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EV0589

Genetic determinants of psychic resilience after a diagnosis of cancer

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Introduction Co-morbidity between cancer and psychiatric disorders including adjustment disorder, depressive disorders or angst can seriously influence the prognosis and the quality of life of patients.

Aim The identification of the psychological and biological profile of patients at risk for such co-morbidity is not yet available. Classical candidate genes such as the BDNF, the 5-HTLPR and genes whose products are involved in inflammatory events have received some attention, but results are inconclusive.

Object and methods In the present review the association between cancer and psychiatric disorders is reviewed, a focus on the investigation of the Gene X environment and the epigenetic control over the activation of the HPA axis is proposed as a tool to refine the definition of the biologic profile at risk for co-morbidity between psychiatry and cancer.

Results and conclusion A number of genes and socio-demographic variables that may influence risk to suffer from a psychiatric disorder after a diagnosis of cancer is identified and discussed. The identification of such biologic and socio-demographic profile is instrumental in the identification of subjects at risk of a double diagnosis, both somatic and psychiatric. An early identification of such profile risk would pave the way to the implementation of early intervention strategies.

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EV0590

Is 22q11.2 deletion syndrome a genetic subtype of schizophrenia?

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Introduction 22q11.2 deletion syndrome is a primary immunodeficiency due to micro-deletion on the large arm of chromosome 22. Patients suffer from several anomalies, including mental illness, that such the case we present, mean a warning sign for further study.

Methods Twenty-one years-old male, with psychotic symptoms, typical of schizophrenia, behavioral disorders and mental confusion, plus epileptic episodes and psychomotor agitation. Two previous incomes with the diagnosis of psychotic disorder not otherwise specified. Treated with anti-psychotics at low doses with inter-episode stability.

Background Prematurity, low birth weight, neonatal asphyxia, generalized seizures, otitis and recurrent urinary tract infections, hypernasal voice, poor academic performance, difficulty relating. Physical examination: hypernasal voice, furred tongue, dysmorphic

faces, scoliosis, hipotania, stereotypes, delusions, auditory hallucinations and negative symptoms.

Results We considered the possibility of a neurodevelopmental disorder, with a multidisciplinary approach, resulting in the diagnosis of paranoid schizophrenia and velocardiofacial syndrome, which had gone unnoticed. Mean doses of clozapine, haloperidol and topiramate were used. He accepted psychiatry and other specialties follow-up, since it requires a complex and multidisciplinary approach.

Conclusions Definition of velocardiofacial Syndrome and lack of consensus on terminology:

- syndrome 22q11.2 DS as genetic subtype of schizophrenia? Opportunity to study the pathogenesis of schizophrenia;
- the importance of a comprehensive approach to early diagnosis, clinical improvement and preventing complications.

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EV0591

The genetic study of computer game addiction

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Introduction Addiction to computer games (CA) is growing with a lightning speed in whole world. Very few studies are focused in the genetic basis of this disorder.

Objectives To study the COMT and MAOA polymorphism in addicts to computer games.

Methods Totally 42 persons were included in this study, 22 of them had CA and 20 were totally healthy. Out of 22 gamers, 10 persons had only CA. The rest of 12 patients suffered from another psychiatric disorder besides of CA (Schizotypal disorder, depression, bipolar disorder). Their mean age was 16 years (15; 17) and all of them were males.

Results The total frequency of alleles 3R and 5R of MAOA gene in patients with CA was 30.0%, which doesn't have any statistical difference with the healthy persons. The genotype frequency of Val158Met of COMT gene is high in CA rather than in healthy persons ($\chi^2 = 6.85$, $P = 0.03$). Also, the homozygotes Val are much more in CA patients (59.1%) than in healthy persons (25%). On the other hand, the Val/Met combination is lower in CA patients (18.2%) than in healthy persons (55.0%).

Conclusion The Val158Met polymorphism of gene COMT may lead to CA formation.

