P01-352

MENTAL HEALTH PROBLEMS IN CHILDREN WITH PRADER-WILLI SYNDROME

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Introduction. Prader-Willi Syndrome (PWS) is a genetically determined neurodevelopmental disorder which occurs in approximately 1 in 22000 births.
Methods: Parents of subjects with genetically confirmed PWS (participating in the First National Irish PWS study) were asked to fill in a demographic questionnaire, The Child Behaviour Checklist 6-18 (CBCL/6-18), Brief Symptom Inventory (BSI). The age, gender and IQ matched control group was collected through Special Schools.
Results: Both groups (PWS and Controls) were comprised of 24 children. Internalizing problems score was higher in children with PWS than controls (T mean score (62.02 (SD= 10.17) vs. 58.13 (SD=7.53) p< . 05). The comparison of PWS and control group along CBCL/6-18 syndromes profiles indicated that children with PWS had more sever somatic problems (mean T 63.50 SD=8.41 vs. 56.13 SD=6.31, p< .05), social problems (mean T 64.71 SD=8.95 vs. 58.79 SD=9.41, p< .05), thoughts problems (mean T 67.71 SD=9.71 vs. 58.04 SD=7.17, p< .05) and were more withdrawn/depressed (mean T 64.04 SD=9.11 vs. 55.46 SD=6.48, p< .05). Borderline difficulties were detected for the affective, somatic and ADHD CBCL DSM orientated subscales in PWS group with PWS children having significantly more somatic (mean T 63.05 SD=8.33 vs. 52.00 SD=6.48, P< .05) and affective (mean T 66.22 SD=8.51, vs. 60.08 SD=6.829 P< .05) problems than controls. The analysis of BSI scales revealed that parents of PSW children in comparison to controls had more somatization, phobic anxiety, obsessive compulsion, and anxiety problems.
Conclusions: PWS represents a complex psychological disorder with multiple areas of disturbances.

https://doi.org/10.1016/S0924-9338(11)72063-6 Published online by Cambridge University Press