

relapses, we asked for a prolactinemia test and complete hormonal panel. His prolactin levels were elevated at 59.33 ng/ml (normal range: 15-25 ng/ml), compared to normal baseline levels in previous admissions. The hormonal screening revealed hypogonadotropic hypogonadism. The patient was treated with antipsychotics (haloperidol initially, then switched to clozapine) and sedatives to manage his symptoms and agitation. His prolactin levels were successfully managed with medication, returning to within the normal range (the second measurement being done 8 weeks after the switch to clozapine). The delusion of pregnancy resolved after several weeks of treatment with clozapine. The patient was discharged with ongoing outpatient care to monitor his schizophrenia and prolactin levels.

**Conclusions:** This case report highlights the association between delusion of pregnancy and hyperprolactinemia in a male patient with schizophrenia. The findings suggest the potential link between these two conditions. Further research is necessary to elucidate the underlying mechanisms and develop evidence-based clinical management.

**Disclosure of Interest:** None Declared

## EPV1760

### Hostility and negative expectations about the future in mental disorders

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**Introduction:** Studies shows a connection between hostility and the severity of psychopathological symptoms. When psychopathological symptoms (mainly depressive) are expressed, hostility towards one's own "I", other people, and generalized impersonal hostility in the form of a sense of injustice, ill will of the surrounding world, and a negative assessment of the subjective future are combined. the connection between hostility and a negative assessment of the future requires empirical confirmation.

**Objectives:** The aim of the study was to analyze the connection between hostility and a negative assessment of the future.

**Methods:** N=37 people hospitalized in the clinic of the *Mental Health Research Center* (16 men and 21 women) with a diagnosis of schizophrenia and affective spectrum. Methods: SCL-90R, BPAQ-24 (Buss, Perry), All the subjects wrote a short essay "Me, others, the world", attitude to the future was assessed by a group of answers in the modified Sentence Completion Test (Sacks, Levy). The subjects were divided into three subgroups: "positive expectations of the future" (N=16, mean age 24.87±8.20), "neutral future" (N=10, mean age 21.89±8.08), "negative assessment of the future" (N=11, mean age 21.45±4.82). The presence of a trend in changing parameters depending on the attitude to the future - Jonckheere-Terpstra Test, comparison of subgroups by parameters of qualitative assessment of the essay - Chi-Square Tests were used.

**Results:** The analysis showed an increase in "hostility" (BPAQ-24) with a change in attitude to the future from negative to neutral and positive. With a negative attitude towards the future, there were the highest rates of "hostility" (24.82 ± 4.26, 17.60 ± 5.58, 16.40 ± 4.63, Std. J-Tstat. = -3.44, p = .001). It was revealed that negative

expectations of the future are associated with the presence of problems in interpersonal relationships in the present, "Interpersonal Sensitivity" (SCL-90) is increased (10.82 ± 7.37, 7.00 ± 6.88, 4.87 ± 6.81, Std. J-Tstat. = -2.348, p = .019), individuals with high rates are distinguished by negative expectations regarding interpersonal interaction and any communications with other people. The analysis of the parameters of the qualitative analysis of the essays in the subgroups showed that only with a negative attitude towards the future there is a mention of the fragility and instability of the world (36%, p=.007), statistically more often mention the topic of suicide, death, "no place in this world" (80% compared to 16% and 22%, p=.049), the topic of "rejection" (p=.025), the frequency of expectation of a negative assessment of oneself by other people (, p=.004).

**Conclusions:** Results confirm the hypothesis about the relationship between hostility and a negative attitude towards the future and allow to assume that a common factor for both hostility and a negative attitude towards the future in mental pathology are problematic interpersonal relationships.

**Disclosure of Interest:** None Declared

## EPV1761

### The theme of death in texts written by patients with endogenous mental disorders

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**Introduction:** A specific attitude towards death is an important marker of suicidal risk. A freely written text can be considered as a variant of a projective test and can assess implicit attitudes toward death and suicide.

**Objectives:** The objective was to identify the psychological characteristics of the subjects using the theme of death in the texts.

**Methods:** 91 patients with schizophrenic and affective spectrum disorders (43 men and 48 women). The control N=98 (40 men and 58 women). All the subjects wrote a short essay "Me, others, the world", the presence of words from the thematic group "death" was assessed, Big Five Inventory (BFI) and SCL-90R were used. The question about the presence of suicidal thoughts was measured on a Likert scale.

