

EPP0183

Quality of life in a sample of schoolchildren with attention deficit and hyperactivity disorder.

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Introduction: Schoolchildren with ADHD have difficulties in different areas of their lives and sometimes need drug treatment. To comprehensively assess the response to treatment, it is interesting to use quality of life questionnaires where the child's perspective is assessed.

Objectives: To evaluate the quality of life in children with ADHD.

Methods: Sample of 14 schoolchildren from 11 to 14 years of age who attended a primary care check-up and were diagnosed with ADHD under treatment with long-acting methylphenidate. Parent informed consent. AUQUEI questionnaire Spanish versión

Results: Participants answered the questionnaire before starting treatment, at 3 months and 6 months. Four factors were differentiated with different scores: In the baseline results (before treatment), great difficulties were observed in academic performance in 90% (F4, mean 5), family life in 70% (F1, mean 5) and 30% % in leisure (F2, mean 10). After months of treatment, an improvement was observed in the scores regarding academic performance (F4, mean 13) and family life (F1, mean 9). The female sex presented better total scores in quality of life at six months evaluation.

Conclusions: The AUQUEI is an easy-to-apply questionnaire specific to the child population that provides us with a profile from the child's point of view and can be very useful in the primary care consultation in the comprehensive assessment of the quality of life of the schoolchild with ADHD and pharmacological approach.

Keywords: ADHD; schoolchildren; quality of life; methylphenidate

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Adolescents and dual pathology. Assessment of treatment with paliperidone palmitate long-term injectables.

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Introduction: Today cocaine use is very frequently associated with adolescents with maladaptive personality traits and impulse control disorder. It requires a multidisciplinary approach and individualized treatments to improve the clinic and achieve the abandonment of consumption.

Objectives: 1. To assess the efficacy of monthly injectable paliperidone palmitate treatment in controlling impulsivity. 2. Determine the consumption of toxins after treatment.

Methods: Sample: Adolescents, 14-17 years old, with a diagnosis of Personality Limit T and cocaine consumption who start treatment with Paliperidone Palmitate LD IM (50-100mg / month) in

monotherapy, with Diazepam 5mg if significant anxiety. Retrospective data collection. Plutchik impulsivity scale (IE) before starting treatment and at 3 months. Statistical analysis SPSS 20.0

Results: Twelve adolescents who met the inclusion criteria were included and 12 adolescents, 83% male, 16% female, completed the questionnaires. After its application and correction through non-parametric tests (N <30), scores in the EI questionnaire of a mean of 37.42 points in the pretest were observed, corresponding to a severe level of impulsivity; and a mean of 26.28 points in the post-test, compatible with a mild-moderate degree of impulsive symptoms. A decrease in the consumption of toxins was observed in 65% of the cases.

Conclusions: In our experience, the management of toxic consumption in adolescent population with severe impulsivity symptoms has great limitations due to the scarce resources available. The Palpitate of Paliperidone long-term treatment has been useful in the approach of serious registered cases, being associated with symptomatic improvement and decrease in consumption.

Keywords: Dual pathology; adolescent; cocaine; borderline personality disorder

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Mental health and climate change – a developmental life course perspective

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Introduction: Climate change is a major global public health challenge that will have wide ranging effects on human psychological health and wellbeing through the increased incidence of acute (e.g., storms, floods, wildfires), sub-acute (e.g., heat stress, droughts, lost agricultural yields) and long-term stressors (e.g., changes to landscapes and ecosystems). Children and adolescents are particularly at risk because of their rapidly developing brain, vulnerability to disease and limited capacity to avoid or adapt to climate change-related threats and impacts. They are also more likely to worry about climate change impacts than any other age group.

Objectives: To produce a new conceptual framework that describes climate change-related threats to youth mental health from a developmental life course perspective.

Methods: We critically review and synthesis literature documenting the pathways, processes and mechanisms linking climate change to increased mental health vulnerability.

Results: We show that climate change-related threats can additively and interactively increase psychopathology risk from conception onwards, that these effects are already occurring and that they constitute an important threat to mental health and therefore human capital worldwide. We then argue that birth cohort studies are uniquely positioned to examine climate change-related threats and that incorporating relevant measures into existing and planned birth cohorts is a matter of social justice and crucial long-term investment in mental health research.

Conclusions: Climate change is affecting the healthy psychological development of children and these risks are increasing worldwide.