

DP can manifest isolatedly, but it is more commonly associated with other diseases. Etiologically, several factors can intercede: biological, psychosocial and cultural factors, iatrogenic factors and coenaesthesia processes.

Demographically, about 50% of the patients are 20-40 years old and the most common psychiatric diagnoses are schizophrenia, bipolar disorder and depression.

Concerning the treatment, it is essential to exclude non-psychiatric causes and treat those, if present. After doing so, the therapeutical approach can be non-pharmacological, using psychotherapy or electroconvulsive therapy, although the latter has inconclusive results and sometimes it only remits the comorbid depressive symptoms; or pharmacological using 2nd generation antipsychotics.

In general, there is now a good response in 50-64% of the cases (Bera and Sakar, *Indian J Psychol Med* 2015;37(2)131-137) (Yadov *et al*, *Indian J Psychol Med* 2012;34(1) 82-84).

**Conclusions:** DP can be a psychiatric diagnosis itself or a manifestation of other psychiatric or non-psychiatric disorder so we must be alert to make a precise differential diagnosis. Its genesis is multifactorial and that must be taken into account when thinking about its treatment approach.

In the past, the prognosis of the DP wasn't good, but in the recent literature it was found a good response in more than half of the patients treated accordingly.

**Disclosure of Interest:** None Declared

## EPV0984

### Psychosocial difficulties as a predictor of overall functioning in individuals with schizophrenia: a case-control study

L. Mustoo Bašer\* and O. Aydın

Psychology, International University of Sarajevo (IUS), Sarajevo, Bosnia and Herzegovina

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1571

**Introduction:** Difficulties in emotional, cognitive, behavioral, and social functions are considered important factors of global functioning in schizophrenia.

**Objectives:** A better understanding of difficulties in the mentioned facets might lead to the development of better-adjusted treatment approaches for individuals with schizophrenia, as well as impacting to reduction and elimination of stigma in Bosnia and Herzegovina's wider social context in relation to difficulties spanning the daily life of individuals with schizophrenia.

**Methods:** Thirty- one patients with schizophrenia (SCH), and 30 healthy controls (HC) participated in our study. The Adult Self-Report (ASR), Achenbach's scale for adults (ASEBA- Achenbach System of Empirically Based Assessment), and World Health Organization, Disability Assessment Schedule 2.0 (WHODAS 2.0) tests were administered.

**Results:** Groups differed in age, education, employment status, marital status, friendships existence, and disability existence.

According to the regression equations, thought problems predicted Getting around; withdrawn predicted Getting along with people and Life activities- Household, School/Work in the group of individuals with schizophrenia.

**Conclusions:** Our study revealed the role of different facets of difficulties in the prediction of global functioning in SCH. These findings might directly point to the importance of eliminating stigmatizing beliefs in a wider social context, developing techniques for improving the social support segment, focusing on healthy family functioning, as well as investigating job presence and perceived quality of life.

**Disclosure of Interest:** None Declared

## EPV0985

### Cognitive impairment assessment in schizophrenia: purposely a case

N. Ogando Portilla<sup>1\*</sup>, S. M. Bañón González<sup>1</sup>, B. Gamo Bravo<sup>1</sup>, M. E. González Laynez<sup>2</sup>, M. A. Urbanos<sup>3</sup> and M. M. Cortés<sup>4</sup>

<sup>1</sup>Psychiatry, Hospital Universitario Infanta Sofía, Madrid; <sup>2</sup>Psychiatry, Hospital universitario de Toledo, Toledo; <sup>3</sup>Psychiatry, Hospital Universitario La Princesa, Madrid and <sup>4</sup>Psychiatry, Hospital General Universitario de Alicante Dr Balmis, Alicante, Spain

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1572

**Introduction:** Significant and measurable cognitive symptoms are present at the onset of the disorder and these remain stable in the subsequent period between 2 and 5 years. Their deterioration increases with the course of the disease. Attention, concentration, psychomotor speed and resolution of conceptual tasks are usually affected and are more significant in the presence of positive symptoms.

**Objectives:** Sometimes, the typical positive or negative symptoms of the disease do not adequately reflect the severity of cognitive impairment. Measuring this deterioration can be very relevant when evaluating the severity and the prognosis of the disorder.

**Methods:** 31-year-old male with a previous diagnosis of schizophrenia of 4 years of evolution. He gets a maintained treatment with amisulpiride 400mg with an apparent good response. A single hospitalization at the onset of the disease. An assassination attempt on his mother is done by suffocation with a pillow and observing a significant cognitive impairment despite an apparent control of the symptoms of schizophrenia.

**Results:** An exhaustive neuropsychological evaluation is carried out, observing a very important cognitive deterioration that had not been previously detected and allowing a pharmacological adjustment of the underlying disease with global improvement of the patient.

**Conclusions:** It is very important to evaluate the patient as a whole without forgetting the frequent cognitive damage that these patients can have. An intense neuropsychological study can be very useful to evaluate the prognosis and adequate treatment of the patient in order to reduce serious risks.

**Disclosure of Interest:** None Declared