

EPV0525

A patient's trajectory with autism spectrum disorder leading to forensic psychiatric institutionalisationJ. A. Déri^{1,2*}, A. Dvorak¹ and R. Oberndorfer^{1,2}¹Forensic Therapeutic Centre Göllersdorf, Göllersdorf and ²Clinical Division of Social Psychiatry, Department of Psychiatry and Psychotherapy, Medical University of Vienna, Vienna, Austria

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Introduction: Autism-spectrum-disorder (ASD) is a heterogenous neurodevelopmental condition with a wide range of symptoms. Typical deficits, such as impairment in social communication and interactions, can lead to violent behaviours. However, ASD is often underdiagnosed and little is known about patients with ASD in forensic institutions.

Objectives: To highlight the diagnostic challenges and offending behaviour of people with ASD in the context of the criminal justice system (CJS) through a case report.

Methods: The case report is based on exploration, third party anamnesis, medical documentations and court files

Results: A 25-year-old man was placed in detention in 2021 after having committed a dangerous threat to unknown persons and was considered not guilty by reason of insanity. Since early childhood the patient presented with extreme mood swings and impulsive-aggressive outbursts that led to criminal mischief later on. During elementary school he developed concentration problems as well as specific learning deficits. Due to his deviant social behaviour, he was rejected from his peer group. Over the course of the years, he showed no significant responses to different psychopharmacological treatment approaches. His social anxiety grew and ultimately, he started experimenting with various drugs and drinking excessive amounts of alcohol, which induced multiple psychotic episodes. Due to the psychotic exacerbations, he was repeatedly admitted to psychiatric units for acute treatment, however the autistic disorder remained untreated. At the time of the crime an independent psychiatric assessor diagnosed schizophrenia simplex and multiple drug abuse. The patient had been in psychiatric treatment since the age of 5 and received multiple diagnoses such as combined personality disorder, different subtypes of schizophrenia, ADHD, Tourette syndrome, depressive disorder and ASD at the age of 14. Nevertheless, prior to his detention he had never received a complex therapy focusing on his ASD. According to the verdict he was admitted to a medium secure forensic ward in Lower Austria, where he was treated with antipsychotic and anxiolytic medication. Furthermore, he participated in the day-structuring treatment program ensuring routine.

Conclusions: Neurodevelopmental disorders such as ASD often impose a diagnostic challenge, particularly without intellectual disability. This can lead to under- and misdiagnosis, inadequate treatment or even criminal behaviour. Impaired theory of mind, poor emotional regulation and problems with moral reasoning should be recognized and treated specifically early on to prevent further damage to both the individual and society.

Disclosure of Interest: None Declared

EPV0526

Epidemiological, clinical, and forensic approach to a series of defendants examined in criminal psychiatric expertiseM. Kacem*, W. Bouali, M. Abdelaziz, S. Brahim and L. Zarrouk
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Introduction: The transgression of the law can be a deliberate act by a lucid adult, but it can also be the result of a deficiency in judgment and discernment due to lack of age or insanity. Psychiatric expertises are more and more solicited in the penal field with the objective of identifying the causal link between mental illness and the criminal act.

Objectives: The objective of this work was to give an overview of the subjects expertised, the offences and the pathologies encountered through the report of a psychiatric expertise activity in criminal law.

Methods: It is a retrospective descriptive study carried out on the criminal psychiatric expertises made for a forensic act in the psychiatric department of Mahdia during the period from January 1, 2003 to March 30, 2022.

Results: In total, we collected 101 defendants. The average age of our study population was 35±12.07 years. The majority of our study sample was male (98%), from an urban area (50%). 46.6% had primary education and only 11.2% had higher education. The defendants were single in 57.8% of the cases, and almost half (45.7%) had no occupation. Two-thirds of the accused (61.2%) had experienced emotional deprivation at a young age. The problematic use of psychoactive substances was found in 10.3%, as well as alcohol consumption in 46.6%. Moreover, 39.7% of the patients had a personal psychiatric history and 19% had been incarcerated at least once. The forensic acts were mostly against people (62.9%) dominated by physical aggression (33.6%) followed by homicide or its attempt in 19% of the cases. The majority of patients were not related to their victims (62.1%). The nosographic diagnosis found was a personality disorder in 32.75% of cases, followed by schizophrenic disorders in 22.4% of cases.

