

**Results:** We conducted our study with 150 patients. The diagnosis of PTSD according to DSM 5 criteria was retained in 56.2% of patients (N=80).

The average age was 12.4 years with extremes ranging from 7 to 17 years. We noted a female predominance at 58.8% (n=47)

Male gender was significantly associated with persistent avoidance ( $p=0.03$ ). Sexual assault was significantly associated with the severity of flashback symptoms ( $p<10^{-3}$ ) and reckless and self-destructive behaviors ( $p<10^{-3}$ ) and with the frequency of dissociative symptoms ( $p<10^{-3}$ ).

We also noted in our work that dissociative symptoms were significantly more frequent in victims with no personal psychiatric history with a  $p$  value of 0.021.

In our population, we found a predominance of hypervigilance and a greater severity of exaggerated startle reactions in the absence of a family psychiatric history with a  $p$  value of 0.048 and 0.008 respectively. We noted a significant predominance of exaggerated startle reactions in relation to the absence of exposure to previous traumatic events with a  $p$  equal to 0.043

**Conclusions:** The specificities identified in relation to the child should be taken into consideration during further evaluations and further analysis in the general population.

**Disclosure of Interest:** None Declared

## EPV0199

### Diagnostic stability in adolescents transiting to adult services: exploring the patterns of diagnostic adjustments

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**Introduction:** Most mental illness of adult life begin in late adolescence, affecting young people when they require transition to adult services. In <18 years old patients is more difficult to establish a definitive diagnosis, so diagnoses are often unstable and temporary. In young patients, understanding diagnostic stability may help in clarifying the course, developmental changes, and long-term prognoses of psychiatric disorders. Little research has explored the diagnostic adjustments that occur in child and adolescent mental health services, however previous studies reported that moods disorders and schizophrenia showed more stability than other diagnoses.

Understanding diagnostic trajectories is necessary to improve developmental psychopathology, in order to acquire more discrete diagnostic entities, and clinical judgements, regarding risk and prognosis.

**Objectives:** as the evidence of diagnostic stability from childhood (child and adolescent mental health services) to adulthood (adult services) is limited, the aim of this study is to describe the clinical features in patients from child and adolescent mental health services in transition to adult services and to compare the main diagnosis of these patients made in both services.

**Methods:** all individuals, between 18 and 25 years old, admitted to our outpatient clinic specialized in prevention, diagnosis and

treatment of mental illness in adolescents (ASST Grande Ospedale Metropolitano Niguarda, Milan), referred to our service between 2021 and 2022. Clinical Diagnosis were establish using ICD-10 criteria.

**Results:** 301 new patients were admitted in our outpatients service: 171 in 2021 and 130 in 2022 (until October). The mean age was 21,08. The 30.2% of patients come from child and adolescent mental health services (29,2% in 2021 and 31,5% in 2022). The main diagnosis of these patients were: first reaction to severe stress and adjustment disorders (F43), second specific personality disorders (F60) and thirst eating disorders (F50). The main diagnosis made in our services were: first specific personality disorders (F60), second first reaction to severe stress and adjustment disorders (F43), thirst other anxiety disorders (F41). 56,1% of patients have the same diagnosis in both services and 43.9% have a different diagnosis. There were not differences in sex (60,5% female and 39,5% male). Patients from child and adolescent mental health services were younger (19,68 vs 21,69), not statistically significant.

**Conclusions:** Further research is required to understand diagnostic trajectories, especially longitudinal studies in minors during transition period to adult services, in order to find patterns of diagnostic adjustments.

**Disclosure of Interest:** None Declared

## EPV0200

### Young Adults' New Cognitive Formations and the Feeling of Becoming an Adult

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**Introduction:** In adolescence, the person transitions from the reality of childhood, where he is mostly dependent on his parents, to the reality of adult life, which necessitates the acquisition of adult role systems, established autonomy, and ability to accept responsibility. The most important feeling during that time is that of maturation into adulthood.

**Objectives:** This study was designed to investigate the impact of new cognitive formations on the maturation of young adults' self-consciousness from the perspective of a subjective evaluation of the experience of becoming an adult, particularly its cognitive component.

**Methods:** The study was based on Akimova's Adult Practical Thinking Scale (Akimova et al., 2008), Zack's Theoretical Thinking Scale (Zack, 2010), Personal Differential Test (Bazhin & Etkind, 1983), Szustrowa's Egocentric Associations Scale with content analysis applied (Szustrowa, 1976), The Feeling of Becoming an Adult Expression Scale (Andriushchenko et al., 2014) and included 64 participants aged 18-22 years. The approbation group had 12 participants and the core group had 52 participants.

