

obtained through medical records and clinical interviews with the patient.

**Results** A 50-year-old Brazilian woman, with a previous episode of postpartum depression, presented with paranoid psychosis six months after initiating HCV antiviral therapy. Psychotic symptoms consisted of persecutory delusions and auditory hallucinations and developed together with agitation and aggressive behavior. Psychiatric hospitalization was required and psychosis resolved with discontinuation of therapy and initiation of risperidone. Laboratory tests and brain images were of no help in the etiologic investigation.

**Conclusions** There are many drugs known to possibly cause neuropsychiatric symptoms. It is the job of every physician to be aware of this hypothesis especially in cases with acute onset and atypical presentations.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EV1051

### Use of cannabis components in the treatment of mental disorders

C. Tsopelas\*, M. Dimitraka, P. Ntounas, A. Gatos-Gatopoulos, D. Karadima, T. Charalampos

Psychiatric Hospital of Attica, 5th Dept of Acute Admissions, Athens, Greece

\* Corresponding author.

**Introduction** There is evidence that supports the increased risk of developing psychosis or psychotic like symptoms in vulnerable populations after use of cannabis. Cannabis' main psychoactive component,  $\Delta$ 9-tetrahydrocannabinol (THC), induces acute psychotic effects and cognitive impairment. But there is also evidence to suggest that molecules in the cannabis plant could have an antipsychotic affect.

**Aims** In this review we are trying to explore the possibilities of cannabis use as a therapeutic agent in mental disorders.

**Methods** Thorough research of the main databases, and web search engines for relevant studies, using appropriate keywords. We scrutinize them independently, before reaching consensus about appropriateness.

**Results** In animal models repeated treatment with cannabis constituent cannabidiol CBD or the atypical antipsychotic clozapine attenuates or reverses the schizophrenia-like behavioral disruption.

In humans there are data that CBD counteracts psychotic symptoms and cognitive impairment associated with cannabis use. Also CBD may lower the risk for developing cannabis use associated psychosis. There are opposite effects of CBD and THC on brain activity patterns in key regions implicated in the pathophysiology of schizophrenia, such as the striatum, hippocampus and prefrontal cortex.

**Conclusions** The possible mechanism of action of CBD is not fully clarified, as it may involve anti-inflammatory or neuroprotective properties. These initial clinical studies with CBD treatment of psychotic symptoms argument the potential of CBD as an effective antipsychotic compound. Mechanisms responsible for these effects need to be further investigated.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EV1052

### Nicotine as therapeutic agent in treatment of mood disorders

C. Tsopelas\*, N. Petros, D. Maria, P. Dimitris, G.G. Angelica, K. Dimitra, T. Charalampos

Psychiatric Hospital of Attica, 5th Department of Acute Admissions, Athens, Greece

\* Corresponding author.

**Introduction** The plant that has as active ingredient nicotine was chewed or smoked for many years from American natives, for its therapeutic properties. Nowadays after the extensive negative attitude towards smoking, the main provider of nicotine, researchers are now pointing out the therapeutic possibilities of nicotine in mood disorders, as a substance that is acting in the acetylcholine receptors in the brain.

**Aims** In this review we are trying to explore the possibilities of nicotine use as a therapeutic agent.

**Methods** We did a detailed research of the main medical databases, and web search engines for relevant studies. We scrutinize them independently, before reaching consensus about appropriateness for inclusion in the study.

**Results** Diadermal administration of nicotine has a positive effect in depressive disorder in 3–8 days, an effect that in one study was reversed after cessation of nicotine. Patients with depression and/or healthy subjects show improvement of attention and working memory after diadermal use of nicotine. Research is not conclusive in the sustainability of these positive affects as other researchers emphasize their short effect in mood.

**Conclusion** Nicotine presents as part of novel and promising therapeutic agents with complex interactions with other neurotransmitters in the brain. Before condemning nicotine along with smoking we should acknowledge the potential use of nicotine as a therapeutic compound since research shows that some of these positive effects appear not only to smokers after abstinence but also to non-smokers.

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## EV1053

### Awkward movements: Extrapyramidal symptoms in a group of patients treated with aripiprazole long acting injectable

C. Victor<sup>1,\*</sup>, S. Berta<sup>1</sup>, T. Ivan<sup>2</sup>, O. Silvia<sup>3</sup>, C. Sandra<sup>3</sup>, M. Estanislao<sup>3</sup>, M. Luis Miguel<sup>3</sup>, J. Moreno<sup>1</sup>

<sup>1</sup> Parc de Salut Mar, INAD, Hospital del Mar, Barcelona, Spain

<sup>2</sup> Parc de Salut Mar, INAD, Barcelona, Spain

<sup>3</sup> Parc de Salut Mar, INAD, CSMA, Santa Coloma de Gramanet, Spain

\* Corresponding author.

**Introduction** Extrapyramidal symptoms are well known as side effects in therapy with antipsychotics. Explore this side effects is mandatory because they normally are a cause of treatment discontinuation or assess a change in medication. Some studies notice how long acting injectable antipsychotic cause less extrapyramidal symptoms than oral treatment, others does not find differences.

**Objective** The aim of this study is to analyze the extrapyramidal symptoms presented on a group of patients treated with aripiprazole long acting injectable (ALAI) follow-up in a mental health care center.

**Methods** Descriptive study of a group of patients treated with ALAI. To assess the possible extrapyramidal symptoms due to treatment we have used the Simpson-Angus Scale (SAS). The follow up was 3 months after initiation of treatment.

**Results** Six patients were included in the study, 2 women (33.3%) and 4 men (66.7%). The mean age of the sample was 37 years old. The different diagnoses of the group were 4 patients with psychotic disorder (66.7%; 2 schizophrenia, 1 schizoaffective disorder and 1 delusional chronic disorder) and the other 2 had an affective disorder (33.3%; both bipolar disorder). The average score for the SAS was 1.2 meaning normal results and therefore no significant extrapyramidal symptoms.