

Results: The patient had previously received multiple high-dose psychotropic drugs (Gabapentin, trazodone, Zolpidem, Quetiapine), which had reduced the agitation but had not resolved the problem. Organic causes were treated in a multidisciplinary team (pressure ulcers), together with a gradual tapering of medication. Although underlying vascular dementia was diagnosed, the patient's gait and cognitive status improved, with a significant impact on her autonomy and quality of life.

Conclusions: Despite an extensive literature on the subject, delirium in the elderly remains an under-diagnosed medical condition, especially the hypoactive subtype, just as cascade prescribing remains common. It is important to raise awareness among specialists in training to prevent and diagnose it.

Disclosure: No significant relationships.

Keywords: delirium; De-prescribing; prescription cascade; Polypharmacy

EPV0937

The specific of development tasks in old age

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Introduction: The presentation considers the peculiarities of late adulthood, different views on the periodization of older ages (World health organization, I. Burnside, H.S. Pryazhnikov).

Objectives: The research is aimed at studying the peculiarities of late adulthood.

Methods: The method of work is a bibliographic analysis.

Results: Reveals the structure of psychological age (concept by L.S. Vygotsky), the specificity of the development in late adulthood and features of the social situation of development. Reveals modern ideas of ageing as a process not only of involution and loss, but also a process of continued development. The greatest attention is paid to the peculiarities of development tasks at older ages and the difficulties faced by older people trying to cope with them. There are the brief overview of the positions of C.G.Jung, A.Adler, E. Erikson, R.Peck, G.M.Bryugman, A.G.Liders, N.S.Pryazhnikov, E.E.Sapogova, I.V.Shapovalenko, V.I.Slobodchikov, G.A.Zuckerman, etc. regarding the development tasks in late adulthood. The comparison of the development tasks of early and late age periods by G.M. Bryugman, which shows that the tasks of aging worse defined, at least sequentially ordered, and the results of solution of development tasks is less predictable than in earlier ages.

Conclusions: We can say that in old age is important not only the task of adjusting to different changes of pace of life, quality of life, social circle, etc., and overcome the negative aspects of aging but also issues of self-development. As the primary development task in late adulthood is considered an achievement of his own integrity and finding the meaning of life.

Disclosure: No significant relationships.

Keywords: elderly age; development tasks; development in old age; integrity; wisdom

EPV0938

BDNF and cognitive function in Alzheimer's disease

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Introduction: Alzheimer's disease (AD) is a neurodegenerative pathology that develops mainly in elderly and senile people. Disruption of BDNF transport or suppression of its production appears to be typical for people of old age. Objective: To investigate the influence of Alzheimer's disease on the secretion of brain factors and correlate with neuropsychological profiles.

Objectives: 12 men (2) and women (10) with Alzheimer's disease were examined. The average age of the subjects was 76.25 ± 4.89 . Methods: MMSE, ADAS-COG, laboratory - BDNF was performed using the G7611 BDNF Emax (R) ImmunoAssaySystem 5 x 96 wells, BDNF Emax® Immunological test.

Methods: 2 patients have mild dementia, 8 patients have moderate dementia, 2 patients have severe dementia. The average age of patients with mild dementia was 72.0 ± 1.0 . The average MMSE score is 16.7 ± 3.4 .

Results: Correlation analysis showed a close relationship between a pronounced decrease in memory in memory tests (ADAS-COG) and a pronounced decrease in blood BDNF content ($r = 0.676$). A close statistically significant relationship was found between a low result of the recognition test and a low blood BDNF content ($r = 0.598$).

Conclusions: We assume that blood BDNF is a marker of pathologically accelerated aging of the central nervous system, since low test results for mnestic function are an indicator of severe degeneration in Alzheimer's disease.

Disclosure: No significant relationships.

Keywords: cognitive function in Alzheimer's disease; bdnf; neurotrophic parameters; neuropsychological parameters

EPV0940

Catatonia and dementia: a case report

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Introduction: Catatonia is a neuropsychiatric disorder characterized by motor, behavioral and autonomic changes. It is associated with several psychiatric disorders, including dementia. Catatonia is an underdiagnosed syndrome, so it is important to draw attention to it. Here, we review a case of a patient admitted to our psychiatric department with a clinical presentation compatible with catatonia. After proper treatment, further assessment revealed dementia.

