

patient, admitted to our psychiatric department with clinical presentation compatible with catatonia. To admission, she presented some typical complications resulting from long immobility such as pressure ulcers and nutritional deficiencies. During the hospitalization, she developed a urinary infection and there was the need to tube feeding. She was treated with benzodiazepines and improved. Further assessment revealed dementia.

**Conclusions:** Catatonia in dementia is not uncommon, although it is an underdiagnosed syndrome, and when treated early and properly it has a good prognosis.

**Disclosure:** No significant relationships.

**Keywords:** Catatonia; demencia

## EPV0941

### Depression and quality of life in Tunisian institutionalized elderly subjects

M. Jabeur\*, L. Gassab, F. Hamdane, B. Amemou, F. Zaafrane and L. Gaha

Research laboratory LR 05 ES 10 "Vulnerability to Psychotic Disorders", Faculty of medicine, University of Monastir, Psychiatry Department, University Hospital Of Monastir, Monastir, Tunisia

\*Corresponding author.

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**Introduction:** Depression in the elderly is common and closely interrelated with the deterioration of the quality of life, especially in the institutionalized elderly.

**Objectives:** In this work, we propose to determine the prevalence of depression in the elderly in institution, to assess their quality of life and to evaluate the correlations between depression and the quality of life.

**Methods:** Our study concerned 30 elderly subjects institutionalized at the retirement home(Sousse, Tunisia). Three validated Arabic version scales were used: The 30-item GDS (Geriatric Depression Scale), the MMSE (Mini Mental State Examination) and the SF36 (assessing the quality of life).

**Results:** The mean age of our population was  $75 \pm 7.3$  years, the sex ratio was 1.73. The prevalence of depression was 37%. The elderly had a cognitive impairment in 16.7%. The mean global SF36 score were 11.2, attesting an altered quality of life in all our subjects: the mental component (9.43) were more altered than the physical one (13.03). No correlation between depression and quality of life was found. Depression was significantly correlated with the presence of a medical history ( $p=0.05$ ). Depression had a negative and statistically significant correlation with the physical score of SF36 ( $r=-0.41$ ,  $p=0.02$ ) and tended towards significance for the "general health" dimension of SF36 ( $r=-0.32$ ,  $p=0.08$ ).

**Conclusions:** Our study shows a high frequency of depression in the institutionalized elderly as well as a deterioration in their quality of life. Depression is strongly linked to deterioration in physical condition. Our results underline the influence of somatic diseases as a major risk factor for depression in the elderly.

**Disclosure:** No significant relationships.

**Keywords:** elderly subject; institution; Depression; Quality of Life

## EPV0943

### Othello syndrome: ¿Psychosis or dementia? A case report.

A. Franco Soler<sup>1\*</sup>, P. Coucheiro Limeres<sup>1</sup>, A. Cerame<sup>1</sup> and H. Torregrosa Martínez<sup>2</sup>

<sup>1</sup>Hospital Universitario José Germain, Psychiatry Department, Leganés, Spain and <sup>2</sup>Hospital Universitario Príncipe de Asturias, Neurology, Alcala de Henares, Spain

\*Corresponding author.

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**Introduction:** Othello syndrome (OS) is a psychiatric condition consisting of delusional jealousy, and irritability. It is often associated with psychiatric or neurological disorders. The most common are delusional disorder and dementia.

**Objectives:** The purpose of this poster is to examine the phenomenon of OS and its etiopathogenesis throughout a case report.

**Methods:** We present the case of a 78-year-old male patient who was treated in our department due to delusional jealousy and depressive symptoms. The patient has a medical history of cardiac events in the past, being stable at the current moment. We performed a detailed psychiatric and physical history paying special attention to personality traits in the past. The patient was administered Mini Mental State Examination and CamCog (subscale of Camdex).

**Results:** According to him and his family our patient had neither episodes of jealousy nor affective disorders. His results were: 18 in MMSE and 57 in CamCog. Both compatible with a dementia course.

**Conclusions:** Attending our results we inferred that the OS belongs to a dementia clinical picture instead of a psychotic disorder. Therefore we decided to treat the patient with neuroleptics, with partial improvement, and to start cognitive stimulation treatment in a day centre and a short term psychological family intervention to help the family to understand and cope with the course of dementia. Thus, clinicians should keep in mind the possible organic origin of OS, especially in elderly persons, to develop an appropriate individual and familiar case approach.

**Disclosure:** No significant relationships.

**Keywords:** Othello syndrome; CamCog; Dementia; delusional jealousy

## EPV0944

### Homebased screening for cognitive impairment due to dementia

T. Hansen<sup>1\*</sup>, F. Waldorff<sup>2</sup>, K. Andersen<sup>3</sup> and E. Stenager<sup>1</sup>

<sup>1</sup>The Region of Southern Denmark, Research Unit, Mental Health, Children And Adult, Aabenraa, Aabenraa, Denmark; <sup>2</sup>University of Copenhagen, Department Of Public Health, The Research Unit For General Practice And Section Of General Practice, København K, Denmark and <sup>3</sup>Region of Southern Denmark, Department Of Mental Health Odense, Odense, Denmark

\*Corresponding author.

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**Introduction:** Dementia develops slowly and insidiously and causes cognitive impairment. The diagnosis is pivotal for relevant treatment and care. However, 50,000 people are estimated to have undiagnosed dementia in Denmark, while 36,000 are diagnosed.