**Results:** The IBM SPSS 22 statistical rank correlation analysis provides support for: negative moderate correlation between (1) the reflective type of theoretical thinking and personal egocentrism ( $rs=-.31$ ;  $p=.024$ ), (2) adult practical thinking level and awareness of a new position in adolescents-adults relations self-consciousness component ( $rs=-.28$ ,  $p=.048$ ); positive moderate correlation between (1) social intelligence and the feeling of becoming an adult expression degree ( $rs=.39$ ;  $p=.004$ ), (2) orientation to

autonomous educational and intellectual activity (self-consciousness component) and subjective attitude towards oneself and other people ( $r_s=.29$ ,  $p=.04$ ), orientation to autonomous educational/intellectual activity and Egocentrism Index ( $r_s=.37$ ,  $p=.007$ ).

**Conclusions:** According to the study's findings, there is a strong correlation between young adults' cognitive traits (such as content-related reflection for formal operational thinking and social intelligence), their expression of the feeling of becoming an adult, and some aspects of self-consciousness. It indicates that the feelings of becoming an adult manifest themselves as an orientation to autonomous educational and intellectual activity and new forms of cooperation with adults that develop step by step through time, but not as a process of individualization based on egocentric attitudes.

**Disclosure of Interest:** None Declared

## EPV0201

### Impulsivity and emotion regulation in medical students

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**Introduction:** Impulsivity in adolescents has been largely studied as it is frequently observed in that phase. However, the relationship between impulsivity and emotion regulation has been rarely explored.

**Objectives:** Our study aimed to assess impulsivity and emotional regulation in medical students as well as to explore the link between them.

**Methods:** This was a descriptive and analytical cross-sectional study conducted from September to December 2017, among first and second year students of the medical school of Sfax who were aged between 18 and 19 years. We collected sociodemographic as well as clinical data of the participants. "Barratt Impulsivity Scale" (BIS) and "Difficulties in Emotion Regulation Scale" (DERS) were used to assess impulsivity and emotion regulation respectively.

**Results:** One hundred students were included in our study, with a mean age of 18 years and a sex ratio of 0.81. Among them, 62% were smokers with an average consumption of 19.6 packets year. Alcohol and cannabis use was reported by 9% and 5% of the students respectively. The mean impulsivity score on the Barratt scale was  $66.78 \pm 9.44$  with scores ranging from 40 to 112. Among our participants, 25% had a high level of impulsivity (score > 72). Unplanned impulsivity was the dimension with the highest mean score ( $23.74 \pm 4.64$ ). Our results showed that impulsivity was significantly associated with the male gender ( $p=0.002$ ) and smoking ( $p<10^{-3}$ ).

As for emotion regulation, the mean score on the DERS scale was  $78.8 \pm 17$ . The majority of the students (64%) had a moderate difficulty in regulating emotions.

Our results showed a positive correlation between impulsivity and emotional regulation with a moderate link ( $p=10^{-3}$ ;  $r=0.57$ ).

The high emotion dysregulation group had a significantly higher score on the two dimensions of impulsivity: attentional impulsivity ( $p=10^{-3}$ ) and unplanned impulsivity ( $p=0.047$ ).

**Conclusions:** Our study highlights the relationship between emotion dysregulation and impulsivity, suggesting that emotion

regulation may be an important factor to consider when assessing impulsive adolescents.

**Disclosure of Interest:** None Declared

## EPV0202

### Use of cariprazine as an impulsivity regulator in an adolescent with non suicidal self-injury and suicidal attempts. Case report

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**Introduction:** Adolescents with emotional dysregulation are at risk for self-injury. Antipsychotics are often used to manage these symptoms.

**Objectives:** The aim of the present case is to show the use of cariprazine as an effective drug for emotional dysregulation and impulsivity in a 17-year-old adolescent girl

**Methods:** Case report

**Results:** The patient was a 17-year-old female admitted to inpatient psychiatric unit for a self-harm attempt due to sertraline overdose. She was being followed up for self-injury, anxiety and eating disorder symptoms. Her treatment was sertraline 200 mg, diazepam 20 mg per day and olanzapine 15 mg per day. With this medication she had gained up to 7 kgs in 4 months. A progressive change was made with cariprazine up to 3 mg and olanzapine was reduced to 2.5 mg at night. With this adjustment the patient did not present worsening in anxiety levels, with adequate impulse control and being able to perform emotional regulation strategies.

**Conclusions:** Although it has no indication in patients under 18 years of age, it shows a case of good tolerance and efficacy for the management of impulsivity by improving emotional regulation. Cariprazine is an atypical antipsychotic that works through partial agonism on dopaminergic receptors, serotonin 5-HT<sub>1A</sub> receptors and an antagonist at the 5-HT<sub>2B</sub> receptors, with moderate affinity for adrenergic, histaminergic, and cholinergic receptors reducing the likelihood of side effects

**Disclosure of Interest:** None Declared

## EPV0203

### Lisdexamfetamine in combination with guanfacine as an effective treatment in the management of behavioral disturbances in patients with Attention Deficit Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder (ASD). Case report

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