Introduction Institutionalized children and adolescents who reside in foster centres are a subgroup of population that use mental health resources. This group of population has an increased risk of physical and psychopathology health problems. That translates into a greater number of emergency visits. This is the same perception presented by different professionals.

Objectives The aim of the study is to analyse visits to emergency child and adolescent psychiatry service from a pediatric hospital. Also ask for a point of view of the professionals about it.

Methods We select all the patients attended the emergency psychiatry child and adolescent care that were institutionalized. The sample was collected for 4 months in a pediatric hospital.

Results n=66 (51.5% male; mean age 14.09 ± 1.95 years old), 31.8% was the first time at the emergency room, 31.8% had consulted between 2–4 times and 36.4% over 4 times. The main reason for consultation was aggressiveness (66.7%). The three main discharge diagnoses were conduct disorder (50%), adjustment disorder (25.7%) and TDAH (7.5%) The 45.5% had a history of drug use and the 24.2% of self-harm. Asking professionals 80% responded perception of increased emergency consultations and the 90% think inadequate value between 50–70% of queries.

Conclusions The boys institutionalized perform a high use of paediatric and psychiatric emergencies. There are a significant number of re-consultations. Professionals have the perception that their emergency visits are increasing. Since patients are at high risk of suffering mental disorders and high use of emergency would be interesting to develop specific protocols for emergency care for these groups.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1219

EV235

Continuity of attachment in children with disruptive behavior disorders and in their parents: A pilot study

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Introduction The quality of adult–infant attachment plays an essential role in influencing the children's well-being (Groh et al., 2012). Disruptive Behavior Disorders (DBD) has been found as particularly influenced by the presence of unavailability in the parental caregiving. It is widely attested that parents' attachment states of mind predict the attachment patterns of their children. Nonetheless, the investigation of the attachment organization during the middle childhood shows inconsistent data. Moreover, a paucity of studies focused on the role of father's attachment in this period still remains.

Objectives This pilot study investigates the attachment patterns of children with DBD and those of their parents.

Aims The aims are to verify the presence of: (1) an over-representation of Disorganized attachment in these children; (2) an over-representation of Irresolution with respect to abuse or loss in one or both their parents.

Methods The sample consists of 33 subjects: n=11 children with DBD and n=22 parents. The children completed the Child Attachment Interview (Shmueli-Goetz et al., 2000) and the parents completed the Adult Attachment Interview (George et al., 1985).

Results Findings showed: (1) a significant presence of Disorganized attachment with respect to both parents in the children; (2) an over-representation of Insecure states of mind in their parents; (3) a more significant presence of Disorganization in the fathers than in the mothers.

Conclusion This focus on the topic of intergenerational transmission of attachment in a specific clinical sample enriches the

research, underlining the more pronounced role of fathers' attachment configuration.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1220

EV236

Disruptive behavior disorders and somatic symptoms disorders: Which strategies of emotion regulation children and their parent's use?

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Introduction Emotion regulation (ER) is defined as the processes through which emotional awareness and experience are monitored, evaluated, maintained, and modified (Thompson, 1994). Difficulties with these processes have been proposed to increase risk for psychopathology. Disruptive behavior disorders (DBD) and somatic symptoms disorders (SSD) are characterized by an inability to express and modulate emotional states. Research aims to understand how ER influences mental health.

Objectives We focus on two strategy of ER: Cognitive Reappraisal, involves changing the way one thinks about a situation in order to change its emotional impact; Expressive Suppression involves suppressing or hiding external expressions of emotion from others (John and Gross, 2004)

Aims We assess ER in order to examine the relation with SSD and DBD in childhood and with their parents.

Methods The sample consists of 188 subjects divided in four groups: n = 41 children with DBD (M = 10.78 years, SD = 2.11); n = 50 parents (36 mothers and 14 fathers) of children with DBD; n = 44 children with SSD (M = 11.98 years, SD = 2.04); n = 53 parents (40 mothers and 11 fathers) of children with SSD. Were administered the ERQ (Balzarotti et al., 2010) for parents and ERQ-CA (Gullone and Taffe, 2012) for children.

Results DBD children reported higher levels of Suppression than SSD subjects; high levels of Suppression were reported in mother SSD and in father DBD.

Conclusion This study extended previous research in childhood, including both mothers and fathers. The findings contribute to a greater understanding of the development of ER, which has important implications for psychological wellbeing.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1221

EV237

The evolution of cognitive functioning in adolescents with early onset psychosis

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Introduction Cognitive deficits (executive functions, verbal and spatial learning and memory, visual processing and attention) are a fundamental trait of schizophrenia.

