

Description of clinical case Patient 10-year-old pediatrics sent from service due to history of frequent admissions for recurrent abdominal pain. In the bypass request indicate that this is a patient of perfectionistic traits; detect dysfunctional family dynamics highlighting the rivalry in the phratry, and with an equal difficulty in the field. From 2010 to 2016, he has made more than 30 visits to hospital emergency combined intervention of psychiatry and psychology and multidisciplinary service available with a pediatric surgery and pediatrics is performed.

Exploration and complementary tests From 2011 to 2016, it has made 44 blood tests, sonograms 9 full abdomen, abdominal renal scintigraphy without significant findings.

Diagnosis F45.5 pain disorder.

Differential diagnosis Symptoms due to a medical condition. Other symptoms substance-induced mental disorders: non-specific conversion disorder, pain disorder, hypochondriasis, body dysmorphic disorder, somatization disorder, simulation, factitious disorder, medical symptoms. . .

Conclusions Psychosomatic disorders are one of the most common clinical forms of mental disorders in childhood and adolescence expression. Knowing the stages of development and operating characteristics. In clinical practice, mainly in primary care, tend to find an organic cause somatic complaints in children, so prevalence data and/or referral to specialized services vary depending on mental consulted sources is critical to understand the pathogenesis of these disorders.

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EV0145

Adolescent type outpatient in an addictive behavior unit profile – child and youth

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Morbidity and mortality during adolescence is primarily the result of certain risk behaviors. Today, it is observed that early teens contact form with snuff, alcohol and legal drugs and not many of them have a high intake of these substances. Habits such as those mentioned on many occasions not only maintained during adolescence, but the rest of life extend causing major consequences for public health.

Objectives To know the magnitude and characteristics of the use of legal drugs (alcohol and snuff) and illegal (marijuana, cocaine, heroin, inhalants) in the – adolescent/child – population who come regularly to addictive behavior unit of a rural environment.

Material and methods Descriptive study of a sample of adolescent patients ($n = 30$) who came in the past two years to addictive behavior unit. Data collection of such patients is performed by assessing sociodemographic characteristics (age, sex, population, education level. . .), age of onset and type of use of psychoactive substances, and comorbidity of psychiatric disorders.

Results/conclusions The average age of the adolescent patient is 14.5 years (SD 1.09) with an age of onset in the consumption of toxic 13.6 years (SD 1.03). As for sex, 20% were women. The dropout among adolescents of this sample is 43.3% (SD 1.05). A complete prevalence of marijuana use (100%), and mono-consumers only 10% was observed. Seventy percent of the sample has associated psy-

chiatric disorders and 46.15% in psychiatric family history there; 38.4% up to legal problems are collected.

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EV0146

Non-suicidal self-injury in adolescents: A diagnostic and psychopathological approach. A case presentation

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Self-injurious behavior is a major public health problem. An increase in the number of self-injuring adolescents has been observed since the mid-1960s.

Description of clinical case C. is a 14 teenager who comes to a mental health center for the first time a year ago for having numerous self-injuries in the forearm. She says that she cannot avoid doing so in moments of anxiety and that, in addition, when she is hurt she calms down. Throughout the interviews, C. relates that after the death of her best friend in a traffic accident she is alone and with episodes of anxiety.

Exploration and complementary tests It is important to analyze the risk factors of self-injurious behaviors in adolescence such as:

- personal characteristic;
- psychiatric disorders;
- family characteristics;
- mass media.

Diagnosis Depressive episode (F32).

Differential diagnosis In general, self-injury is considered as a symptom or characteristic of a specific psychiatric disorder. Stereotyped self-injury is characteristic of processes of cognitive deficit of the level of severe and profound mental retardation. Compulsive self-harm involves symptomatic habits such as severe scratching of the skin or already differentiated psychiatric entities, such as trichotillomania, onicofagia or delusional parasitosis. . . Important psychotic disorder.

Conclusions Following the Task Force's criteria, in relation to probably effective therapies, it can be concluded that the therapy based on mentation for adolescents (MBT-A) is the first effective treatment for the treatment of self-harm in adolescents.

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Must we fear antidepressants in adolescents?

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Introduction Epidemiological studies have established that teenager's prevalence rates of major depression are significant (10%). The media has given a good deal of attention to the potential risks of antidepressants and their connection to increased suicidality (especially in children and adolescents). These concerns have had a significant impact on both the prescribing of antidepressants and the parental fears about their use. It is interesting to note