Objectives: To highlight the importance of considering this condition (as well as other rare causes of neuropsychiatric involvement) in patients presenting with atypical psychotic symptoms accompanied by cognitive and behavioral disturbances.
Methods: Presentation of a clinical case and literature review.
Results: A 69-year-old female presents with a complex medical history, including melanoma, meningioma, and cerebral microangiopathy. Since 2019, prolonged activated partial thromboplastin time (aPTT) and lupus anticoagulant have been observed. In 2020, she developed neurological symptoms such as blurred vision, diplopia, dizziness, and instability. In December 2022, she consults for depressive symptoms and memory problems. June 2023, she was admitted to Psychiatry ward for a psychotic episode characterized by poorly structured and apparently fluctuating delusional symptoms. There was also evident disorganization, confusion, incoherent behavior, memory deficits, and functional decline. During the hospitalization, her condition initially worsened, with bizarre behaviors fluctuating, requiring mechanical and pharmacological restraint on several occasions. Blood tests showed bicitopenia (leukopenia and thrombocytopenia), along with renal insufficiency. Antiphospholipid syndrome was confirmed. Subsequently, her delusional symptoms remitted, and she was discharged. A second scheduled admission in internal medicine followed for diagnostic clarification during which SLE (ANA+, SSA, SSB, anti U1RNP, anti Sm D, and anti-DNA+) and antiphospholipid syndrome were confirmed. Hydroxychloroquine and anticoagulation (Sintrom) were initiated.
She currently remains under follow-up in both Internal Medicine and Psychiatry with functional, cognitive, and emotional improvement, allowing for the reduction of antipsychotic and antidepressant medication without relapse. A cognitive decline has been ruled out by the dementia unit.
Conclusions: In the case of SLE and its neuropsychiatric manifestations (NP-SLE), there are no specific markers, making detailed medical history, thorough screening, and differential diagnosis essential. Appropriate use of complementary tests and close coordination with other medical specialties are crucial, requiring a multidisciplinary and holistic approach.

Disclosure of Interest: None Declared

EPV1059

A New Hope: Can we estimate a clinical diagnosis by using eye-tracking technology?

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Introduction: Eye-tracking technology is a sensitive and direct method of measuring social-cognitive abilities regardless of language, causing minimal cognitive strain and with the advantage of its passive presentation of stimuli to participants, which allows observation without requiring verbal interaction nor explicit responses.
Objectives: Our aim was to study variations in social attention among adults diagnosed with ASD, ADHD, comorbid ASD and ADHD, and non-clinical individuals using eye-tracking technology.
Methods: We recruited a total of 80 participants over the age of 18 from the Psychiatric External Ward of Vall Hebron University Hospital, resulting in approximately 20 participants in each group. Social attention was assessed using vignettes from the Autism Diagnostic Observation Schedule-2 (ADOS-2).
Results: Preliminary results revealed significant statistical differences among the groups in the variables analyzed, indicating that individuals with ASD display distinct patterns of visual attention toward Areas of Interest (AOIs) containing social information compared to the other groups. No differences were found in the duration of fixation on the characters' eyes among the groups. However, participants diagnosed with ASD and ASD+ADHD tended to spend more time looking at regions with lower social information density, such as the characters' hands in the third vignette.
Conclusions: These findings shed light on social attention profiles across clinical and non-clinical populations, indicating specific patterns associated particularly with ASD, and highlight the importance of considering multiple aspects of social cognition. By employing eye-tracking technology, this study provides valuable insights into the underlying mechanisms of social attention across different neurodevelopmental conditions. Furthermore, the lack of significant differences in eye fixation duration on the eyes among clinical groups challenges conventional beliefs regarding social attention deficits in ADHD compared to ASD.
Using objective measures like eye-tracking can enhance our understanding of these complex neurodevelopmental conditions, potentially aiding in diagnosis and guiding the development of targeted interventions to address social cognition challenges in populations with neurodevelopmental disorders.
Our findings may contribute to a better understanding of social attention differences between ASD, ADHD, comorbid ASD +ADHD, and non-clinical individuals, paving the way for the design of more tailored and effective interventions.

Disclosure of Interest: None Declared

EPV1060

Anger, Aggression and Violence: Towards an integrative, 'transdiagnostic' treatment paradigm

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Introduction: Using a 'transdiagnostic' paradigm for psychopathology, we review the evidence-base for the different treatment interventions for anger, aggression and violence (AAV). We aim to more accurately link the range of psychopathology associated with AAV to underlying brain structures and functional neurocircuitry. Building upon these findings, we propose a working model that may have greater clinical utility than reliance upon a purely 'disorder-based' paradigm for addressing AAV. This will permit greater understanding of when anger (which has also conferred

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