

antidepressants, indicating a more pronounced clinical response and suggesting potential synergy between neuromodulation and pharmacotherapy in cortico-limbic circuits. However, larger sample sizes are needed to achieve robust statistical validation, clarifying the isolated impact of each modality and their combination.

**Conclusions:** Both TMS and tDCS represent effective therapeutic alternatives for patients with MDD and GAD, especially those refractory to conventional approaches. Although promising, implementing these techniques faces challenges, including high costs, the need for specialized professionals, and stronger scientific validation to enable widespread use. Expanding clinical knowledge and disseminating evidence-based guidelines can promote safe access to and usage of these therapies.

**Disclosure of Interest:** None Declared

## EPV1653

### A historical overview on the rise and downfall of psychosurgery

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doi: 10.1192/j.eurpsy.2025.2130

**Introduction:** “Psychosurgery” is defined as the human brain surgery to treat psychiatric symptoms.

**Objectives:** This study aims to portray psychosurgery’s historical evolution.

**Methods:** A review of 35 articles from 2000 to 2024 on PubMed and Google Scholar, regarding psychosurgery.

**Results:** The initial phase of psychosurgery dated in 1888, when Swiss psychiatrist Gottlieb Burckhardt, in an effort to control the symptoms of psychiatric patients, he performed the very first brain topectomies. Later on, in 1936, Portuguese neurologist Egas Moniz and neurosurgeon Almeida Lima, collaborated on performing the first lobotomy. After achieving 20 lobotomies, Moniz reported that 35% of patients showed complete remission of psychiatric symptoms, 35% of patients showed a mild improvement, and 30% of patients showed no improvement. It was Freeman’s (a neurologist) and Watts’s (a neurosurgeon) turn to perform in 1936 the first lobotomy on the USA ground, on a woman suffering from depression; Alice Hammatt. Unfortunately, six days post-operation, Hammatt experienced language difficulties, disorientation and agitation. However, the surgery was still considered a success. By 1942, Freeman and Watts had performed 200 lobotomies, declaring that 63% of patients improved, 23% of patients showed no relief, while 14% of patients suffered complications, including death. Freeman pursued with the development of a transorbital method which he tended to perform in outpatient departments, without any neurosurgical assistance, having patients anesthetized with a portable electroshock machine. Profoundly disapproving this method, Watts, decided to end their partnership. Further unsatisfactory outcomes like the lobotomy of Rosemary Kennedy (sister of President John F. Kennedy) shaped an additional negative image of Freeman’s work. Rosemary who initially was subjected to lobotomy due to mild developmental delays, anxiety and epilepsy, was postoperatively left severely disabled, without autonomy, being institutionalized for the rest of her life. Finally, the approval of chlorpromazine’s use in the US (1955) alongside public

awareness over psychosurgery’s complications, such as the “post-leucotomy syndrome” causing disinhibition as well as “lobotomy criteria” which included female gender, non-obedience, hospitalization in overcrowded institutions, opposite political opinion, led to psychosurgery’s downfall.

**Conclusions:** Considering the dark history of psychosurgery, it is imperative to proceed to such treatments exclusively to diseases with a well decoded neurophysiology, always respecting human rights and protecting patients’ dignity and self-will.

**Disclosure of Interest:** None Declared

## EPV1654

### The role of electroconvulsive therapy in the treatment of aggression in psychiatry: A literature Review

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doi: 10.1192/j.eurpsy.2025.2131

**Introduction:** Electroconvulsive therapy (ECT) has gained increasing attention as a therapeutic option for managing aggressive behavior in psychiatric patients. Aggression is a common symptom in several psychiatric disorders, such as schizophrenia, bipolar disorder, and severe depression, which can be resistant to conventional pharmacological treatments.

**Objectives:** This literature review examines the efficacy and safety of ECT in reducing aggression across various psychiatric populations.

**Methods:** We have conducted a web research on Pubmed for articles published in the last ten years about the topic using key words like “aggression”, “ECT”.

**Results:** Evidence suggests that ECT can be particularly effective in cases where patients do not respond to medications or display dangerous behaviors. Significant reductions in aggression have been reported post-ECT, along with improvements in mood and overall functioning.

**Conclusions:** Although ECT remains controversial due to concerns about cognitive side effects, advancements in its application have enhanced its safety. This review emphasizes the need for further.

**Disclosure of Interest:** None Declared

## EPV1657

### A case report of anticonvulsive effects of CBD under ECT treatment

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doi: 10.1192/j.eurpsy.2025.2132

**Introduction:** Cannabidiol (CBD) is a non-psychoactive cannabinoid with therapeutic potential in various fields, such as its effect on mental health or antiepileptogenic, among others. For this reason, the interest in research on the potential effects of this substance is booming and the sale and consumption by the general population is increasing.