**Results:** Control and clinical groups did not differ in the frequency of the topic of death (13.3% of the control and 16.5% in clinical group). However, patients wrote more often about themselves, while in control «death» was more often encountered when discussing problems of humanity, ecology, loneliness. The subjects from the clinical group showed low: "Extraversion" (48,86±10,07 and 44,72 ±10,44 for the control and clinical groups) (due to low "Activity", "Excitement seeking" and "Gregariousness"), "Conscientiousness" ("Neat" and "Decisiveness"), "Emotional Stability" (50,58±12,21 and 54,88±11,42) (due to "Tension", "Depression" and "Self-punishing"). Comparison of the subgroups that mentioned «death» (control and clinical subgroups) revealed no statistical differences in BFI (clinical subgroup demonstrated a more pronounced "insensitivity"). In general, all subjects (both healthy and clinic patients) with the topic of death differed from the group of subjects who did not touch death vocabulary: "Introversion" (47.66±9.77 and 40.58±13.45

for the subgroup without «death» and with the topic of death), «Attachment» ( $53,25 \pm 10,06$  and  $60,25 \pm 7,03$ ), high «Emotionality» ( $48,85 \pm 11,87$  and  $56,91 \pm 10,88$ ). A similar pattern is observed when comparing the subgroups «control without the theme of death» and «control with the theme of death». In the clinical group, it was shown that the topic of death is associated with a higher suicidal risk (the question about the severity of the intention to commit suicide, the average values are  $0,30 \pm 0,57$  and  $1,16 \pm 1,60$  for the «clinical subgroup without the topic of death» and «clinical subgroup with the topic of death», respectively).

**Conclusions:** The topic of death in control group indicates a conflict between introversion and social orientation, as well as an inability to control their emotions and impulsive drives and low self-esteem. In the clinical group, almost all of whose subjects differ from the healthy group by increased introversion and emotionality, mentioning the topic of death may be a marker of increased suicidal risk.

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## EPV1762

### Association between Schizophrenia and Violence: The Cage of Psychosis

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**Introduction:** In Spain, approximately 4% of the prison population suffers from severe mental disorders, with schizophrenia being more prevalent in this group compared to the general population. Although violent behavior is infrequent among individuals with schizophrenia, it holds significant clinical importance. Reoffending rates are low, and crimes are typically less severe. Comorbid substance abuse is also common.

**Objectives:** This study examines the case of a man with schizophrenia who committed homicide under the influence of drugs, highlighting the complex relationship between schizophrenia and violence.

**Methods:** We present the case of a 30-year-old man with no prior medical or legal history, sentenced to five years and nine months in prison for homicide (of his sister), resisting arrest, and minor injuries. The homicide occurred after the consumption of MDMA. The initial forensic report revealed no severe psychopathy and a preserved sense of reality, while the defense argued moderate impairment of cognitive and volitional faculties due to intoxication and extreme fatigue.

**Results:** After spending a few months in prison, he attempted suicide by hanging, which did not require admission and was considered reactive to a stressful life situation. During his incarceration, the patient exhibited progressive thought disorganization, eccentric behaviors, hallucinations, and delusional ideation unrelated to substance use. He also engaged in severe self-harm, requiring bilateral orchiectomy. Following this, he was diagnosed with schizophrenia and treated in a psychiatric unit. Since 2022, he has been included in the Integrated Care Program for Severe Mental Illnesses in Prison (PAIEM) and treated with extended-release paliperidone. After release, he was incorporated into the Continuity

of Care Program, maintaining regular consultations with psychiatry, nursing, and social work. He has integrated well into the psychosocial rehabilitation center, showing no behavioral disturbances. He reports almost complete amnesia of the offenses for which he was convicted and exhibits some indifference towards them. He continues to receive treatment and is diagnosed with schizophrenia, predominantly with negative symptoms.

**Conclusions:** This case underscores the need to adequately assess negative symptoms of schizophrenia and their impact on violent behavior. The successful transition of the patient from prison to a specialized center highlights the importance of continuous treatment and monitoring in cases of severe mental disorders. Effective management of treatment and post-prison follow-up is crucial for minimizing risks and promoting successful community integration.

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## EPV1763

### Shared psychosis at a distance: a case of telephone-induced Folie à Deux

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**Introduction:** Shared psychotic disorder (*Folie à Deux*) is a phenomenon in which one person adopts the delusions of another with whom they have a close relationship. This case is particularly interesting because the delusions primarily developed through telephone conversations between two sisters and were notably exacerbated when they reunited in person. The telephone-based relationship between the sisters raises questions about the psychological influence from a distance in the development of shared psychosis.

**Objectives:** To describe a clinical case of *Folie à Deux* in which delusion transmission occurred predominantly through telephone communication, highlighting the role of physical contact in the exacerbation of psychotic symptoms.

**Methods:** We present the case of a 59-year-old woman hospitalized for shared psychosis. Her sister, with whom she maintained a close relationship through frequent phone calls, had previously developed persecutory delusions related to a complicated divorce. Over the course of five years, the patient began to share the same delusions of persecution and surveillance that her sister transmitted over the phone. However, following a visit from her sister to Madrid in July 2024, the patient's psychotic symptoms intensified, leading to psychiatric hospitalization in the brief hospitalization unit (UHB), where antipsychotic and antidepressant treatment was initiated.

**Results:** The patient was admitted with persecutory delusions centered on alleged surveillance related to her sister's divorce, delusions that her sister initially developed and which they shared after years of phone conversations. During hospitalization, antipsychotic treatment was effective, leading to remission of the active psychotic symptoms. The patient demonstrated insight into her delusions, linking them to her sister's influence. As contact with her sister decreased and treatment was introduced, the psychotic