Conclusion This study suggests that attachment organization may be a fundamental element to be assessed in the evaluation of disruptive behavior disorders in children and adolescents. Nevertheless, traumatic experiences do not seem expressed through psychic symptoms. The clinical implications are discussed.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0058

Impulsivity in adolescent with depressive disorders

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Introduction However, impulsivity is more likely to be present in externalizing disorders, little focus seems to have been made on the research of impulsivity in depression.

Objective On this study, we sought to investigate impulsivity among adolescent with Depressive disorder compared to a control sample.

Subjects and methods Employing a matched case-control study, participants included 100 adolescents divided into two groups: 30 adolescents (12 to 17 years) with depressive disorder and a control sample of 70 adolescents. Participants were recruited during a period of 2 years (2015, 2016). Depressive disorder patient were drawn from the consultation unit or inpatient unit of the department of child psychiatry in Sfax, Tunisia. Controls were recruited from two secondary schools and they haven't depressive symptoms according to the child depression inventory (CDI). Impulsivity was evaluated in the two groups by the Barratt Impulsiveness Scale (BIS-11), an instrument designed to measure trait impulsivity.

Results Adolescents with depressive disorder displayed significantly higher total BIS-11 impulsivity scores than controls $(71.6\pm16\ \text{vs}\ 61.6\pm9;\ P=0.003)$. They scored significantly higher than the controls on motor (P=0.0001) and attentional impulsivity (P=0.006). There was no difference in non-planning Impulsivity between the two groups. Motor impulsivity was high in adolescents with history of suicide attempt.

Conclusion Our findings suggest that trait impulsivity is increased among adolescents with depressive disorder. Impulsivity seems to be a risk factor for suicide attempts, so it that should be systematically evaluated in depressive disorder.

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

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EW0059

Aerobic exercise training in children and adolescents with inflammatory bowel disease: Influence on psychological functioning, sleep and physical performance

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Background and aims Patients with inflammatory bowel disease (IBD) report increased mental health issues, poorer sleep quality

and less engagement in physical activity (PA). Standard treatment consists of immune modulating pharmaceuticals, though evidence is growing that aerobic exercise training (AET) might serve as adjuvant option to reduce disease symptoms and improve mental health. The aim of the present study was to investigate possible AET effects on psychological functioning, depressive symptoms, sleep and PA behavior in paediatric patients with IBD.

Methods Twenty-one paediatric patients with IBD and 23 gender and age-matched healthy controls (HC) were assessed. The IBD group was split into a "remission-group" (IBD-RE; n = 14) and an "active disease group" (IBD-AD; n = 7). All participants completed an 8-week AET exergame intervention reaching 60–80% of maximal heart rate for 5 days per week. At baseline and after 8 weeks, psychological functioning, depressive symptoms, objective sleep EEG, subjective sleep and objective and subjective PA were assessed.

Results AET significantly improved the exercise capacity of all participants. Self-reported fitness and daily PA behavior significantly increased in IBD-AD, but not in IBD-RE and HC. No improvements were observed for psychological functioning, depressive symptoms and subjective or objective sleep dimensions. Descriptively, the IBD-AD group reported lower psychological functioning and poorer subjective sleep quality.

Conclusions Results suggest that children and adolescents in an active disease state were at increased risk to descriptively report lower scores of psychological functioning and sleep. Further, an exergaming intervention has the potential to improve exercise capacity, self-reported fitness and daily PA.

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

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EW0060

Disturbed sleep and activity in toddlers with early signs of ADHD

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Introduction Attention-deficit-hyperactivity-disorder (ADHD) is a frequent psychiatric disorder present in childhood, where sleep-problems are a prominent, pervasive and clinically important feature. However, our understanding of whether sleep-problems mimic or exacerbate daytime ADHD-symptom expression remains insufficient.

Objective Research examining sleep and daily activity in toddlers with early signs of ADHD might help identify early risk factors.

Aims To investigate whether disturbed sleep patterns and daily

activity level is associated with early signs of ADHD in toddlers.

Methods Twenty-four toddlers from the Danish Odense Child Cohort scoring above the 93rd percentile on the ADHD scale of the Child Behaviour Checklist for ages 1½–5 were categorized as cases and compared to 25 age and gender-matched controls scoring below the 50th percentile. Daytime and nocturnal activity for 49 toddlers were assessed through seven days of actigraphy. Parents completed Children's Sleep Habits Questionnaire (CSHQ) and the ADHD Rating Scale IV Preschool Version (ADHD-RS).

Results Actigraphic data revealed an increased night-to-night variability, prolonged total sleep time, fewer sleep interruptions and fewer minutes in moderate-to-vigorous-physical activity (MVPA) in cases compared to controls. Increased night-to-night variability was found significantly associated with higher total scores on both the CSHQ and ADHD-RS. Further, fewer minutes in MVPA were associated with a higher parent-reported motor activity on the ADHD-RS.

Conclusion Findings show that early signs of ADHD are associated with irregular sleep patterns and lower daytime activity, as illus-