

side effects such as increased appetite, problematic eating behavior, sensory processing difficulties, and family factors (3).

Objectives: In this case report; we aimed to represent multidisciplinary medical and psychiatric treatment of a 16 years old adolescent with autism spectrum disorder and obesity who was consulted for bariatric surgery. It is thought that this case will be useful for clinicians as an example of a multidisciplinary approach in the management of obesity, primarily with non-surgical, psychiatric approaches and therapeutic environment.

Methods: In our patient, it was decided to prefer non-surgical approaches primarily, considering the diagnosis of ASD, MID, and ADHD, difficulties in impulse control, the concern about the continuation of the poor lifestyle habits after bariatric surgery, and the difficulties that the family may experience in providing adequate postoperative care. Patient received Metformin 2000 mg/day for insulin resistance, Amlodipine 10 mg/day, Enalapril 5 mg/day, Perindopril 5 mg/day and Indapamide 1.25 mg/day combination for hypertension, Haloperidol 0.6 mg/day in case of impulse control problems and aggression, Topiramate 50 mg/day to take advantage of its appetite suppressing effect and Methylphenidate 10 mg/day for attention deficit hyperactivity disorder (ADHD) during hospitalization in the endocrinology clinic and the same time diet and exercise programs were applied. When his rate of weight loss decreased around 4th week, Exenatide 10 mcg/day was added to his treatment.

Results: It was observed that the patient lost 15 kilograms at the end of 3 weeks, and his BMI decreased from 60.9 to 56.1 (BMI SDS: +4.18) and the total TG level decreased from 195 mg / dl to 154 mg / dl.

Conclusions: Obesity, which is an important public health problem, is also becoming a serious problem in individuals with ASD. There is no standard treatment approach for the coexistence of ASD and obesity. Whether psychopathologies constitute a definite contraindication for bariatric surgery is a controversial issue. In our patient, it was decided to prefer non-surgical approaches primarily. It can be concluded that; In children and adolescents with autism and intellectual disability, effective weight loss can be achieved without bariatric surgery with medical and psychiatric approaches.

Disclosure of Interest: None Declared

Climate change / Migration and Mental health of Immigrants

EPP0316

The impact of climate change and natural disasters on the development of post traumatic stress disorder in child and adolescent population

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Introduction: Major traumatic natural disasters have occurred worldwide. Post-traumatic stress disorder (PTSD) has been the most common psychiatric disorder discussed by the studies addressing the psychological sequelae of adolescents after traumatic natural disasters. In this study we have studied the impacts of

natural disaster yash cyclone that took place in West Bengal on the development of PTSD; factors related to the development of PTSD; predisposing, precipitating, and perpetuating factors related to the development of PTSD.

Objectives: To assess the incidence and prevalence of PTSD amongst survivors of natural disaster yash cyclone in a rural hamlet of West Bengal.

Methods: In this study ,200 survivors from Yash cyclone who belonged to Child and Adolescent age group were randomly selected .PCL 5 Scale was used to collect data and assess the incidence and prevalence of PTSD , standardized Bengali versions of the questionnaire was used in our study.

Results: There is statistical correlation between post traumatic stress disorder and subjects exposed to climate change events such as cyclone Yash.

Initial research suggests that a PCL-5 cut-off score between 31-33 is indicative of probable PTSD across samples.

In our study the mean pcl 5 value from the data assessment is 70.67 with standard deviation of 4.61.

Further assessment by linear regression analyses shows that female subjects are more prone to post traumatic stress disorder and higher income groups are more susceptible to PTSD.

As shown by higher values as per the pcl 5 scale.

Conclusions: Our study clearly demonstrates the impact of climate change and natural disasters on the mental health status of people living in disaster prone areas especially the child and adolescent population. Our study group was child and adolescent population between 10 to 15 years.

The psychologist and volunteers had to collect data in disaster affected zone, yet they collected data which gave a clear cut findings and a very clear statement on climate change and mental health. The values are very high and consistent in most subjects across all twenty domains.

It is our opinion that Mental health support should be provided for all victims of climate change and natural disaster calamities such as cyclone and earthquake.

Disclosure of Interest: None Declared

EPP0317

Association of youth climate worry with current and past mental health symptoms: A longitudinal population-based study

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Introduction: Young people are worried about climate change but the association between climate worry and current and past mental health has not been examined in population-based samples.

Objectives: To examine 1) the prevalence of worry about climate change at age 23-years and its association with contemporaneous mental health symptoms, and 2) and adolescent mental health symptoms.