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; MRS5.78 \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; MRS3.82 \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.

Conclusion This study suggests that attachment organization may be a fundamental element to be assessed in the evaluation of disruptive behavior disorders in children and adolescents. Nevertheless, traumatic experiences do not seem expressed through psychic symptoms. The clinical implications are discussed.

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

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EW0058

Impulsivity in adolescent with depressive disorders

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Introduction However, impulsivity is more likely to be present in externalizing disorders, little focus seems to have been made on the research of impulsivity in depression.

Objective On this study, we sought to investigate impulsivity among adolescent with Depressive disorder compared to a control sample.

Subjects and methods Employing a matched case-control study, participants included 100 adolescents divided into two groups: 30 adolescents (12 to 17 years) with depressive disorder and a control sample of 70 adolescents. Participants were recruited during a period of 2 years (2015, 2016). Depressive disorder patient were drawn from the consultation unit or inpatient unit of the department of child psychiatry in Sfax, Tunisia. Controls were recruited from two secondary schools and they haven't depressive symptoms according to the child depression inventory (CDI). Impulsivity was evaluated in the two groups by the Barratt Impulsiveness Scale (BIS-11), an instrument designed to measure trait impulsivity.

Results Adolescents with depressive disorder displayed significantly higher total BIS-11 impulsivity scores than controls $(71.6\pm16\ \text{vs}\ 61.6\pm9;\ P=0.003)$. They scored significantly higher than the controls on motor (P=0.0001) and attentional impulsivity (P=0.006). There was no difference in non-planning Impulsivity between the two groups. Motor impulsivity was high in adolescents with history of suicide attempt.

Conclusion Our findings suggest that trait impulsivity is increased among adolescents with depressive disorder. Impulsivity seems to be a risk factor for suicide attempts, so it that should be systematically evaluated in depressive disorder.

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

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EW0059

Aerobic exercise training in children and adolescents with inflammatory bowel disease: Influence on psychological functioning, sleep and physical performance

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Background and aims Patients with inflammatory bowel disease (IBD) report increased mental health issues, poorer sleep quality

and less engagement in physical activity (PA). Standard treatment consists of immune modulating pharmaceuticals, though evidence is growing that aerobic exercise training (AET) might serve as adjuvant option to reduce disease symptoms and improve mental health. The aim of the present study was to investigate possible AET effects on psychological functioning, depressive symptoms, sleep and PA behavior in paediatric patients with IBD.

Methods Twenty-one paediatric patients with IBD and 23 gender and age-matched healthy controls (HC) were assessed. The IBD group was split into a "remission-group" (IBD-RE; n = 14) and an "active disease group" (IBD-AD; n = 7). All participants completed an 8-week AET exergame intervention reaching 60–80% of maximal heart rate for 5 days per week. At baseline and after 8 weeks, psychological functioning, depressive symptoms, objective sleep EEG, subjective sleep and objective and subjective PA were assessed.

Results AET significantly improved the exercise capacity of all participants. Self-reported fitness and daily PA behavior significantly increased in IBD-AD, but not in IBD-RE and HC. No improvements were observed for psychological functioning, depressive symptoms and subjective or objective sleep dimensions. Descriptively, the IBD-AD group reported lower psychological functioning and poorer subjective sleep quality.

Conclusions Results suggest that children and adolescents in an active disease state were at increased risk to descriptively report lower scores of psychological functioning and sleep. Further, an exergaming intervention has the potential to improve exercise capacity, self-reported fitness and daily PA.

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EW0060

Disturbed sleep and activity in toddlers with early signs of ADHD

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Introduction Attention-deficit-hyperactivity-disorder (ADHD) is a frequent psychiatric disorder present in childhood, where sleep-problems are a prominent, pervasive and clinically important feature. However, our understanding of whether sleep-problems mimic or exacerbate daytime ADHD-symptom expression remains insufficient.

Objective Research examining sleep and daily activity in toddlers with early signs of ADHD might help identify early risk factors.

Aims To investigate whether disturbed sleep patterns and daily

activity level is associated with early signs of ADHD in toddlers.

Methods Twenty-four toddlers from the Danish Odense Child Cohort scoring above the 93rd percentile on the ADHD scale of the Child Behaviour Checklist for ages 1½–5 were categorized as cases and compared to 25 age and gender-matched controls scoring below the 50th percentile. Daytime and nocturnal activity for 49 toddlers were assessed through seven days of actigraphy. Parents completed Children's Sleep Habits Questionnaire (CSHQ) and the ADHD Rating Scale IV Preschool Version (ADHD-RS).

Results Actigraphic data revealed an increased night-to-night variability, prolonged total sleep time, fewer sleep interruptions and fewer minutes in moderate-to-vigorous-physical activity (MVPA) in cases compared to controls. Increased night-to-night variability was found significantly associated with higher total scores on both the CSHQ and ADHD-RS. Further, fewer minutes in MVPA were associated with a higher parent-reported motor activity on the ADHD-RS.

Conclusion Findings show that early signs of ADHD are associated with irregular sleep patterns and lower daytime activity, as illus-