

past, that she now denies. Various scales show moderate impact of weight on personal perception of psychosocial adjustment, an impulse to thinness and a significant distortion of body image, perceiving herself as heavier than she is and wishing she was lighter.

Conclusions: In schizophrenia, confusion in bodily experiences and states is not uncommon. The possible interactions between the symptoms of schizophrenia and anorexia nervosa complicate the adequate care of these patients. Further research on comorbidity of these two disorders is necessary.

Keywords: anorexia nervosa; body image; schizophrenia; eating disorder

EPP0234

Depression, distress and their association with patterns of psychoactive substance use during the COVID-19 emergency state in latvia

J. Vrublevska¹, A. Šiblova², I. Aleskere², B. Rezgale², D. Smirnova³, K. Fountoulakis⁴ and E. Rancans^{1*}

¹Department Of Psychiatry And Narcology, Riga Stradins University, Riga, Latvia; ²Faculty Of Residency, Riga Stradins University, Riga, Latvia; ³Department Of Psychiatry, Narcology, Psychotherapy And Clinical Psychology, Samara State Medical University, Samara, Russian Federation and ⁴3rd Department Of Psychiatry, School Of Medicine, Aristotle University of Thessaloniki, Thessaloniki, Greece

*Corresponding author.

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Introduction: The WHO warned that the COVID-19 pandemic could have psychiatric consequences such as elevated levels depression, increased alcohol and drug use, and other behaviours that exert a strong influence on health. In Latvia a state of emergency was announced on March 12th, was extended twice and lifted on June 10th.

Objectives: To estimate the prevalence of depression and distress in the general population of Latvia and association with substance use during the state of emergency.

Methods: The nationwide representative online study in the general population of Latvia was conducted in July 2020 during three week period. The Center for Epidemiologic Studies Depression Scale (CES-D) was used to determine the presence of distress/depression. The structured questionnaire to determine psychoactive substance use was applied. Proportions of independent variables across the study groups were compared using Chi-square test.

Results: The study sample included 2608 respondents. The prevalence of depression and distress was estimated at 5.7% (95%CI 4.92 – 6.71) and 13.5% (95%CI 6.85 – 8.91), respectively. Patients with depression (28% vs. 7.4%, $p < 0.001$) and distress (30.9% vs. 7.4% $p < 0.05$) smoked more tobacco compared to respondents without distress/depression. Those with depression or distress were significantly more likely to consume more alcohol during the emergency state than people without depression or distress (14.0% and 17.7% vs. 6.6%, $p < 0.001$). The changes in the use of other psychoactive substances in those who had depression or distress were not statistically significant.

Conclusions: Preparing support systems to mitigate mental health consequences is needed urgently.

Keywords: Co-morbidities; Depression; Alcohol; COVID-19

EPP0237

Association between complete corpus callosum agenesis and recent-onset schizophrenia: A case report

B. Abassi^{1*}, F. Fekih-Romdhane¹, H. Maktouf² and M. Cheour²

¹Psychiatry E, Razi hospital, Manouba, Tunisia and ²Psychiatrie Ibnomran, Razi Hospital, mannouba, Tunisia

*Corresponding author.

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Introduction: Corpus callosum agenesis (CCA) is a rare congenital disorder in which there is a partial or complete absence of the corpus callosum. Within the framework of an anatomoclinical approach to schizophrenia, a few studies have focused on its association with neurological disorders, including CCA.

Objectives: In this perspective, we report a rare case of an adolescent with intellectual disability, with whose complete CCA was revealed by a recent-onset schizophrenia.

Methods: A case report and literature review.

Results: The teenager M.A. is from a first degree consanguineous marriage. He had no family history, no special habits and no history of seizures. Since early childhood, he had had a psychomotor acquisition delay and relationship difficulties that tended to worsen later. At school, he was teased by his peers and failed 4 times in different rows. At the age of 15, he dropped out of school. Verbal and physical aggressiveness, soliloquy, unmotivated laughter and vague ideas of persecution suddenly appeared, hence his psychiatric consultation one month later. Neuropsychological tests indicated current low Intelligence Quotient (60). Brain imaging revealed complete ACC (see Figure 1). He was diagnosed with schizophrenia and put on antipsychotic treatment at adequate doses and durations, with poor therapeutic response.

Conclusions: Our observation provides additional support for neurodevelopmental models of schizophrenia, and confirms literature data indicating that severe structural brain abnormalities would lead to early onset psychotic symptoms which are often refractory to pharmacological treatments

Keywords: recent-onset schizophrenia; Association; corpus callosum agenesis

EPP0239

Mental health of people living with hiv and adherence to antiretroviral therapy

F. Goma¹, G. Papazisis^{2*}, E. Papakonstantinou¹ and G. Karakioulakis¹

¹1st Department Of Pharmacology, School of Medicine, Aristotle University of Thessaloniki, Thessaloniki, Greece and ²Department Of Clinical Pharmacology, School of Medicine, Aristotle University of Thessaloniki, THESSALONIKI, Greece

*Corresponding author.

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Introduction: Adherence to antiretroviral therapy is a key factor in predicting the success or failure of treatment. Data suggest that the status of mental health and especially depression of people living with HIV can affect adherence to antiretroviral therapy.

Objectives: The purpose of this study was to assess the mental health status of people living with HIV, to record adherence to

antiretroviral therapy and to investigate whether mental health affects adherence to antiretroviral therapy.

Methods: A cross-sectional mixed observational correlation study in a sample of 112 HIV-positive individuals was conducted. The Simplified Medication Adherence Questionnaire (SMAQ) was used to assess adherence to antiretroviral therapy, the Beck Depression Inventory (BDI) was used to assess depression, and the WHOQOL – BREF tool was used to assess mental health.

