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communication and behaviour. Timely identification of ASD is pivotal for effective intervention. However, significant gaps persist in our understanding of early signs and biomarkers, particularly among infants with older siblings already diagnosed with ASD. Furthermore, factors during the perinatal and neonatal period remain underexplored.

Objectives: This systematic review aims to investigate early autism markers within this specific cohort and assess their potential impact on intervention strategies.

Methods: A thorough search of electronic databases, including PubMed, PsycINFO, and Scopus, was conducted, initially identifying 161 relevant papers related to ASD and resilience published from 2013 to 2023. After excluding studies focused on environmental determinants of resilience in ASD, 75 papers remained. We concentrated on studies examining early identification of autism, especially in infants with older siblings with ASD, biomarker discovery, or predictive factors within this unique population. The search strategy employed a diverse set of keywords encompassing ASD, genetics, neurobiology, and the perinatal period to ensure comprehensive coverage of pertinent studies. Quality assessment of each study followed standardized criteria, and data synthesis utilized a thematic analysis approach.

Results: Our systematic exploration revealed a spectrum of early markers associated with ASD in high-risk infants, spanning behavioural, neurodevelopmental, genetic, and perinatal domains. Recognizing these early indicators offers promise for timely and potent intervention strategies, potentially refining long-term outcomes for children at risk of ASD.

Discussion: The synthesis of existing research in this systematic review underscores the significance of studying early markers within high-risk populations. Early intervention, guided by these markers, holds the potential to enhance the quality of life for at-risk children with ASD and their families. This review contributes to our understanding of the early identification of autism and emphasizes the imperative need for continued research in this critical area.

Conclusions: This systematic review sheds light on the current state of research on early signs and biomarkers of autism in infants with older siblings diagnosed with ASD. The findings carry significant implications for the development of targeted interventions that can be implemented at an earlier stage of development. Future research should further investigate these markers and their potential role in guiding early and effective intervention strategies. Keywords: Autism Spectrum Disorder, early signs, biomarkers,

Keywords: Autism Spectrum Disorder, early signs, biomarkers, infants, older siblings, early intervention, high-risk population.

Disclosure of Interest: None Declared

EPV0168

Food intake restriction in patient with autism spectrum disorder and Moebius syndrome, a strong association. A case report

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Introduction: A 7-year-old male diagnosed with autism spectrum syndrome and moebius syndrome was admitted to the psychiatric inpatient unit for a 3-week history of food restriction

Objectives: To show the importance of exploring symptoms of autism in patients diagnosed with moebius syndrome in order to optimize the intervention of the difficulties that may arise.

Methods: Case report and literature review

Results: This is a patient with a history of Moebius Syndrome, who required trauma surgery for a clubfoot in April 2019. In early childhood he needs early psychomotor care. He has an IQ of 91. A diagnosis of autism was made in 2018 highlighting high difficulty for social interaction and communication, with repetitive patterns of behavior and marked restricted interests. The patient came to the emergency room after 3 weeks of food restriction. His parents explain that about a month ago the patient witnessed one of his classmates having an episode of vomiting. Since then he has been afraid that he might vomit. They explain that he constantly asks about food expirations, needing to ask before each meal if it will sit well in his stomach. He has noticeably decreased the amount of food he eats and is becoming more selective with food. In the last week he has lost 2 kilograms. During the hospitalization we worked with the patient on his fears about intakes, achieving a weight recovery and normalizing his eating habits.

Conclusions: This case points out the association between Moebius syndrome and autism spectrum disorder. In addition, it reflects the importance of early diagnosis, since in this case it was essential to know the patient's tendency to literalism and rigid thinking in order to receive effective treatment to achieve renutrition. Moebius syndrome is a rare congenital disorder with a prevalence of less than 0.05%, characterized by congenital facial paralysis associated with absence of abduction of the eyes due to alterations of the VI and VII cranial nerves. It presents multiple craniocephalic, musculoskeletal, neurological or ophthalmological manifestations. Different studies have found an association between autism spectrum disorder and Moebius syndrome, with comorbidity between 25-40%, varying according to the studies.

Disclosure of Interest: None Declared

EPV0169

Vortioxetine as an effective drug in the treatment of depression in adolescents with long QT index. A case report

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Introduction: This is a 13-year-old female patient admitted to the psychiatric unit active suicidal ideation.

