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**Introduction:** The Balint group emerged at the Tavistock Clinic in London in the early 1950s. Its creator was a doctor and psychoanalyst Michael Balint. It consisted of a group process, with meetings among general practitioners, in which non-conscious aspects of the professional-patient relationship were approached. We present how a proposal for implementation of a Balint Group has emerged, specifically for physicians and nurses who care for cancer patients. Is is a consequence of results obtained from a qualitative study conducted by a student of the professional master's degree linked to a Clinical Oncology.
**Objectives:** To present a technical product, as required in a Brazilian professional master's degree, as a result of research that studied reports of doctors and nurses who deal with usual difficulties of handling patients with HNC.
**Methods:** The group work is triggered by the report of a case brought by a participant, presenting a problem-situation in the management of his patient. The meeting leader seeks to understand the reactions reported by the presenter in the light of a psychodynamic approach.
**Results:** Expected results: the holding of a Balint group, perhaps monthly, in charge of a colleague who has knowledge in applied psychoanalysis, will allow insights to the participants who will bring them conditions to perceive "neurotic elements" in the relationship with their patient.
**Conclusions:** Final consideration: having accumulated decades of positive experience, Balint Groups must remain as an updated proposal for the work on emotional issues of professional teams, with emphasis on clinical services with the management of so-called "difficult patients".

**Disclosure:** No significant relationships.
**Keywords:** oncoloy and psychology; medical psychology; Medical Education; Balint groups

## EPV0125

## Alprazolam addiction: The case study

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**Introduction:** Alprazolam is an anxiolytic, a benzodiazepine derivative of the middle duration of action. It is one of the most frequently prescribed medication for the treatment of anxiety and panic disorder. Under the action of a drug, a person feels incredible ease, a sense of euphoria, absence of problems, a sense of safety.
**Objectives:** A 55-year woman was admitted to psychiatric clinic in Ivano - Frankivsk.
**Methods:** She was assesed by the clinicopsychopatological method (clinical interview) and additional methods (MRI, EEG, pathopsycological assessment).
**Results:** The main findings were: atactic procession, tremor of the limbs and the whole body, poor attention, speech impairment, retarded thinking, fixation and reproductive amnesia with the components of progressive amnesia, change handwriting. The mood is lowered with unstable affect, lack of insight. She reported burning and tingling of the head as a main problem. She developed amotivation, bad activity and drowsiness, bradycardia, decreased blood pressure. She took Alprazolam during a period of 1,5 year in gradually increasing doses. The last dose was 12 tablets of Alprazolam per day. The patient was consulted again in a year. She does not take Alprazolam. She takes valproate and escitalopram. She did not demonstrate severe neurological symptoms which were seen a year ago.
**Conclusions:** Thus, though alprazolam is one of the best anxiolytic substance it should be prescribed only by the doctor for a short course (no more than 4-5 weeks). The treatment must include psychoeducation in order to make patients be aware about possible addiction and unsafety of prolonged and uncontrolled usage of alprazolam.

**Disclosure:** No significant relationships.
**Keywords:** Alprazolam; Addiction; Psychoeducation

## EPV0126

## Pharmacokinetic interactions of psychotropic medications in patients with schizophrenia suffering from atypical mycobacterial infections

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**Introduction:** Mycobacterium kansasii is a nontuberculous mycobacterium that causes infection associated with past or current tuberculosis disease. Clinical syndromes and radiological findings are mostly indistinguishable from that of Mycobacterium tuberculosis, thus requiring microbiological confirmation.
**Objectives:** We report a case of a 44-year-old man diagnosed with schizophrenia and Mycobacterium kansasii infection.
**Methods:** Case report and non-systematic narrative review from PubMed.
**Results:** Case report: Patient with schizophrenia who was admitted at the inpatient unit presenting psychotic exacerbation with high levels of excitement. Risperidone 6 mg/day and valproate