

interpreted according to the Universal Declaration of Human Rights. As a direct consequence of the chronic psychological stresses experienced by children, adaptive disorders may appear, often characterised by symptoms of anxiety and depression. In addition, a multitude of neuropsychological consequences have been observed not only in the affected child, but also in the adult he or she will become.

Conclusions: Currently, there is a fervent debate about the validity and recognition of PAS as a diagnostic entity, spanning different disciplines, ranging from health to social and legal. In Europe, professionals in the scientific field have not reached an agreement regarding the approval of PAS. On the one hand, there are those for whom PAS is a verified phenomenon; on the other hand, there are those who flatly reject the existence of this phenomenon. The latter consider PAS an unscientific construct, referring to it as “court syndrome” or “patriarchal alienation syndrome”.

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EPV0180

PANS Case Report. Assessment and management implications for a Liaison Child Psychiatry Program

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Introduction: Pediatric acute-onset neuropsychiatric syndrome (PANS) was described in 2010 not related to streptococcus infection (as PANDAS is), and with a clinically distinct presentation, defined as: I) Abrupt, dramatic onset of obsessive-compulsive disorder or severely restricted food intake; II) Concurrent presence of additional neuropsychiatric symptoms; III) Symptoms are not better explained by a known neurologic or medical disorder.

Objectives: To describe the clinical features in a scholar boy who suffered an abrupt obsessive-compulsive disorder and highlight the need of an specific medical and psychiatric assessment and management from a multidisciplinary perspective.

Methods: Clinical case: A 7-year-old boy brought to the emergency department due to his repetitive and hyperactive behavior. After the admission in the hospital a clinical history was identified with PANS diagnostic criteria. He presented repetitive language and ritualized behavior, emotional lability and hyperactivity that has begun in an abrupt manner in the last 5 days. Family history, medical history and physical examination, infectious disease evaluation, neurological assessment and child psychiatric assessment were carried out during hospitalization. Coordination between neuropediatric consultant and child psychiatry was necessary.

Results: Combined treatment, psychopharmacologic and psychotherapeutic, was effective and the symptoms disappeared gradually in about three months.

Conclusions: In all school-age child presenting with abrupt obsessive-compulsive disorder or eating disorders a possible link to PANS should be evaluated and rule out. It is important a Liaison

Child Psychiatry program for a complete multidisciplinary evaluation and management of these patients.

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How countries' legislations can sustainably impact children's mental health

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Introduction: In a new era where, more and more children are standing up against governments concerning important subjects like climate change that will impact their physical health in a near future, it is time to question ourselves on all the other decisions that are being taken and that could have a sustainably high impact on some of our children's development and mental health. Unfortunately, many of those children are forced to remain silent - unable to express themselves - or are just not being heard - unable to gain international medias' attention - because of their social condition, cultural background, age or religion. But more sadly, most of them remain silent because they are just unaware of the consequences their living conditions or hardships might have on their future mental health, due to lack of information or education.

Objectives: Therefore, it is our responsibility as childhood experts and professionals to speak for those children who cannot, to stand up for themselves and promote the importance of putting their interest first no matter what.

Methods: We have chosen six different studies led in different contexts of struggle for children all around the world to illustrate the consequences on their development and mental health.

Results: We will communicate on the situations of children living in refugee camps, children living with their mothers in prison cells, children being forcibly separated from their mothers returning from Daesh territories in France or children being forcibly separated from their migrant mothers at the US border, we will describe the hardships but also the effective support provided to unaccompanied minors in Canada, and especially discuss with our cochair expertise how the issue is or could be different for them according to government policies and legislations.

Conclusions: By describing these different contexts of unstable living conditions or traumatic experiences orchestrated by government legislation regarding children care, we want to highlight the responsibility that every government legislation must consider when it comes to child care and how it should become an absolute priority.

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