Objective The main objective of this study is to compare the cognitive functioning in psychotic adolescents at the psychosis onset and after one year, using psychological tests.

Methods This is a longitudinal study, during a period of two years and a half. Twenty-eight patients with first psychotic episode agreed to participate to this study and were assessed during their hospitalization in a university clinic for child and adolescent psychiatry in Cluj-Napoca, Romania. The diagnosis was based on DSM-IV criteria. All the patients were initially assessed for intelligence level

using Raven Test and those with mental retardation were excluded. After one year, sixteen adolescents from the initial group were reassessed. The cognitive functioning was assessed with Trail Making A and B, verbal fluency tasks, Wisconsin Card Sorting Test and Rey Auditory Verbal Learning Test. The results from patients group were compared with those from healthy controls.

The results show weaker global cognitive performance from adolescents with early onset psychosis, initially and at oneyear evaluation, than the healthy adolescents from the control group.

Conclusions This results are consistent with those of previous studies. The adolescents with early onset psychosis show multiple cognitive impairments initially and one year after the psychosis onset

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

http://dx.doi.org/10.1016/i.eurpsv.2016.01.1222

EV238

Gender dysphoria in USMIJ of Toledo. Report of a case

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The start of Child and Adolescent attention to gender dysphoria is very recent. In our Unit, it has objectified a growing increase in such demand over recent years.

As a typical example would be a patient of 13 years following gender dysphoria begins to present school failure and behavior problems at home with emotional instability.

According to the recommendations of the Group Identity and Sexual Differentiation (GIDSEEN) after early detection is to guide parents towards a comprehensive treatment at a specialized interdisciplinary teams and a psychosocial approach to improve the quality of life, decrease mental comorbidity and gender dysphoria own. Having no such care in our community has been necessary to make a referral to another community to attend this demand.

Currently it is giving adequate attention to these cases, but except for referral to another community. However, as we are seeing progression care in our area in the future could be feasible. Therefore, we consider as a first step dysphoria quantify each case in our area. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1223

EV239

Wernicke-Korsakoff syndrome with psychotic symptoms in a severe case of anorexia nervosa: A case report

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Introduction The Wernicke-Korsakoff syndrome comprises a complex of symptoms including Wernicke's encephalopathy and the Korsakoff's syndrome. While the former is characterized by a classic clinical triad of ataxia, ophtalmoplegia and a global confusional state; the Korsakoff's syndrome is characterized by memory impairment and confabulation. These two entities are now considered as a clinical spectrum of a same disease caused by deficiency of thiamine (vitamin B1).

To describe a case of Wernicke-Korsakoff Syndrome Objective with psychotic symptoms in a 13-year-old female patient with anorexia nervosa.

Method The patient and family were interviewed. Literature relevant to the case was reviewed.

Results A 13-year-old Caucasian female was admitted to the emergency department with bradycardia (38 bpm) and a twomonth history of weight loss totaling 6 kg. This loss of weight was a result of dietary restriction and over-exercise because she "felt too fat". On admission she has a body mass index of 12.17. She was diagnosed with anorexia nervosa and was hospitalized. On day 11 after hospitalization, patient initiated alteration in behavior, fluctuating mental state with periods of lucidity and periods of confusion, memory impairment and psychotic symptoms, with paranoid delusions and auditory hallucinations. The classic triad of Wernicke's encephalopathy was not present. The treatment with thiamine was initiated and the symptoms including psychotic symptoms improved.

Conclusion Wernicke-Korsakoff syndrome should be considered in cases of anorexia nervosa with a confusional state and memory impairment even if the classic symptoms are not present.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1224

EV240

Disturbed sleep and activity as early signs of ADHD in preschool children

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Introduction Attention-deficit-hyperactivity-disorder (ADHD) is the most frequent psychiatric disorder present in childhood, and sleep-problems are a prominent, pervasive and clinically important feature of ADHD. Our understanding of whether sleep-problems mimic or exacerbate daytime ADHD-symptom expression remains insufficient. Furthermore we lack knowledge about the connection between objective measuring and subjective observations in children with early symptoms of ADHD.

Future research that examines sleep-problems and daily activity in very young children with and without ADHD-like symptoms might help us identify early risk factors and achieve a better understanding of the importance of sleep in ADHD.

To investigate if sleep-problems and activity level during day time is associated with early signs of ADHD.

Methods A sample of 50 preschool children ages 2–3 and their parents recruited in a birth cohort are invited to participate and divided into two groups of 25 cases and 25 controls based on ADHD-symptom score. An actigraph on the child's non-dominant