auditory (pseudo)hallucinations and emotional lability, starting 1 week after a personal development retreat. This is the second episode of this nature, the first being a 15-day hospitalization 7 years ago, with rapid stabilization, extensive examination and restitium ad integrum. The patient initiated Olanzapine and was referred to an outpatient clinic, with rapid stabilization and restitium ad integrum throughout follow-up. Given the episode and patient characteristics, a hysterical psychosis diagnosis may be accurate, taking into account the acute onset and course, the pleomorphic nature of symptoms and the presence of a

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disturbing life event. The authors propose reviewing the concept of hysterical psychosis regarding its clinical implications and debating its therapeutic and prognostic utility.
Conclusions: Hysterical psychosis may not be a mere historic footnote and encompasses an entity with distinctive diagnostic, prognostic and therapeutic characteristics. While its etiology may not be understood, its clinical implications ensure the need for future research.

Disclosure: No significant relationships.
Keywords: psychopathology; hysteria; psychosis

EPV0497

Pronoia or reverse paranoid delusion: A brief exploration into a conspiracy in your favour

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Introduction: Pronoia is a neologism originally coined in 1982 to describe a state of mind that is, in essence, the positive counterpart of paranoia. It is characterized by feeling that the world is conspiring on behalf of the person experiencing pronoia.
Objectives: Brief literature review.
Methods: The authors review the available literature on pronoia and present a broad overview of its description and defining characteristics. An initial search utilizing key health journal databases revealed a scarcity in available documents, therefore a generalized search utilizing the search engine Google Scholar was performed with the term "pronoia". Relevant articles obtained from the respective bibliographic references were also consulted.
Results: The primary outcome of this work is a summary of the available literature in order to build a more comprehensive understanding on pronoia. All relevant information was collated to form a cohesive description of the condition and its characteristics. We address a gap in the literature by offering a description of the lesser prevalent concept of pronoia.
Conclusions: Our results demonstrate a scarcity in the available literature describing the pronoia phenomenon when compared to its well-documented counterpart, paranoia. Further exploration into this topic is merited so as to close the gap on paranoia's lesser-known positive counterpart. By signalling the existence of this concept, we strive to contribute to an increased identification of a concept that is many times underdiagnosed due to a lack of attention to its existence.

Disclosure: No significant relationships.
Keywords: psychopathology; Paranoia; nosology; pronoia

EPV0498

A delusion of pregnancy in man with hyperprolactinemia

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Introduction: A delusion of pregnancy in men has been rarely reported in psychiatric disorders. The literature on this delusion in male schizophrenia is limited. It was reported especially in medical conditions. In psychiatric disorders, it has been explained for a long time by psychodynamic theories.
Objectives: To present a case of a pregnancy delusion in man associated temporally to neuroleptic-induced hyperprolactinemia and a review of literature of medical and psychological etiologies of this symptom
Methods: We presented a case of a pregnancy delusion in man associated temporally to neuroleptic-induced hyperprolactinemia and we elucidated through a review of literature of medical and psychological etiologies of this symptom.
Results: Case report A 46-year-old man, unmarried, who had a mild intellectual disability and a 22-year history of schizophrenia. He was admitted to our hospital for psychotic relapse due to the interruption of his medication. This patient had been treated for years with long action injection medication. On admission he was disorganized, verbalizing a poorly-systematized fuzzy delirium. And he believed he was pregnant. Serum prolactin levels was 38 ng/ml (3-25ng/ml). He was put on Haldol decanoate 150mg/month, chlorpromazine 150mg/day, and diazepam 15mg/day.
Conclusions: The presentation of a delusion of pregnancy in man is rather infrequent. The delusion may have many social, psychological, and biological determinants to its genesis. This case highlights the importance of medical investigations notably the assay of prolactin in the assessment of patients who present with delusions of pregnancy.

Disclosure: No significant relationships.
Keywords: Delusion of pregnancy; - hyperprolactinemia-; male

EPV0500

Bed for three

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Introduction: Charles Bonnet syndrome (CBS) is characterized by the presence of visual hallucinations without other sensory-perceptual disturbances or evidence of organic mental disorder nor functional psychosis.
Objectives: Review differential diagnosis of BCS, searching articles in Pubmed.
Methods: 62-year-old woman, undergoing treatment with Sertraline and psychotherapy for three months because of anxious-depressive synthoms. Pathological myopia and retinal detachment