Objectives: This work aims to describe a case of catatonia in a patient with dementia.

Methods: Bibliographic research using Pubmed®. Clinical file consultation and patient interviews.

Results: Catatonia is a disorder that was already been described as part of several types of dementia. We present a 69-year-old female

patient, admitted to our psychiatric department with clinical presentation compatible with catatonia. To admission, she presented some typical complications resulting from long immobility such as pressure ulcers and nutritional deficiencies. During the hospitalization, she developed a urinary infection and there was the need to tube feeding. She was treated with benzodiazepines and improved. Further assessment revealed dementia.

Conclusions: Catatonia in dementia is not uncommon, although it is an underdiagnosed syndrome, and when treated early and properly it has a good prognosis.

Disclosure: No significant relationships.

Keywords: Catatonia; demencia

EPV0941

Depression and quality of life in Tunisian institutionalized elderly subjects

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Introduction: Depression in the elderly is common and closely interrelated with the deterioration of the quality of life, especially in the institutionalized elderly.

Objectives: In this work, we propose to determine the prevalence of depression in the elderly in institution, to assess their quality of life and to evaluate the correlations between depression and the quality of life.

Methods: Our study concerned 30 elderly subjects institutionalized at the retirement home(Sousse, Tunisia). Three validated Arabic version scales were used: The 30-item GDS (Geriatric Depression Scale), the MMSE (Mini Mental State Examination) and the SF36 (assessing the quality of life).

Results: The mean age of our population was 75 ± 7.3 years, the sex ratio was 1.73. The prevalence of depression was 37%. The elderly had a cognitive impairment in 16.7%. The mean global SF36 score were 11.2, attesting an altered quality of life in all our subjects: the mental component (9.43) were more altered than the physical one (13.03). No correlation between depression and quality of life was found. Depression was significantly correlated with the presence of a medical history ($p=0.05$). Depression had a negative and statistically significant correlation with the physical score of SF36 ($r=-0.41$, $p=0.02$) and tended towards significance for the "general health" dimension of SF36 ($r=-0.32$, $p=0.08$).

Conclusions: Our study shows a high frequency of depression in the institutionalized elderly as well as a deterioration in their quality of life. Depression is strongly linked to deterioration in physical condition. Our results underline the influence of somatic diseases as a major risk factor for depression in the elderly.

Disclosure: No significant relationships.

Keywords: elderly subject; institution; Depression; Quality of Life

EPV0943

Othello syndrome: ¿Psychosis or dementia? A case report.

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Introduction: Othello syndrome (OS) is a psychiatric condition consisting of delusional jealousy, and irritability. It is often associated with psychiatric or neurological disorders. The most common are delusional disorder and dementia.

Objectives: The purpose of this poster is to examine the phenomenon of OS and its etiopathogenesis throughout a case report.

Methods: We present the case of a 78-year-old male patient who was treated in our department due to delusional jealousy and depressive symptoms. The patient has a medical history of cardiac events in the past, being stable at the current moment. We performed a detailed psychiatric and physical history paying special attention to personality traits in the past. The patient was administered Mini Mental State Examination and CamCog (subscale of Camdex).

Results: According to him and his family our patient had neither episodes of jealousy nor affective disorders. His results were: 18 in MMSE and 57 in CamCog. Both compatible with a dementia course.

Conclusions: Attending our results we inferred that the OS belongs to a dementia clinical picture instead of a psychotic disorder. Therefore we decided to treat the patient with neuroleptics, with partial improvement, and to start cognitive stimulation treatment in a day centre and a short term psychological family intervention to help the family to understand and cope with the course of dementia. Thus, clinicians should keep in mind the possible organic origin of OS, especially in elderly persons, to develop an appropriate individual and familiar case approach.

Disclosure: No significant relationships.

Keywords: Othello syndrome; CamCog; Dementia; delusional jealousy

EPV0944

Homebased screening for cognitive impairment due to dementia

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Introduction: Dementia develops slowly and insidiously and causes cognitive impairment. The diagnosis is pivotal for relevant treatment and care. However, 50,000 people are estimated to have undiagnosed dementia in Denmark, while 36,000 are diagnosed.