

**Conclusions** This work underscores the caregiver's role as a facilitator of child integration and response to sensory stimuli and its importance on the development of behavioral and emotional disorders. This can help early diagnosis and better treatment who prevent future psychiatric conditions.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0052

### **Pediatric autoimmune neuropsychiatric syndrome (PANS), developmental regression and autism**

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**Introduction** Pediatric autoimmune neuropsychiatric syndrome (PANS) is a term used to describe a clinical picture which includes sudden onset of psychiatric symptoms and a possible autoimmune genesis. The sudden decline in neuropsychiatric functioning as well as the multiple combinations of symptoms may lead to a clinical phenotype similar to that in infantile autism (IA) with regressive features. We are conducting a study with the aim to evaluate a diagnostic test for PANS currently marketed by Moleculera Labs. All patients in Sweden who had taken the test ( $n = 154$ ) were invited to the study.

**Objectives** The aim of the study is to characterize a subgroup of patients with IA within the PANS diagnosis study.

**Methods** Participants ( $n = 53$ ) were examined for psychiatric and somatic symptoms and evaluated for PANS caseness by an experienced psychiatrist. Because the criteria for entering the study was having taken the diagnostic test for PANS, the participants in the study comprise a group with mixed symptoms.

**Results** Twelve participants had IA. Eleven of these reported a developmental regression with loss of abilities. Two of the IA patients also fulfill criteria for PANS. Eight of the IA patients had been treated with antibiotics for psychiatric symptoms and 4 reported a positive effect of this treatment. Nine of the patients had elevated test results suggesting possible PANS according to Moleculera Labs.

**Conclusions** Very early onset on PANS may be phenotypically similar to IA with regressive features. Further analysis of the immunological attributes of patients with autism with regressive features is warranted.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0053

### **Psychoaffectives repercussions of autism on parents**

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**Introduction** Caring for a child with autism is a stressful experience for parents. The daily stress of this handicap has a major impact and triggers in the parents a series of adverse psychological reactions.

**Aim** To reveal sociodemographic characteristics of parents of autistic children and to estimate the prevalence of anxiety and depressive symptoms among these parents.

**Methods** A cross-sectional study conducted among parents of autistic children supported by four of autistic children rehabili-

tation centers under the Tunisian Association for the Promotion of Mental Health. Data were collected through a questionnaire to explore the sociodemographic data of parents of autistic children. Depressive symptoms were assessed by the Beck scale and anxiety symptoms by the Hamilton scale.

**Results** Fifty-two parents were collected. The middle age was 35.73 years. They lived in an urban area in 96% of cases. The majority had an average socioeconomic level (88.4%). The respective rates of depressed or anxious parents as Beck scales and Hamilton were 48% and 23%. The association between depressive and anxious symptoms was found in 19%. In addition, depression was more common in mothers ( $P < 10^{-4}$ ) and anxiety was also more evident among mothers ( $P = 0.01$ ).

**Conclusion** The presence of an autistic child causes profound changes in families and can be a source of tension and stress. The anxious and depressive impact on parents is important and frequent. The intervention that designs the psychiatrist to help children with autism should necessarily include an action for parents.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0054

### **Efficacy of the “cooperative assessment” diagnostic procedure to early improve acute symptoms in a sample of adolescents with anxiety and mood disorders**

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**Introduction** Anxiety and mood disorders are common in adolescence and predict poor mental health outcomes and low quality of life in adulthood. Although early intervention seems to be critical, dropouts in the early stages of treatment are frequent and associated with low insight and severe symptoms. Therefore, a diagnostic assessment phase aimed to increase insight and early reduce symptoms appears to be essential in adolescents.

**Objectives** The objective of this study is to demonstrate that the diagnostic method Cooperative Assessment is able to early reduce symptoms in adolescents with anxiety and mood disorders.

**Methods** A sample of 88 patients, aged 14–19 years were included. All were recruited at the first visit and evaluated with the Cooperative Assessment. This manualized procedure was created from principles of collaborative and therapeutic assessment and aim to involve the patient in a co-developed diagnosis thor-

ough the collaborative use of test results. Patients were evaluated before (T0), in the middle (T1) and after (T2) the assessment using CGI, GAF, HAM-A, HAM-D and MRS scales.

