

## EPV0956

### A phenomenological approach to the affective core of Delusional Disorder.

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**Introduction:** According to current diagnostic systems, affective symptoms do not represent a fundamental criterion for the diagnosis of DD. However, numerous studies have highlighted frequent comorbidity between DD and Mood Disorders and have elucidated the importance of the affective state in the development and persistence of delusions. Thus, some factor analysis studies have identified the existence of a depressive dimension in DD, suggesting a substantial psychopathological heterogeneity in DD. However, these important affective features have not evaluated from a phenomenological point of view and in their relationship with delusions.

**Objectives:** The aim of the present study is to investigate the relationship between personality, trait affectivity and severity of delusions in patients with Delusional Disorder (DD).

**Methods:** Thirty-two outpatients affected by DD were administered the Structured Interview for DSM-IV-TR Personality Disorders (SIDP-IV), the Pathological Narcissism Inventory (NPI), the Positive and Negative Affect Schedule (PANAS) and the Psychotic Symptom Rating Scale (PSYRATS). Next, we analysed the prevalence of personality disorder in our sample of patients with DD and studied the correlations between the severity of delusions and the different affective variables. Finally, we obtained a multivariate explanatory model of the severity of the delusions.

**Results:** The severity of delusions was directly associated with "Grandiose Fantasy" item of narcissistic personality and inversely related with the feelings of shame, fear and guilt. In the multivariate model, the feeling of shame was the only independent variable capable of accounting for the severity of the delusions, that, in DD patients, would lie on an affective core of shame.

**Table 2.** Pearson correlation coefficient

VARIABLES	DRS total score
<b>GRANDIOSE FANTASY</b>	<b>p = 0.045</b>
<b>SHAME</b>	<b>p = 0.048</b>
<b>GUILT</b>	<b>p = 0.016</b>
AGITATION	p = 0.049
FEAR	p = 0.041

**Table 3.** Standardized coefficients in linear standard regression (DRS)

	DRS: total score R <sup>2</sup>	β	t	p
Step 1	0.157	-	-	-
<b>GRANDIOSE FANTASY</b>	-	0.396	1.89	<b>0.048</b>
Step 2	0.460	-	-	-
<b>GRANDIOSE FANTASY</b>	-	0.291	1.65	<b>0.116</b>
<b>SHAME</b>	-	-0.560	-3.17	<b>0.005</b>

**Conclusions:** The severity of delusional beliefs in DD patients would lie on an affective core of shame upon predisposing personality traits. These findings could help to develop a psychotherapeutic approach for delusional patients focused in the feeling of shame.

**Disclosure of Interest:** None Declared

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### Daytime/nighttime levels of serum IL-33 in schizophrenia at hospital admission and before discharge

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**Introduction:** It has been reported an inflammatory state in schizophrenia, with altered levels of some cytokines (Zhou et al. Cytokine 2021; 141:155441). Recent publications have shown the importance of IL-33, a member of the IL-1 cytokine family which acts as an alarmin (Han et al. Neurosci Bull 2011; 27, 351-357). The role of this cytokine as a biomarker has been investigated in schizophrenia (Koricanic et al. Front Psychiatry 2022; 13, 925757). However, results are controversial. Some studies have not found significant associations between IL-33 and chronic schizophrenia (Campos-Carli et al. Compr Psychiatry 2017; 74 96-101), while other papers have reported increased levels (Kozłowska et al. J Psychiatr Res. 2021; 138 380-387). In all these studies, levels of IL-33 were measured in a single daily measure, so that it has not been studied if IL-33 has changes during hospitalization.

**Objectives:** To study the serum level of IL-33 at 12:00 and 00:00 hours in schizophrenia patients at admission and before hospital discharge.

**Methods:** Fifteen inpatients with diagnosis of paranoid schizophrenia according to ICD-10 criteria were studied. Patients were hospitalized at the University Hospital of the Canary Islands psychiatric ward because of an acute relapse. A total of four blood samples were taken from each patient: at 12:00 and 00:00 hours the day after admission and at 12:00 and 00:00 hours the day before discharge. Serum IL-33 levels were measured by ELISA techniques. Daytime and nighttime IL-33 serum levels at admission and discharge were compared using a non-parametric Wilcoxon signed-rank test.

**Results:** In table 1 the results of the comparison of IL-33 at admission and discharge are presented. There is a significant reduction of IL-33 levels at 00:00 h. at discharge in comparison with the IL-33 levels at 00:00 h. at admission (p=0.028). No other statistically significant differences were observed.