

Methods: Cognitive functions of patients who undergo ECT was assessed prior to start of treatment, midway of the course of treatment and after end of the course of treatment using Montreal Cognitive Assessment (MoCA). We did a retrospective analysis of MoCA scores of 15 patients who received bilateral ECT in 2017-2018. In order to assess the efficacy of ECT in the treatment of their illness, we did a retrospective analysis of Montgomery Asberg Depression Rating Scale (MADRS) scores of 18 patients who received bilateral ECT in 2017-2018.

Results: Only 7% of the patients who underwent ECT in our sample did have significant cognitive decline as per their MoCA scores. 28% of patients achieved complete remission in their depressive symptoms. 22% of patients continued on maintenance treatment. 95% of patients showed significant improvement in their symptoms following treatment with ECT where their symptoms reduced to either mild or minimal depressive symptoms.

Conclusions: Cognitive side effect was not a significant side effect in our sample of patients. We did see an improvement in cognitive function in a significant number of the sample of patients as they progressed with treatment, which coincided with improvement in their affective symptoms.

Keyword: ECT; MOCA; MADRS; Cognitive functions

EPP1077

Electroconvulsive therapy use in psychiatric hospitalizations - a nationwide descriptive study.

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Introduction: Despite being one of the oldest treatments in the field of Psychiatry, Electroconvulsive therapy (ECT) is used worldwide for various severe and treatment-resistant psychiatric disorders, establishing itself as one of the fastest and most effective treatments.

Objectives: The primary aim of this study was to describe a nationwide epidemiological perspective of the use of ECT in hospitalized psychiatric patients. The secondary aims were to characterize clinical and sociodemographic trends of hospitalized patients who needed ECT.

Methods: A retrospective-observational study was conducted using an administrative database which gathered all hospitalizations registered in Portuguese public hospitals from 2008 to 2015. We selected all hospitalizations with a procedure code 94.27 - Other electroshock therapy defined by the International Classification of Diseases version-9, Clinical Modification. The variables included in the study were birth date, sex, residence address, primary and secondary diagnoses, admission date, discharge date, length of stay (LoS), discharge status from each single hospitalization episode.

Results: There were a total of 879 hospitalizations with ECT during the 8-year period of the study. Most of the hospitalizations occurred in female patients (53.4 vs 46.6%), belonging to the age group of 51-70 years old, with a mean age of 50.5 years old. The median LoS was 43.0 days with an IQR of 27.0-68.0 days. The specific primary diagnosis most frequent in all hospitalizations was Major depressive disorder, recurrent episode representing 19.6% of all ECT related hospitalizations.

Conclusions: In Portugal most of the patients who received ECT were women above middle age, and depressive disorders were the most common indication.

Keywords: Electroconvulsive therapy; Mental Health Data; Neuromodulation

EPP1078

Vns as alternative treatment for maintenance ect in a patient with treatment resistant depression - a case study

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Introduction: Vagus Nerve Stimulation (VNS) is a neuromodulatory intervention which involves attaching an electrode to the vagus nerve. Studies investigating VNS as an acute treatment method for treatment resistant depression have shown very limited results, however there are data suggesting that VNS might have a beneficial effect on a longer term. There are also studies that suggest that a history of response to ECT might indicate a higher response rate to VNS. VNS was suggested as treatment for a patient who received maintenance ECT for treatment resistant unipolar depression during 9 years. 3 months after VNS was implanted, ECT was stopped due to the Covid-19 pandemic. In this case study we will review the patient's response to treatment with VNS and the sudden stop of long-term ECT treatment.

Objectives: To review the response to acute and maintenance ECT and VNS in this patient diagnosed with treatment resistant unipolar depression, and to compare this to the data suggesting VNS as an alternative treatment method for maintenance ECT in patients with treatment resistant depression.

Methods: Using the extensive data collected during the patient's treatment, we will review the clinical response and side-effect burden of this patient to acute and maintenance ECT and to VNS.

Results: The patient showed a vast improvement in depressive symptoms a few months after start of VNS treatment, while long-term maintenance ECT was stopped.

Conclusions: This patient's response to VNS supports the data suggesting VNS as an alternative treatment method for maintenance ECT in patients with treatment resistant depression.

Conflict of interest: This patient received VNS treatment as part of a study conducted in our centre (UPC KULeuven) with support of Livanova. Me nor my supervisor (prof. Sienaert Pascal) are directly involved in this study. I have received no financial or other compensation fr

Keywords: VNS; ECT; Treatment Resistant Depression; Case study

EPP1080

Tourette's syndrome: Alternative approaches to a clinical case refractory to conventional therapy

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