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EV0592

Family-based association study between the brain derived neurotrophic factor (bdnf) gene and the attention deficit hyperactivity disorder in a Mexican population

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The attention deficit hyperactivity disorder (ADHD) is a common neuropsychiatric disease in infancy and adolescence, its world prevalence in the general population is high 3.4%. There is genetic evidence that consistently supports the polygenic nature of ADHD with a heritability estimated between 75% and 91%; literature proposes that the brain derived neurotrophic factor (BDNF) is a candidate gene that participates in the ADHA pathogenesis. One of the most studied polymorphisms is the Val66Met. The aim of this study was to determine a family-based association between the rs6265, rs122,733,63 and rs110,301,19 polymorphisms of the BDNF gene and the ADHD in a Mexican population. The ADHD diagnose was performed by a pedopsychiatrist utilizing the diagnostic and statistical manual of mental disorders (DSM-V) who selected 35 patients; along with the biological parents, a total of 105 individuals grouped in family-trios (mother, father and ADHD patient) were studied. Of the 35 probands, 32 were men and 3 were women (average age 7.7 years; age range 4–14 years). Subsequently, no statistically significant association was observed between the BDNF gene polymorphisms and the ADHD etiology in Mexican families: rs6265 ($\chi^2 = 1.33$; $P = 0.24$); rs122,733,63 ($\chi^2 = 1.33$; $P = 0.24$); rs110,301;19 ($\chi^2 = 0.66$; $P = 0.41$). Furthermore, no preference of transmission was observed for any of the haplotypes. In conclusion, it was not possible to prove any association between the BDNF gene polymorphic variants and ADHD in a Mexican population. Future studies comprising larger samples are necessary to determine the potential role of the BDNF gene in ADHD.

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e-Poster viewing: Guidelines/guidance

EV0593

Global Level – Elimination of stress, anxiety and depression at the rate of 25% to 35% (minimum)

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Opening of C.E.P.P.D (Center for Emotional, Personal and Professional Development). Almost every child in the world joins school and as per policy and procedures school staff/teachers develop their educational level but emotional health is not in focus at all; therefore child raised up with many severe negative and self-defeating behaviors; they understand others but others not understand them and that's the beginning all problems start from here. . . . The Center will provide state of the art guidelines/guidance (one stop solutions) supporting facilities starting from schooling onward throughout entire life for people belongs to all walks of life. In these centers anyone can go and will come out with clear head and in hand solutions, team of professionals shall provide guidance and support to everyone for healthy and balanced life by all means and will also develop alumni networking for permanent intact and fund raising on continuous basis from all over the world. C.E.P.P.D will play central and synergizing role between all sectors (for instance, schools, colleges, universi-

ties, counseling, vocational, community, hospitals, NGOs, mental and emotional health centers, child up-bringing, parenting, career counseling, soft skills training's; likewise list is on.... along with financial assistance from Govt. and semi-government sectors, will share implementation details as needed/at the time of symposium/brain storming sessions. These centers will become surely The turning point center in city than progress in next cities; likewise in country than at global level and yes together positively we can set landmark by mainly utilizing the medium of education and guidance.

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e-Poster viewing: Intellectual disability

EV0594

Pregabalin use in adults with intellectual disabilities

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Introduction Pregabalin is a well-established anti-epileptic drug in the treatment of epilepsy. It is also indicated for the treatment of generalised anxiety disorder and neuropathic pain. In addition, it has mood modulating properties. In people with intellectual disabilities it is used to treat epilepsy. There is little evidence of the use of pregabalin in managing mental health difficulties in people with intellectual disabilities.

Objectives To describe the use of pregabalin in adults with intellectual disabilities.

Method A descriptive case series of adults with intellectual disabilities living in the community, under the care of a community psychiatrist, who are prescribed Pregabalin. Outcomes of treatment were measured using the health of the nation outcome scale for people with intellectual disabilities (HoNOS-LD).

Results Fourteen cases were identified in the community service of adults with Intellectual Disabilities. Twelve were men and two were women. The average age of the sample was 29 years. The range in duration of using pregabalin was from 3 to 72 months. Thirteen adults had a diagnosis of Autism of which three also had ADHD. The indications for using pregabalin and numbers were : anxiety (12); liability of mood (2); generalised anxiety disorder (1); epilepsy (1). The daily dose range was from 150 mg to 300 mg The mean change in HoNOS-LD scores was 32%.

Conclusions Pregabalin is a useful treatment in people with intellectual disabilities who experience anxiety. It is especially effective among adults with ID and autism to modulate mood and anxiety symptoms.

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