

tive functioning which has become disorganised, aiding a gradual return of the cohesion of ego and self and in some cases, cessation of psychotic symptoms.

Methodology An observational study of one year on a group of ten adolescents aged 17 to 20 in institutional and private settings with psychotic manifestations and functioning. The group were tested at the start and end of the study using WAIS-IV and MMPI-A.

Results The adolescents recruited showed a faster recovery of the cohesive processes of their fragmented ego as well as a quicker resumption of social relations. Our model provided an organising function and a flexible yet secure 'container' (Bion, 1988) for the young people's psychic structure. The tests showed a demonstrable improvement in their verbal comprehension, visual-spatial reasoning, fluid reasoning, working memory and processing speed.

Conclusions Psychotic manifestations occurring in adolescence may decrease with an immediate integrated and rehabilitative intervention, without need of an institutional psychiatric setting. In conclusion, we find that "psychosis" in adolescence is a prognosis and not a diagnosis.

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

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EW0068

Pregnancy and cord vitamin D status and symptoms of autism spectrum disorders in toddlers: An Odense child cohort study

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Introduction Vitamin D deficiency is widespread globally in pregnant women and is suggested to contribute to offspring risk of symptoms of autism spectrum disorders (ASD), but findings are inconsistent.

Objectives To investigate whether low prenatal 25OHD exposure and 25OHD status in early life increase risk of early symptoms of ASD.

Aims To investigate early signs of ASD.

Methods From the prospective birth cohort, Odense child cohort ($n=2.549$), Denmark, we included singletons with their mothers with available serum concentrations of 25OHD at early pregnancy ($n=1.231$), late pregnancy ($n=1.361$), and birth ($n=2.082$). ASD symptoms were rated by parents on the pervasive developmental problem (PDP) scale of the Child behavior checklist for ages 1½-5 (CBCL 1½-5). Associations between 25OHD and PDP score were analyzed by multiple linear and logistic regression models. A priori included covariates were gestational age, child gender, birth weight, season of birth, parity, parental psychiatric diagnoses, maternal age, smoking habits, alcohol consumption, education level, vitamin D supplementation, and pre-gestational BMI.

Results Means (SD) of 25OHD for early pregnancy, late pregnancy, and cord were 65.5 (21.5), 78.7 (27.0), and 47.0 (21.7) nmol/L, respectively. PDP data were obtained at a mean (SD) of 2.7 (0.6) years of age. Data from the regression analyses are pending.

Conclusions In this well-off cohort with relatively high levels of cord 25OHD, power calculations allows us to detect a true change

of 0.02 PDP scores per 10 nmol/L change in 25OHD. Further studies will clarify whether early PDP scores track later ASD diagnosis.

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EW0069

Psychiatric assessment of cases with self-inflicted poisoning in a sample of Egyptian children and adolescents

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Introduction Suicide in children and adolescents is commonly underreported and studied. It is an interplay area of multiple static (sociodemographic), and modifiable (impulsivity, psychiatric morbidities, adverse life events (ALE), abuse, bullying) variables.

Objectives and aim To assess and identify relative significance of dependent and independent risk factors in youngsters attempting self-inflicted poisoning.

Methods Consecutive recruitment of patients aged 7–18, with normal IQ, admitted to poison control centre over 13 continuous months, with self-induced poisoning. All were assessed after guardians' written informed consent for different risk factors identified for suicidal behavior using appropriate scales (PPS, SRRS-Y, FSSCS, BIS-11, J-TCI, Mini-Kid). Controls with no history of suicidal attempt were matched for age, sex and sociodemographics among their families.

Results One hundred and twenty cases (16.7 years \pm 1.6 SD, 91% females) and 100 controls (age 16.4 years \pm 1.7 SD, 90.8% females) were assessed. In cases, 90.8% were of low/middle socioeconomic status, 73.5% had previous attempt, average within 10 months, 17.5% planned their attempt, 10.8% had a witnessed attempt. Stressor within 2 days was reported in 75.9%, severe in 40%. Impulsivity was more in its cognitive, planning and motor components ($P=0.001$ in each) among attempters. Cases scored more on Novelty seeking, harm avoidance and reward dependence than controls who had more persistence, self-directedness and cooperativeness. Attempters had significantly more past medical and psychiatric history ($P=0.001$, 0.05 respectively), 77.5% had a working psychiatric illness, 2% in controls.

Conclusion Repeated suicidal attempts were the majority, with impulsivity as a predictive risk, especially if psychiatric morbidity or ALE in youths were encountered.