Results: The results of the study showed that 58.93% of patients were found to be non-adherent to antiretroviral therapy. Furthermore, according to the BDI scale, 10.7% of patients experienced marginal clinical depression, 10.7% experienced moderate levels of depression and 2.7% experienced severe or very severe levels of depression. Further, people living with HIV had a moderate level of mental health ($M = 3.40$, $SD = 0.58$).

Conclusions: Our study showed that a high percentage of people living with HIV are non-adherent to antiretroviral therapy. Factors that are possibly associated with decreased adherence are mental health and especially depression. Psychological support for people living with HIV and anti-depressant prevention programs could increase adherence to antiretroviral therapy.

Keywords: HIV; mental health; adherence; antiretroviral therapy

EPP0240

An acute psychotic disorder revealing hyperthyroidism by thyroid neoplasia: A case study

S. Sellami^{1*}, N. Halouani², A. Chamseddine³, F. Ben Othman¹ and J. Aloulou⁴

¹Psychiatrie, Hedi Chaker University hospital, Psychiatry, Sfax, Tunisia;

²Psychiatrie, Hedi Chaker University hospital, sfax, Tunisia;

³Psychiatrie, Hedi Chaker University hospital, Psychiatry, sfax, Tunisia

and ⁴Psychiatrie, Hedi Chaker University hospital, Psychiatry, Sfax, Tunisia

*Corresponding author.

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Introduction: Rarely, thyroid cancer can lead to hyperthyroidism. The link between dysthyroidism and psychiatric symptoms is well established, but cases of psychosis associated with hyperthyroidism are rarely reported in the literature.

Objectives: Identifying psychosis secondary to hyperthyroidism caused by a secreting tumor through a case and literature review.

Methods: We report the case of a patient with thyroid suspect tumor and chronic psychosis. We performed a literature review based on a PubMed search with the following keywords: “dysthyroidism psychosis”.

Results: Mr. S, 32, with a personal psychiatric history of chronic psychosis evolving since 4 years, without notable pathological history, was hospitalized in psychiatry for psychomotor instability, verbal hetero-aggressiveness, subtotal insomnia and refusal of treatment. The psychiatric examination revealed the presence of a chronic delusional syndrome with a theme of persecution, mysticism, and an interpretive, intuitive and hallucinatory mechanism, without dissociative syndrome. The somatic examination objectified a cachectic patient with a bilateral symmetrical non-impulsive exophthalmos, a goiter with a thrill on palpation, dysphonia and sinus tachycardia. A laboratory workup revealed inflammatory syndrome, collapsed TSH (<0.05 mU / L) and an increased T4 to 37 pmol / L. Cervical ultrasound showed a strongly suspect left lobar heteronodular goiter

and poorly structured peripheral lymphadenopathy (TI-RADS 4-B). Sedative diazepam therapy was started with antithyroid therapy and a beta blocker. The evolution was quickly favorable. The patient is referred for surgical treatment.

Conclusions: The severity of the hyperthyroidism, neoplastic origin, the improvement in psychotic signs with antithyroid treatment are arguments in favor of the thyroid origin by thyroid neoplasia.

Keywords: dysthyroidism; psychosis; tumor; hyperthyroidism

EPP0241

Options for the recovery of mental activity in children after acute brain damage.

Y. Sidneva^{1*}, A. Zakrepina², M. Bratkova³ and S. Valiullina⁴

¹The Department Of Rehabilitation; Psychiatric Research Group, Clinical and Research Institute of Emergency Pediatric Surgery and Trauma; N.N.Burdenko National Medical Research Center of Neurosurgery, Moscow, Russian Federation; ²The Department Of Rehabilitation; Laboratory Of Psychological And Pedagogical Research And Technologies For Special Education Of Persons With Intellectual Disabilities, Clinical and Research Institute of Emergency Pediatric Surgery and Trauma; The Federal State Budget Scientific Institution “Institute of Special Education of the Russian Academy of Education”, Moscow, Russian Federation; ³Institute Of Special Education And Psychology Institute Of System Projects Institute Of Lifelong Learning Directorate Of Educational Programs Institute Of Education Content, Methods And Technology, Moscow City University; Clinical and Research Institute of Emergency Pediatric Surgery and Trauma, Moscow, Russian Federation and ⁴Department Of Rehabilitation, Clinical and Research Institute of Emergency Pediatric Surgery and Trauma (CRIEPT), Moscow, Russian Federation

*Corresponding author.

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Introduction: Children with acute brain damage make up a large group of patients who require multi-stage rehabilitation. Rehabilitation requires the creation of special conditions for psychiatric care and psychological and pedagogical correction of the consequences of severe damage to the nervous system.

Objectives: To identify the options for mental activity during the restoration of the level of consciousness in children after acute severe brain damage.

Methods: 210 children under the age of 18 with severe brain damage (traumatic brain injury, hypoxia, hydrocephalus). Clinical-psychopathological, pedagogical methods were used; additionally diagnostic scales, questionnaires.

Results: 4 groups were formed: 1st 37 (18%) patients had manifestations of mental activity with physical, cognitive and social capabilities in the minimal consciousness “+” (a- / hyperkinetic mutism with emotional reactions, understanding of addressed speech); 2nd 67 (32%) - manifestations of physical and cognitive abilities with minimal consciousness “-” (a- / hyperkinetic mutism without reactions); 3rd 95 (40%) - only the manifestation of physical capabilities at the exit from the vegetative status. 4th 11 (10%) - a low manifestation of mental activity in the form of physical capabilities with a vegetative status.

Conclusions: 4 variants of mental activity in children after acute severe brain damage have been identified: from minimal involuntary reactions or their absence in vegetative status to voluntary actions according to the instructions of an adult in minimal