

Aims Are sleeping problems as measured by the use of hypnotics in toddlers a risk factor for ADHD?

Methods Prescription database information data was collected for 47,413 children participating in the Norwegian Mother and Child Cohort, where mothers report on toddler drug use. These two datasets were used as predictors of diagnoses of ADHD as seen in the Norwegian Patients Registry in a 7-year follow up period.

Results Agreement between mother-reported drug use and hypnotics use as measured was less than 50% for all hypnotics (min 19% and max 48%). The two datasets will be further used to investigate the relationship between toddler drug use and a later childhood diagnosis of ADHD.

Conclusions Considering the low to moderate agreement between mother-reported survey data and data from prescription databases it is of value to use both data sources in a study looking at the predictive value of sleeping problems and hypnotics use in toddlers on later development of ADHD.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV0116

Sluggish cognitive tempo symptoms and psychosocial well-being in adolescents – an epidemiological study in the Northern Finland Birth Cohort 1986

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Introduction The investigation of sluggish cognitive tempo (SCT) concept has renewed interest in recent years. Apart from previous studies linking SCT items to ADHD, current research now shows further evidence for the relationship between SCT items and impairment in several domains. Despite it is not a clinical entity, SCT items are often seen in clinical child and adolescent psychiatric populations and, thus, further investigation of these symptoms is clearly needed both in clinical and in community samples.

Objectives Our aim was to investigate the relations between SCT items and psychiatric symptoms, as well as psychosocial and academic functioning in a large general population sample of adolescents.

Methods Fifteen-year old adolescents from the Northern Finland Birth Cohort 1986 ($n = 9432$) completed a postal questionnaire on their health and well-being with a participation rate of 80%. The questionnaire included the Youth Self Report (YSR) which has the following SCT items: I feel confused or in a fog, I daydream a lot, and, I don't have much energy, as well as items constructing the subscales depressed/anxious, withdrawn, somatic complains, social problems, thought problems, attention problems, rule-breaking behavior, and aggressive behavior.

Preliminary results Around 8% of adolescents rated themselves above the 90% cut-off in the sum score of SCT items. They also reported more symptoms in all YSR subscales, lower grade marks in academic field, less friends, and lower life satisfaction than adolescents scoring below the 90% cut-off.

Conclusion SCT may relate to various psychiatric problems and reduced psychosocial well-being.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV0117

Atypical onset of a manic episode in adolescence – case report

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Introduction The clinical practice and available literature attest the presence of affective symptoms in psychosis and affective disorders with psychotic elements, allowing their conceptualization as entities of the same nosologic spectrum.

Objective The description of a clinical picture that is part of the aforementioned pathology, installed under a treatment that has indication in the spectrum, which leads to supporting different pathophysiological mechanisms of those pathologies.

Aim Presentation of an atypical onset of a manic episode in adolescence.

Method At the age of 14, a male adolescent had an acute psychotic episode, in complete remission after three months of treatment with risperidone. The antipsychotic treatment continued for seven months, when the adolescent had a decompensation consisting in a manic episode.

Results Considering the mode of onset of the manic episode, we have assumed a lack of compliance with the antipsychotic medication. The mother denies this possibility. We have continued the treatment with risperidone, which had no effect over the manic clinical picture, and we added valproic acid, failing to alleviate the symptoms. The clinical picture improved, with complete remission, under treatment with aripiprazole and valproic acid. After a month in which he refused to take the medication, the patient had another decompensation in the form of a manic episode with psychotic symptoms. This time we have decided to start long-acting injectable antipsychotic medication.

Conclusion Through this case study, the authors wish to bring into notice the surprises that the clinical practice still offers and the necessity to research the underlining pathophysiological aspects of the disorder.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV0118

Determining the relation between the internet addiction in Turkish secondary school students and the perceived family support

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Objectives The purpose of this study is to determine the relation between the internet addiction levels of secondary school students and the perceived family support.

Methods The study was conducted in the cross-sectional and descriptive design, and the data were collected from 3391 students who were studying at 5th and 7th grades at 23 secondary schools in the city of Burdur and its central villages. The Personal Information Form, the Internet Addiction Scale, and the Social Support Received from the Family Scale were used to collect the data. The data were collected between the dates 15.11.2013 and 15.01.2014. After the necessary explanations were made to the students, the informed

consent form were sent to their parents/legal guardians, and the students who returned these forms were included in the study. The numbers, percentages, average values, and standard deviation, which are among the descriptive statistical methods, were used in evaluating the data. The Pearson correlation and regression analysis were applied between the continuous variables of the study.

