

## Abstract

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**Objectives:** Reporting novel AE leading to non-adherence to improve clinical care,

**Methods:** Case analysis.

**Results:** 43yo male patient with Bipolar NOS, Generalized Anxiety Disorder, Social Anxiety, and ADHD was effectively treated with lamotrigine 400mg qd, aripiprazole 10mg qhs, Adderall XR 15mg qam and lorazepam 0.5mg 1-2 pills bid PRN. Prior psychotropics included lithium and buspirone, which were both discontinued secondary to AEs (sexual dysfunction). Medical problems included hyperglycemia/hyperlipidemia/overweight. Standard blood chemistries were all within normal limits excluding fasting blood sugar 100mg/dL and cholesterol 219mg/dL. This patient denied any historical urinary problems (hesitancy/urgency/incontinence/nocturia). When seen in follow-up with increased anxiety associated with newly diagnosed colorectal cancer, the patient's use of anxiolytics were further reviewed. The patient had been responsive to lorazepam for 8 months but admitted having discontinued this secondary to new-onset urinary urgency. The patient described pre-lorazepam urinary frequency as every 4 hours. On lorazepam, he needed to urinate hourly. When off lorazepam his urination pattern returned to baseline. Anxiety and mood levels, without use of lorazepam, did not alter frequency. The patient served as an on/off/on/off example of probable lorazepam-induced AE.

**Conclusions:** This case reports lorazepam-induced urinary urgency resulting in treatment non-adherence with delayed reporting to the clinician. Potential benzodiazepine-induced urinary urgency should be a clinical consideration.

**Conflict of interest:** No

**Keywords:** Adverse Drug Reaction; Lorazepam; Urinary Urgency; Treatment Non-Adherence

## Psychophysiology

### EPV1091

#### The impact of trait anxiety and autism traits on olfactory abilities of the general population

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**Introduction:** Autism Spectrum Disorders (ASD) are characterized by atypical sensory processing, including in olfactory domain. However, since ASD is a complex condition characterized by marked heterogeneity in severity and symptoms, variables with significant manifestation in this condition, such as trait anxiety, may have been adding confounds to results. Importantly, perceptual abnormalities found in ASD seem to extend for the general population, varying with the expression of autism traits.

**Objectives:** To explore the role of trait anxiety and autism traits on olfactory performance in the general population.

**Methods:** Participants were 97 adults who did not present health conditions significantly impacting olfactory function. They filled Autism Spectrum Quotient and State-Trait Inventory for Cognitive and Somatic Anxiety. Also, they completed the Sniffin Sticks Extended Test, to evaluate odor threshold, discrimination and identification abilities.

**Results:** Three multiple hierarchical regression models were performed to explain the scores in olfactory abilities. Four predictors were included in each model - somatic and cognitive anxiety, social skills and attention to detail, after controlling for sex in the first step. The models explaining odor threshold and identification were not statistically significant. The model for odor discrimination explained 18.5% of variance, being sex ( $b=.226$ ), somatic anxiety ( $b=.279$ ) and attention to detail ( $b=.294$ ) significant predictors.

**Conclusions:** Our results add new insights about the role of somatic anxiety and attention to detail in discrimination abilities of the general population, suggesting that physiological activation may disrupt olfactory perception regarding discrimination domain specifically, while the reverse seems to occur with high attention to detail.

**Conflict of interest:** No

**Keywords:** Autism; autism spectrum disorders; anxiety; olfaction

### EPV1095

#### Neurobiological effects of two physiotherapy programmes on somatic and neurophysiological manifestations show the relevance of physiotherapy in the management of children with attention-deficit/hyperactivity disorder.

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**Introduction:** ADHD is a neurobiological disorder; common symptoms are inattention, hyperactivity, impulsivity, deficient emotional self-regulation often associated with motor problems. Despite motor impairments, somatic and neurophysiological features frequently occur in ADHD, they are not included in the diagnostic criteria.

**Objectives:** To assess basal somatic features (joint hypermobility, motor-control, fine motor skills, general-coordination, autonomic response, biotipology) in the presence of ADHD and compare them with the reference values. To analyse short-term effects of two physiotherapy programmes on physiological/neurophysiological variables and their persistence.

**Methods:** Randomized double-blind, clinical-trial conducted ( $n=48$ ) in ADHD children divided into two intervention groups (IG). Interventions: IG1: massage; IG2: manual-cranial-therapy. Both groups received the standard multimodal treatment plus 4 sessions according to each group. Variables: vital-signs