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#### EV0750

### A Delphi study to establish an expert consensus opinion on risk factors for type 2 diabetes, and potential complications of diabetes, including brain health associations

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**Introduction** Type 2 diabetes (T2DM) has a multifactorial aetiology, and wide-ranging potential health complications, including brain health associations.

**Objectives** A number of diabetes risk factors and complications have a strong evidence base. This study will address ambiguity in the literature regarding others.

**Aims** Results will inform development of a questionnaire for use among the public and individuals with diabetes, assessing knowledge of diabetes and brain health associations and the role of modifiable risk factors. Aiming to ultimately inform effective preventative strategies for both dementia and depression.

**Methods** A systematic literature review preceded this two-round modified Delphi study. Respondents rated their agreement with risk factors for T2DM, and potential complications of diabetes on an e-questionnaire.

**Results** Of 46 international experts invited to participate in round-one; 14 responded (30.4%). Thirteen respondents (92.9%) completed round-two questionnaire. Consensus was pre-defined as 70% or more agreement between respondents on questionnaire items. On completion, 11/18 risk factor items for T2DM met consensus criteria however 'depression' did not. Of diabetes complication items, 13/16 met consensus criteria (see Table 1).

**Conclusions** Study results indicate that international experts consider a number of brain health complications to be associated with diabetes. Results will be incorporated in a diabetes and brain health knowledge questionnaire for use among vulnerable populations.

**Table 1** A sample of diabetes complications post round-two of Delphi.

	Median	Interquartile range	Percentage agreement
Kidney damage	5	0	100%
Eye damage	5	0	100%
Stroke	5	1	92.3%
Depression	4	2	92.3%
Dementia	5	1	92.3%
Memory problems	5	1	92.3%

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#### EV0751

### Relevance of group devices in the psychological treatment of elderly patients

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The work aims to demonstrate the relevance of groupal psychotherapies and think tanks in elderly patients, suffering from various psychiatric disorders. The exhibition focuses on the consideration of a structural problem of aging seen from the point of view of defences and identifications, which some authors call "characteropatización of old age", resulting in stagnation in the development of treatments in therapeutic individual devices.

The paper postulates that groupal devices are more effective in treating patients older than treating individual cutting of different theoretical clinical guidelines, as are more suited to the production of mobilizing stiffened defences and crystallized identifications, won both by various effects of the death drive, which result in specific libidinal stasis, especially expressed in the substitutive formation called by some authors "letting die".

The statement places the group devices in the Freudian model of cell tissues, herringbone in various texts of his work, but expressed in more detail in "Beyond the Pleasure Principle", which postulates as the cause of the vital tension constellations composed of different but related cells. Communication is illustrated with clinical vignettes both therapeutic groups and think tanks, as with clinical material from patients who have received both individual treatment and group result of therapeutic work done in the Casabiarta institution during the last ten years. As a conclusion and opening of new questions, the text pans across different forms of resistance indication of group psychotherapy, which rooted in many current social representations of the group and the therapeutic.

**Keywords** Caracteropatización; Defense; Identifications; Device group.

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#### EV0752

### Anxiety and depression among elderly hemodialyzed patients

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**Introduction** The haemodialysis, one of the main treatment modalities of chronic renal failure, imposes a great psychosocial burden on elderly patients, which may cause many psychological impacts.

**Objective** The aim of this study was to screen anxiety and depression in elderly patients on haemodialysis, taking into account factors that may contribute to.

**Methods** Our study was transversal, descriptive carried out among 38 elderly patients aged more than 60 years with chronic kidney failure on haemodialysis. The structured questionnaire used in this study was gathered information on socio-demographic and disease characteristics. We used the hospital anxiety and depression scale (HADS) to access anxiety and depression.

**Results** The mean age of our sample was 71 years. The sex-ratio ( $\sigma/\varphi$ ) was 1.92, patients were mainly married (73.7%), and have a low school level (76.3%). The mean haemodialysis duration was 5 years  $\pm$  4.68. The most common cause of renal failure was polycystic kidney disease (18.4%), diabetes (15.8%), while in 28.9% the cause was unknown. Anxiety was found in 18.4% of patients and it was associated with both low school ( $P=0.02$ ) and socio-economic

level ( $P=0.04$ ). The prevalence of depressive symptoms was 42.1%. It was correlated to the unknown cause of kidney failure and the short duration haemodialysis ( $P=0.03$ ).

**Conclusion** These data suggest that depression and anxiety are highly prevalent in elderly patients with renal failure on dialysis. This result shows the need for interdisciplinary teamwork in improving the quality of life of those patients.

