

may conceivably contribute to enhanced mental-state decoding but there exists a hidden cost of heightened inflammation in these seemingly healthy maltreated youths. Our findings thus underscore the need to further examine the mental and physical well-being of healthy individuals exposed to early-life stress as they may still be vulnerable to psychopathology later on.

**Disclosure of Interest:** None Declared

#### EPP0144

### Full-time hospitalization in child and adolescent psychiatry: an overlook of the Tunisian situation

L. Sahli\*, Z. Abbes, S. Halayem and A. Bouden

child and adolescent Psychiatry, Razi Hospital, Manouba, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.479

**Introduction:** Admissions in a child psychiatry unit can be voluntary or involuntary in some cases when the patient meets specific criteria.

**Objectives:** The aim of our study was to assess the frequency and trend over time of admissions of minors in the child psychiatry department in Razi Hospital between 2011 and 2019, and to examine the psychiatric diagnoses in involuntary admissions of minors.

**Methods:** We conducted a retrospective study of medical records of inpatients admitted to the hospitalization unit of the child psychiatry department in Razi Hospital in Tunisia between 2011 and 2019.

**Results:** Over the nine years, the total number of hospitalizations was 924. There is a slight female predominance over the total number of hospitalizations (sex ratio = 0.85). There was no consistent and significant change in the number of hospitalizations between 2011 and 2019. A growing increase in the number of compulsory hospitalizations was noted. From 2011 to 2019, the number of compulsory admissions increased from 03 in 2011 to 22 in 2019.

Regarding compulsory hospitalizations, admission requests came from child protection delegates, public prosecutors or family judges. Conduct disorder was found in 33.3% of the cases followed by a normal psychiatric examination in 11.8% of the cases. Mood disorders were found in 9.8% of the cases.

**Conclusions:** Our study shows the explosion in the number of compulsory hospitalizations despite a relatively stable total number of hospitalizations. More comprehensive guidance for legal authorities is needed regarding the compulsory admission of minors.

**Disclosure of Interest:** None Declared

#### EPP0145

### Compulsory hospitalization in child psychiatry: clinical and sociodemographic profile of Tunisian inpatients

L. Sahli\*, Z. Abbes, S. Halayem and A. Bouden

child and adolescent Psychiatry, Razi Hospital, Manouba, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.480

**Introduction:** The department of child psychiatry in Razi Hospital is the unique psychiatric unit in Northern Tunisia offering full-time hospitalization for minors with mental health disorders.

**Objectives:** The aim of our study was to explore the clinical and therapeutic characteristics in compulsory admissions of minors in the department of child psychiatry in Razi hospital between 2011 and 2019.

**Methods:** We conducted a retrospective study of medical records of inpatients admitted to the hospitalization unit of the child psychiatry department in Razi Hospital in Tunisia between 2011 and 2019.

**Results:** Over the nine years, the total number of compulsory admissions was 74 inpatients, aged from 11 to 16 years old. The number of compulsory admissions increased from 03 in 2011 to 22 in 2019. Most of the inpatients were boys (sex ratio=1.46). The mean age was 14, 1 year old. Heteroaggressiveness was the reason for admission in half of the cases followed by risk behaviors (30.1%) and suicidal behaviors (18.6%). The diagnosis of conduct disorder was found in 33.3% of the cases followed by a normal psychiatric examination in 11.8% of the cases. Mood disorders were found in 9.8% of the cases. Parental psychoeducation (100%), individual psychotherapy (91%) and family therapy (88,2%) were the treatment of choice for the inpatients. The prevalence of psychiatric medication was 45.1%. The most important forms of medication used were neuroleptics (42.3% of medicated patients) and mood stabilizers (30.7%). Child protection delegates were involved in 86,4% of the cases for social intervention.

**Conclusions:** Minors admitted in an involuntary mode to psychiatric unit have their own specificities in terms of clinical and therapeutic characteristics. More theoretical and empirical research is needed regarding the involuntary admission of minors.

**Disclosure of Interest:** None Declared

#### EPP0146

### Burdensomeness and fear of pain in adolescents with suicidal ideations and attempts

L. Esina<sup>1\*</sup>, E. Rasskazova<sup>2</sup> and V. Sadovnichaja<sup>1</sup>

<sup>1</sup>Clinical Psychology Department, Moscow State University and

<sup>2</sup>Clinical Psychology Department, Moscow State University, Mental Health Research Center, Moscow, Russian Federation

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.481

**Introduction:** Relationship to physical pain (Joiner, 2005, O'Connor, Kirtley, 2018, Galynker, 2017) and psychological pain (Eisenberger et al., 2003) are related to the risk of suicidality in adolescents.

**Objectives:** The aim was to reveal the relationship between interpersonal needs, relation to pain and suicidality in adolescent with or without suicidal thought and/or attempts.

**Methods:** 92 adolescents without suicidal thoughts (16 males, 12-21 years old), 132 adolescents with experience of suicidal thoughts in the past or present (22 males, 12-21 years old) and 55 adolescents (7 males, 12-21 years old) ongoing clinical treatment due to suicidal actions or attempts filled Interpersonal Needs Questionnaire (Van Orden et al., 2012), Discomfort Intolerance Scale (Schmidt et al., 2006), The Pain Catastrophizing Scale (Sullivan et al., 1995).