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EW0070

Families of children with autism spectrum disorders: Communication and mental health

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Persons with autism need special care during all life and therefore the caretakers need attention too. Parental stress in families with children with autism is significantly higher than the observed in families with children with other disorders or with typical development. Communication is specially affected in autism, is one of parent's first concerns and may increase stress. This study asked if parents of non-verbal children with autism have higher levels of stress than parents of verbal children with autism. The purpose

of this study was to assess the stress levels of parents of children with autism and to verify its association with the inability of verbal communication and the relationship to quality of life. Participants were parents of 75 children with autism and 100 parents with no complaints about their children development. They were divided in 3 groups. All participants responded to questionnaires regarding: socio-demographic date, stress level and quality of life. Most parents presented medium level of stress. Presence of speech did not yield to significant differences. More parents of children with autism reported high levels of stress. Associations between the stress level and the quality of life were also observed. It can be concluded that the stress level of parents of children with autism not influenced by their lack of verbal communication.

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EW0071

Improvement of autism symptoms after comprehensive intensive early interventions in a clinical setting

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Introduction The last two decades increase in early detection and diagnosing children with autism spectrum disorders (ASD) has challenged child and youth habilitation centers to offer the best and most appropriate treatment and support.

Objectives and aims To evaluate an ongoing Comprehensive Intensive Early Intervention (CIEI) program for children with ASD based on principles of behaviour learning and developmental science, implemented in the child's natural setting.

Method The change in autism symptoms among children participating in CIEI (intervention group, $n=67$) was compared with children who received traditional habilitation services only (comparison group, $n=27$). Symptom changes were measured as evaluation-ADOS-R-scores, total-, severity-, and module-adjusted-scores (ADOS-MAS), minus the corresponding baseline-scores, divided by the time between baseline and evaluation, and estimated using ANOVA adjusting for confounders. The ADOS-MAS were developed to allow improved communicative functions to be counted in the overall symptom improvement.

Results Children in both study groups improved their autism symptoms as measured with the ADOS-MAS, and the improvement was statistically significantly larger among children without any developmental delay ($P<.001$). When adjustments were made for developmental delay, there was a statistically significant larger improvement of ADOS-MAS among children in the intervention group than in the comparison group ($P=0.047$). Similar results were found for ADOS-R-total and ADOS-severity scores ($P=0.023$ and $P=0.060$, respectively).

Conclusion The results of the current study indicate that the CIEI program significantly improve social and communicative skills among children with autism, and that children with developmental delay could benefit to a similar degree as other children.

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EW0072

Emotional and behavioral problems in early adolescents and association with socio-demographic risk factors

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Aim The aim is to analyse the frequency emotional and behavioural problems early adolescents and association with socio-demographic risk factors.

Subject and methods We analysed a group of 240 early adolescents (11–15 years) from the area of Tuzla Canton, Bosnia and Herzegovina, in the general population. For the assessment of children's emotional and behavioural problems, the Strength and Difficulties Questionnaire – SDQ is used. Data were processed by descriptive statistics. For the assessment association between socio-demographic risk factors and emotional and behavioural problems in early adolescents we used Pearson correlation test.

Results The result show that the frequency of emotional and behavioural problems are present in 3% of cases, The results of correlation sociodemographic risk factors and emotional and behavioral problems, showed that unemployed mothers have a significant increased risk of developing behavioral disorders in early adolescents ($P<0.05$). Low family economic status leads to a significantly higher frequency of emotional symptoms in early adolescents, poor attitude towards society and significantly higher overall difficulties ($P<0.05$). Higher levels of parental education was significantly associated with a higher frequency of behavioral problems and illness in the family leads to a much more emotional problems ($P<0.05$).

Conclusion The obtained results of this study indicate that early adolescents showed low levels of emotional and behavioral problems. There is a significant correlation between socio-demographic risk factors and emotional and behavioral problems early adolescents.

Keywords Emotional problems; Behavioral problems; Children; Early adolescents; Sociodemographic factors.

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EW0073

What are the mental health impacts on adults coming from childhood bullying?

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Though there is no universal definition of childhood bullying, the term is often used to describe when a child repeatedly and deliberately says or does things that causes distress to another child. Research shows that persistent bullying can cause depression and anxiety and contribute to suicidal behaviour.

This paper will bring into focus some studies done by the Department of Mental Health that show that the impact of bullying in childhood can cause depression, anxiety and especially OCD in adult. Also strongly contributes to bullying in suicidal behaviour. The study involved 177 children aged 9–15 years old and were followed until they were 19–25 years old. The study ended in 2013. The subjects in this group were found to be 6 times more likely to have a serious physical illness, or develop a psychiatric disorder in adulthood than those who were not involved in bullying.

Another study in 2014 found that the negative effects at social, physical and mental health of childhood bullying are still evident up to 40 years later. Victims of bullying are 6 times more likely to