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#### EV0753

### New insights in the pharmacotherapy of psychosis: The example of Parkinson's disease psychosis

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**Introduction** With 10 million of patients across the world, Parkinson's disease is the second most common form of neurodegeneration, after Alzheimer's. Among half of patients develop psychotic symptoms, such as visual hallucinations and delusions, which are correlated with higher rate of placement in nursing home, are difficult to treat and severely affect quality of life, making Parkinson's disease psychosis (PDP) a major public health issue.

**Objectives** The aim of this study is to identify treatment options that could be used to treat PDP and clarify underlying pathophysiology.

**Method** We conducted a literature review on Pubmed, Google scholar and Cochrane library, using a combination of the following: "Parkinson's disease Psychosis" "visual hallucinations" "Pimavanserin" "Clozapine" "atypical anti-psychotics" 120 articles were screened.

**Results** Considering that hallucinations arise from overactivation of dopaminergic receptors, treatment options include reducing the dopaminergic drugs used to control motor symptoms; using atypical anti-psychotics such as Risperidone, Olanzapine, Quetiapine, which often results in the worsening of extra-pyramidal symptoms. Another option is the use of low doses of Clozapine, which has been proven efficient with no worsening of non-motor symptoms, suggesting the implication of other pathways, such as serotonin. Finally, Pimavanserin, a 5-HT<sub>2A</sub> receptor inverse agonist, without any dopaminergic activity, has been demonstrated to be effective in the treatment of PDP, well tolerated and easy to use.

**Conclusion** Serotonin inverse agonists represent a major breakthrough in the pharmacotherapy of PDP, and may lead the way to changes in the treatment of schizophrenia and other psychotic disorders.

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#### EV0754

### Visual hallucinations in elderly people: Early dementia, psychosis or Charles Bonnet syndrome? Review and case report

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**Introduction** Charles Bonnet Syndrome (CBS) is an uncommon disease that involves visual hallucinations in visually impaired individuals, in absence of cognitive impairment or psychiatric illness, although some authors propose CBS as an early marker of dementia. **Objectives** Show the importance of differential diagnosis in individuals with presence of visual hallucinations, with distinction of CBS from others psychiatric or organic disorders such as hypnagogic and hypnopompic hallucinations, epileptic phenomenon, Parkinson disease, dementia, delirium tremens or late-onset psychosis.

**Methods** Literature review about visual hallucinations in people with psychiatric illness, dementia or in absence of these status, followed by a case report of a patient who met criteria for CBS.

**Results** Eighty one-years-old female with no previous psychiatric illness, experience suddenly visual hallucinations (animals, insects) with secondary anxiety, fear and insomnia as well as disruptive behaviour (throw lye to kill the animals) and delusional interpretations of the hallucinations considering them as a divine proof. Clinical exam, neuroimaging tests and SPECT confirmed just a minimal cognitive impairment nor suggestive of dementia. She had personal history of cataracts and macular degeneration, with no other medical condition. Olanzapine was prescribed but it was withdrawn because of adverse effects. Later, haloperidol was introduced with well tolerance and symptom's recovery ad intergrum.

**Conclusions** Charles Bonnet syndrome is a rare condition that may sometimes be the beginning of a dementia. Medical evaluation and complementary tests help differential diagnosis in order to reject others psychiatric/somatic disorders. Neuroleptic and anti-epileptic treatment should be useful to control symptoms.

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#### EV0755

### Mistreatment of Alzheimer's patients: Predictive factors

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**Introduction** Violence against elderly persons is an intricate social, legal and ethic issue. Alzheimer's patients are the most vulnerable individuals to mistreatment and neglect. The aggressor can be even the main helper of the patient. We noticed a wide underestimation of this phenomenon, which remains taboo subject in our society.

**Objectives and methods** – The aim of our study is to identify predictive factors of mistreatment of Alzheimer's patients through a prospective and descriptive study, within patients following in the department of neurology in Razi's hospital.

– we evaluate cognitive function (MMSE) and the importance of behavioural disorders.

– we explored helper's socio-demographic characteristics and the quality of aid relationship.

– anger and hostility within relationship were estimated through family attitude scale.

**Results** Our sample accounts 60 informal caregivers predominately female (91.7%) with an average age of 49.67 years, mostly are married (71.66%) and jobless (38.88%):

– in 78.3% of cases, caregivers spent about 12 to 24 hours per day with Alzheimer's patient.