Conclusions: Psychiatric expertise is a useful, complex and noble clinical act. Determining the predictive factors of a possible acting out allows to specify the objectives of interventions aiming at limiting the acts of violence, hospitalizations and incarcerations of patients suffering from mental disorders.

Disclosure of Interest: None Declared

EPV0527

Fatal pulmonary embolism related to anti-psychotics: forensic implications. About four autopsy cases with review of the literatureM. Kacem*, W. Bouali, Y. Mahjoub, S. Brahim and L. Zarrouk
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Introduction: The association between the intake of antipsychotic drugs and the occurrence of thromboembolic complications is widely described in the literature. The occurrence of this complication may call into question the medical responsibility of the attending physician.

Objectives: The objective of this work is to describe the pathophysiological mechanisms involved in the occurrence of thromboembolic complications in a patient under antipsychotic treatment, whether or not associated with physical restraint and to discuss the forensic implications.

Methods: Our study is retrospective on cases of fatal pulmonary embolism, discovered at autopsy, in connection with the taking of antipsychotics. The autopsies were carried out in the Department of Forensic Medicine of the Tahar Sfar University Hospital in Mahdia. The cases were collected over a period of 04 years. A review of the literature was carried out. We only selected articles published until February 2021 and dealing with cases of patients on antipsychotics, diagnosed with pulmonary embolism by performing a chest CT scan or during an autopsy.

Results: 915 autopsy cases were performed during the study period. Twenty cases of pulmonary embolism, discovered at autopsy, were collected. Four cases were related to the taking of antipsychotics (incidence 0.004%), including two men and two women, aged between 25 and 52 years. They were all on antipsychotic treatment for at least 5 years, with the exception of one case who was put on 3 antipsychotics, 7 days before his death, with indication of physical restraint. After analysis of the memorial data, the external examination and the autopsy, the results of additional examinations, the death was attributed, in the 4 cases, to a massive fibrino-cruoric pulmonary embolism. A selection of 45 studies regarding thromboembolic complications associated with taking antipsychotics, was included in the final review.

Conclusions: The reported cases provided additional evidence on the involvement of antipsychotics in the occurrence of thromboembolic complications. Psychiatrists should be careful when prescribing these treatments. The establishment of therapeutic guidelines, taking into account the thromboembolic risk factors, becomes essential, in order to avoid the occurrence of a complication which could engage both the vital prognosis of patients and the responsibility of the physician.

Disclosure of Interest: None Declared

EPV0528

Study of the sociodemographic, clinical and criminological characteristics of Tunisian female offenders

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Introduction: The psychopathology of female crime perpetrators is not well understood since female criminality rates have remained distinctly lower than male criminality.

This study draws on over 20 years of psychiatric expertises to identify sociodemographic, clinical, and forensic characteristics of female perpetrators.

Objectives:

- To describe the epidemiological and clinical profile of female offenders examined for criminal psychiatric expertise.
- Describe the criminological and forensic characteristics of these women.

Methods: Retrospective and descriptive study, which focused on 56 criminal psychiatric expertise files of female offenders, examined at the psychiatric department "C" at the CHU Hedi Chaker in Sfax, Tunisia, over a period of 24 years.

For each offender, we examined the expert report and the judicial research report. We then transcribed the socio-demographic and clinical information, as well as the criminological and forensic characteristics, onto a pre-established form.

Results: The accused women in our study had an average age of 35 years and 06 months, and 67.86% of the cases were under 40 years of age, with an educational level no higher than primary school in 62.5% of cases. They were unemployed in 71.4% of cases. Among the accused examined, 76.8% had mental disorders, including 46.6% with personality disorders, 16.3% with intellectual disability, 16.3% with bipolar disorder, 9.3% with depressive disorder, 9.3% with psychotic disorder, and 2.3% with substance use disorder (anxiolytic). We recorded 55.4% offences against persons, including 37.5% homicides and attempted homicides, and 44.6% offences against property, including 23.2% thefts. Dementia in the legal sense was identified in 30.4% of cases. Bipolar disorder accounted for 41.1% of legally demented subjects.

Conclusions: It emerges that the profile of the female criminal is that of a woman under 40, with a low educational and economic level, and most often with an antisocial personality or intellectual disability. It would therefore be important to step up primary prevention work by better educating these at-risk women and to combat the factors contributing to dangerousness among the mentally ill by optimizing their psychiatric care.

Disclosure of Interest: None Declared

EPV0529

The results of Wisconsin Card Sorting Test in patients under forensic observation of their mental states in violent and non-violent subgroups

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