Objectives: the objective is to show through a clinical case how vortioxetine can be safe in adolescents.

Methods: Case report and literature review

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Results: She has a history of daily consumption of at least 2 units of cannabis per day. She presents high emotional distress secondary to academic failure, consuming the substance as a coping strategy. Due to prohibition and control by her parents, the patient stopped taking the substance, presenting severe depressive symptoms, selfinjury and suicide ideation. For this reason she is admitted to the inpatient psychiatric unit. The electrocardiogram performed on admission shows a corrected QT index of 524. Exploring physical symptoms, she recognized episodes of syncope and palpitations. Coordination was made with cardiology, who performed an echocardiogram with normal results and began follow-up with them without prescribing medication. It was agreed not to use drugs that could prolong the QT index. Evaluating the clinical situation, it was decided to start treatment with Vortioxetine up to 10 mg. With this treatment there was no worsening of the electrocardiogram and the patient's mood improved, anxiety and ideas of death were remitted Conclusions: This work aims to show how vortioxetine has been effective and safe at the cardiological level in the case of moderatesevere depression in an adolescent with prolonged QT index

Disclosure of Interest: None Declared

EPV0170

Psychopharmacological management in patients with Di George syndrome

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Introduction: It is widely described in the scientific literature that patients who suffer from some type of congenital syndrome such as Di George Syndrome are more likely to present some type of psychopathological alteration during their development that may require intervention and treatment by infant and juvenile mental health teams in coordination with neuropediatrics (1). On this occasion, we will present the clinical case of a patient who regularly attends psychiatry consultations for management of anxious symptoms with impulse control deficits associated with intellectual disability, diagnosed since childhood with tetralogy of Fallot and later with Di George syndrome. In this type of case, treatment is usually considered taking into account possible comorbidities at the organic level (since there may be cardiological involvement, which can be an added difficulty when taking into account the adverse effects of some psychotropic drugs) (2).

Objectives: This is followed by the presentation of the clinical case, which can serve to exemplify this type of case and clarify any doubts that may arise regarding treatment.

Methods: Presentation of the clinical case and review of updated scientific literature on the subject.

Results: Patient who first came to the infantile-junior consultations at the age of 8 years due to delay in the acquisition of verbal language and impulsivity. The patient had a history of pediatric follow-up since birth for different physical symptoms that finally led to the diagnosis of Di George syndrome.

Given the difficulties he presented both at home and at school, different psychometric tests were performed and it was determined that it could be beneficial to initiate treatment with extended-release methylphenidate. Prior to treatment, psychomotor restlessness (without aggressiveness) and difficulty in concentration prevailed, which improved significantly after upward adjustment of the dose to a guideline corresponding to his age and weight. It was not necessary in this case to administer other treatments (the possibility of starting Aripiprazole in case of episodes of agitation was considered, but it was not necessary). The patient has continued to be monitored by cardiology to assess the possible side effects of the treatment (since it can increase heart rate and blood pressure (3), but so far no complications have been detected).

Thanks to psychotherapeutic and educational intervention, language acquisition was achieved, although to date he still requires support due to the difficulties he still presents.

Conclusions: It is important to take into account the possible side effects of psychopharmacological treatment in patients with an associated congenital syndrome. Intensive and comprehensive follow-up by psychiatry and pediatrics (and later by their primary care physician) should be performed.

Disclosure of Interest: None Declared

EPV0171

Case-study: Patient with acquired epileptic aphasia in childhood

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Introduction: Acquired epileptic aphasia or Landau-Kleffner syndrome (LKS) is a disorder with onset in the childhood between the ages of 2 and 8 years. The main defining psychopathological symptom of Landau-Kleffner syndrome is the acquired aphasia with epileptiform electroencephalographic abnormalities. The aphasia has both receptive and expressive features. The onset is usually subacute and the course is usually progressive with spontaneous improvements and exacerbations. The electroencephalographic abnormalities include pathological findings in the temporal and parieto-occipital brain regions.

Objectives: An 11 year old girl with generalized tonic-clonic and partial seizures is referred to our child and adolescence outpatient service due to language impairment. Her first generalized seizure has been at the age of 11 months old, caused by high temperature. The presence of articulation difficulties has raised suspicion for intellectual disabilities. She has been diagnosed with Epilepsy, grand mal seizures and has had continuous treatment with sodium valproate since the age of 3 years.