Results It was observed in the study that 4.6% of the students had internet addiction at pathological level. The factors that influenced the internet addiction were determined as the social support received from the family, being male, low school success, weekly allowance being high, studying at senior grades, and going online frequently.

Conclusions When the study results are analyzed it is observed that the internet addiction in secondary school students in our country is at a rate that has to be taken seriously.

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EV0119

The screening of the risk of autism spectrum disorders in children aged 16–24 months in Russia, 2015

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Introduction Improving the mental health diagnosis in young children is the high-priority problem in reducing the rate of child disability due to mental illnesses. In 2015, the Ministry of Healthcare (Russia) introduced the pilot project – the total screening of the paediatric population at an early age, detecting autism spectrum disorders (ASD) risk group.

Objectives To determine the broad range of mental disorders: from minor borderline states (states of risk) to serious mental disorders, with an emphasis on determination of ASD in children aged 16–24 months in general population.

Methods The survey was conducted by the total screening in primary health care institutions (in the three largest regions of Russia: Volgograd, Novosibirsk, Chelyabinsk regions). The screening tool: checklist for parents aimed at detection of risk of occurrence of ASD in early children, for screening in general population.

Results and conclusions During 2015, 34,770 parents of children aged 16–24 were questioned. Of these 4102 children or 11.8% (118:1000) formed the risk group in ASD. By the risk group in ASD predisposition (diathesis) is understood, that does not correspond fully to the clinical criteria of illness. This state of predisposition may last for several years and pass either to illness or to health.

The part of the children of the risk group in ASD were consulted by psychiatrist on a voluntary basis (2774 cases). Fifteen children (0.4:1000) were diagnosed with prominent clinical disorders in ICD-10 (F84). This prevalence rate cannot be extrapolated on the general population of the children at the considered age.

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EV0120

The use of guanfacine (Intuniv XR) in the treatment of disruptive mood dysregulation disorder – Clinical experience from telepsychiatry

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Background Disruptive mood dysregulation disorders (DMDD) is new to DSM-5 and represents children with rage episodes. Medical treatment is critical but few randomized trials. DMDD may be a replacement for the diagnosis of Bipolar Disorder noted in DSM-IV with a heavy use of atypical neuroleptics. DMDD reflects a more moderate treatment of these symptoms.

Method Telepsychiatry referrals 6–9 year old children randomized into $n = 12 =$ group A (11 males/1 female), $n = 13 =$ group B (11 males/2 females). ANOVA not significant (NS) in age and gender. Group A received guanfacine (GUA) titrated to weight between 3–4 mg. Both groups received behavior support. Group B did not receive medications. Analysis by *t*-test comparison.

Results Group A showed significant improvement in frequency but not in intensity of rage episodes ($P < 0.05$). Major side effects include sedation and gastric irritation. Dropouts from original sample of 22 per group were based on inability to titrate, cost of drug, inability to swallow pills, worsening of symptoms with addition of an atypical neuroleptic.

Conclusion GUA is a possible treatment for DMDD but there are limitations requiring further study. Group B did show improvement reflecting the utility of behavioral strategies (future studies require control groups) but GUA may provide a useful alternative to neuroleptics. Cardiovascular issues were not a problem and were assessed. Future studies are warranted.

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EV0121

Telepsychiatry: The new reality of psychiatry in the future

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Background Do we need to work from offices in psychiatry? The clinical interface has been debated particularly in child and adolescent psychiatry with continued beliefs related to the differences in therapeutic alliance when compared to face-to-face practice. That literature clearly shows that telepsychiatry is equal in its therapeutic effects. But not much has been written about the other advantages of telepsychiatry, which may be intuitive but needs to be documented.

Methodology The University of Toronto Telepsychiatry Program is the largest in the world with over 60 psychiatrists and 1400 sites. This is an anecdotal review of 25 years of practice using this medium outlining the advantages (ADV) and disadvantages (DADV) to this medium.

Results ADV: convenience from home, complete access to hospital files, physician safety during sessions, able to see multiple sites and include multisystem professionals including schools, cost effective (when compared to outreach psychiatry), simplicity of connection with minimal interference. DADV: novelty to client, quality of video to pick up very subtle nonverbal information, technical support required, capital cost to set up, mental health biases to technology.

Conclusion This technology is evolving. It is essential physicians understand the issues whether it be privacy, cost, utility and clinical application. The long-term impact will likely affect future practice and allow resource sensitive care to outlying areas with the ability