**Results** Eighty-eight adolescents, 56.8% females, diagnosed with anxiety (47.7%) and mood disorders (52.3%) completed the protocol. HAM-A, HAM-D, MRS, CGI and GAF significantly improved at T1 and T2 with respect to T0 (T0: HAM-A  $17.31 \pm 8.22$ ; HAM-D  $16.97 \pm 8.37$ ; MRS  $5.78 \pm 6.17$ ; GAF  $59.3 \pm 11.06$ ; CGI  $3.63 \pm 1.35$ ; T2: HAM-A  $11.41 \pm 6.82$ ; HAM-D  $11.1 \pm 6.91$ ; MRS  $3.82 \pm 3.87$ ; GAF  $67.5 \pm 10.76$ ; CGI  $3.03 \pm 1.26$ ;  $P < 0.001$ ; Wilcoxon signed-rank test for repeated measures).

**Conclusions** Cooperative assessment is able to early improve symptoms in adolescents with mood and anxiety disorders.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0055

### Organizational skills training for children with ADHD

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**Introduction** In addition to problems with inattention and hyperactivity, children with ADHD show poor organizational skills required for managing time and materials in academic projects. Poor organizational skills are associated with academic underachievement as well as psychosocial, occupational and economic difficulties. Behavioral approaches for ADHD are effective in reducing hyperactivity symptoms and behavioral problems, but the effects on academic functioning have been modest. An increasing emphasis on treatment of organizational skills has emerged in recent years, as difficulties with time management and organization of materials tend to persist and increase with age despite medication and behavioral treatments.

**Objectives** The primary objective is to investigate whether organizational skills training has a positive effect on organizational skills. The secondary and exploratory objectives are to investigate the effect on ADHD symptoms, adaptive functioning, academic performance and cognitive functions with a 24 weeks follow up.

**Aims** Our goal is to provide cost-effective group-based treatment for children with ADHD and their parents. This will be the first randomized and controlled trial of organizational skills in Denmark.

**Methods** Participants are included in two sites in Southern Denmark and will be randomized to Organizational skills training or treatment as usual. Organizational skills training will be provided in a group format for children and parents over 10 weeks.

**Perspectives** Given the strong association between organizational skills and functional outcome, it is very important to address organizational skills in children and adolescents with ADHD as organizational skills deficits hinder the academic performance of even gifted students with ADHD and increase with age.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0056

### Children with somatic symptoms disorders and disruptive behavior disorder: Which is the role of anger to caregivers?

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**Introduction** The quality of adult-infant interactions represents a critical context in which child adaptation problems could evolve, and child psychopathology could develop. Literature has investigated the role of attachment to caregivers, nevertheless, there is a paucity of studies on middle-childhood and early adolescence in patients with somatic symptoms disorders and disruptive behavior disorders.

**Objective** This study investigates the attachment to caregivers in children with somatic symptoms disorders and disruptive behavior disorders, focusing on the role of Anger to mothers and fathers.

**Aims** The aims are to verify the presence of: – high frequency of insecure attachment;

- an overrepresentation of attachment disorganization;
- high levels of Anger to caregivers.

**Method** Fifty-six patients with somatic symptoms disorders, and 42 patients with disruptive behavior disorders, aged from 8 to 15, are administered the child attachment interview.

**Results** Findings show: – Insecure attachment in more than half of the patients;

- a significant presence of disorganized attachment with respect to both parents;
- higher levels of anger to father in children with somatic symptoms disorders.

**Conclusion** Considering the attachment to have a regulatory function, the knowledge of the different attachment strategies in middle-childhood and early adolescence may enhance our understanding and improve the management and the treatment of patients with somatic symptoms disorders and disruptive behavior disorders.

**Disclosure of interest** The author has not supplied his/her declaration of competing interest.

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#### EW0057

### Disruptive behavior disorders in childhood and adolescence: Attachment models and post-traumatic symptomatology

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**Introduction** In line with a consistent literature, young patients with disruptive behavior disorders in childhood and adolescence have experienced some traumatic events, such as abuse, rejection and violence assisted. Recent studies are focusing the attention on the role of attachment and post-traumatic symptomatology for a better evaluation of this clinical condition.

**Objective** This study investigates attachment models and post-traumatic symptomatology in young patients with disruptive behavior disorders.

**Aim(s)** The following objectives are set by the present study: – to evaluate attachment models in a group of children diagnosed with disruptive behavior disorders;

- to evaluate their post-traumatic symptomatology;
- to test the extent of the association between post-traumatic symptomatology and attachment organization in young patients with disruptive behavior disorders.

**Method** Forty-two Italian patients aged from 8 to 15 previously diagnosed with disruptive behavior disorders are compared to 42 healthy control subjects. We administer the child attachment interview and trauma symptom checklist for children-adolescent.

**Results** Insecure attachment are found in more than half of the patients diagnosed with disruptive behavior disorders and disorganization are highly over-represented. Furthermore, low levels of post-traumatic symptoms are found in young patients with disruptive behavior disorders.