

EPV0810

Going through the adolescence with disabled sibling: resilience as a protective factor for the occurrence of internalizing and externalizing disorders in adolescents

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Introduction: Presence of the disabled child in the family poses many challenges for their siblings, especially in adolescence. Children with disabled siblings often receive less attention from family and friends, experience a sense of injustice and anger towards sick siblings, as well as they are more likely to experience various somatic complaints and higher levels of depression and anxiety. However, research shows that resiliency could be a protective factor associated with the functioning of children and adolescents in certain life events, such as sibling's disability, referring to good adaptation despite facing emerging adversities.

Objectives: Therefore, the aim of the current study was to examine the role of resilience as a possible protective factor for the occurrence of internalizing and externalizing disorders in adolescents having disabled sibling.

Methods: 175 diads of a healthy adolescent and one of its parents ($N = 350$) participated in the study. Participants were divided into two groups - 119 diads in the group with disabled sibling ($M_{\text{adolescent's age}} = 16.70$; $SD = .66$) and 56 diads in the group with a healthy sibling ($M_{\text{adolescent's age}} = 16.64$; $SD = .75$). The following measures were used in the study: Resilience Measurement Scale (SPP-18) and Child Behavior Checklist for Ages 6-18 (CBCL/6-18).

Results: The results showed no statistically significant differences in any of the measured resilience factors (optimistic attitude and energy, persistence and determination in action, sense of humor and openness to new experiences, personal competences and a tolerance for negative affect), in adolescents with disabled sibling, comparing to the control group. However, adolescents with disabled sibling were found to have a significantly higher risk of the occurrence of both, externalizing and internalizing disorders compared to adolescents with healthy siblings. Furthermore, findings of the study also confirmed that personal competences and a tolerance for negative affect predicts lower risk of the occurrence of internalizing disorders in adolescents having disabled sibling.

Conclusions: Our findings highlights that resilience may have important role in reducing the risk of the clinical problems occurrence in adolescents having disabled sibling. Therefore, comprehensive psychological support enhancing their personal growth and competence should be provided in the above group.

Disclosure of Interest: None Declared

Psychopharmacology and Pharmacoeconomics

EPV0811

The Application of Pharmacogenetic Testing in Psychiatry for Treatment-Resistant Disorders: Optimal Timing and Implementation, a literature review

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Introduction: Treatment-resistant psychiatric disorders present a significant clinical challenge, often requiring trial-and-error approaches to find effective therapeutic interventions. Pharmacogenetic testing has emerged as a promising tool to guide medication selection and dosing, potentially reducing the time to achieve remission and alleviating the burden of persistent symptoms. However, the optimal timing and integration of pharmacogenetic testing into psychiatric practice remain underexplored.

Objectives: Pharmacogenetic tests can identify individuals with genetic variants that may predict their response to psychotropic drugs, thus enabling a more personalized approach to treatment. Evidence suggests that early application of pharmacogenetic testing, particularly after the first failed medication trial, can substantially improve outcomes for patients with treatment-resistant disorders. Such timely intervention can inform drug choice and dosing, averting protracted periods of ineffective treatment and minimizing exposure to unnecessary side effects.

Methods: This review synthesizes current literature on pharmacogenetic testing in psychiatry, with a focus on its application in treatment-resistant mood disorders, schizophrenia, and other non-responsive psychiatric conditions. We examine the genetic polymorphisms that influence drug metabolism, efficacy, and the risk of adverse effects, particularly considering cytochrome P450 enzymes and receptor gene variations.

Results: Pharmacogenetic testing holds significant promise in psychiatry, especially for treatment-resistant disorders, by aligning genetic profiles with medication selection to enhance therapeutic efficacy. While cost and access remain barriers, the benefits of early testing support its integration into standard care protocols. Further research is needed to establish clear guidelines and to expand the genetic targets relevant to psychiatric pharmacotherapy.

Conclusions: Adoption of pharmacogenetic testing after the initial treatment failure offers a pragmatic balance between the practical limitations of universal screening and the clinical imperative to alleviate the substantial morbidity associated with treatment-resistant psychiatric conditions.

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