

Methods: Anonymised questionnaires were used to collect the data. They were given to the patients staying in the department of psychiatry of Children's Clinical University Hospital in Riga, Jugla as well as to some adolescents visiting child psychiatrist in outpatient settings from January till the end of April, 2022. The following personal data were collected - age, gender, family status - as well as information about different factors affecting the mental health of adolescents during the pandemic: how often they spent time with friends, whether or not they have lost any friends, distance learning, seeking help from mental health professionals, quality of sleep and a chance to receive emotional support. Patients also filled Liebowitz social anxiety scale and PHQ-9: modified for adolescents' depression scale.

Results: Restrictions due to pandemic mostly affect the participants negatively, promoting the worsening of social anxiety symptoms in 42% of the respondents with positive results of the Liebowitz scale. Statistically significant connection between social anxiety and depression symptoms was found. During the pandemic most of the patients were more often seeking professional help. Patients with worsening social anxiety symptoms were found to have statistically significant connection to losing friends during the pandemic. Most of the recipients with already diagnosed social anxiety were given this diagnosis during the pandemic (67% of the cases).

Conclusions: The restrictions due to Covid - 19 pandemics negatively affect adolescents including those with social anxiety, promoting the worsening of symptoms as well as prevalence of depression symptoms in these individuals. The results suggest that coping strategies must be implemented in order to decrease the consequences of the pandemic on adolescents.

Disclosure of Interest: None Declared

EPV0141

Trichotillomania with trichobezoar in 11-year-old girl - difficulties of recognizing the disorder and possible complications: case report

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Introduction: Trichobezoar is a rare entity that primarily occurs as a complication of psychiatric disorders, most often in adolescent and young females suffering from trichotillomania (TTM) and trichophagia. In many cases, children with TTM unwillingly admit hair pulling, deny ingesting hair and often feel ashamed of their disease and try to hide it.

Objectives: Our main aim was to present an uncommon complication of TTM and trichophagia and to point out the importance of early diagnosis and prevention of complications of the disorder. Furthermore, we describe the role of a child's psychological features and family dynamics in etiopathogenesis of TTM, as well as comorbidities and specific clinical presentation.

Methods: Case report.

Results: An 11-year-old girl was admitted to the pediatric department due to abdominal pain. After detailed pediatric differential diagnosis, trichobezoar was diagnosed and she was treated surgically. While she did not deny ingesting her hair, three months after surgery (TTM was dermatologically verified from the beginning of the treatment) she mentioned focused hair pulling for the first time. During individual cognitive behavioral psychotherapy the following was recognized in the patient: perfectionism traits, inhibition in expressing emotions, elements of depression, anxiety. During family psychotherapy elements of alexithymia were observed.

Conclusions: Cooperation among medical experts (pediatrician, dermatologist, child psychiatrist, pediatric surgeon etc.) and awareness of this disorder is important for recognizing it at an early stage and starting the treatment, especially considering habit-forming mechanism, psychiatric comorbidity, emotional distress and preventing other complications including trichobezoars.

Keywords: adolescents, trichobezoar, trichophagia, trichotillomania

Disclosure of Interest: None Declared

EPV0142

Reading assessment in ADHD and dyslexia in Brazilian teenagers

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Introduction: Attention Deficit Hyperactivity Disorder (ADHD) and Dyslexia are among the most frequent developmental disorders in school-aged students, and both often cause an impact on scholar reading performance. Therefore, it is fundamental to trace the differential profile in reading performance in such diagnoses. Competent reading occurs through the interaction of several cognitive processes, such as decoding, fluency, and oral and reading comprehension, that should be assessed in an evaluation.

Objectives: The study aimed to characterize the performance of students with ADHD and dyslexia.

Methods: We assessed 25 adolescents, aged between 11 and 14 years old, from 6th to 9th year of middle school of public and private schools in Brazil, divided into two groups: the group with ADHD (16 students) and the group with dyslexia (9 students). The diagnoses were established by a multidisciplinary center and there were no comorbidities for any case. The instruments used were: Comprehension Test of Words and Pseudowords II (TCLPP II) to assess decoding (indicate if the word is correct or incorrect); Reading Fluency Test (TFL) to assess fluency in single words and in text reading; Cloze Reading Comprehension Test (TCCL) to measure reading comprehension; and the WISC vocabulary subtest to assess auditory comprehension.

Results: Non-parametric analyzes revealed statistically significant differences in measures of textual comprehension, especially in the tasks that involved decoding and fluency processes, evidencing superior performance of the group with ADHD in these tests. Participants with dyslexia had a significantly higher performance in relation to the number of word omissions, that is, they had lower

omission errors. There was no significant difference between groups in auditory comprehension.

Conclusions: A differential profile was found in reading performance, consistent with the cognitive deficits classically pointed out in the literature for each diagnosis: phonological deficits in dyslexia, with problems in decoding and fluency; and attentional deficits in ADHD, with omission errors. In the comprehension measures, dyslexic group had significant lower performance than ADHD in the Cloze Reading Comprehension Test, but there was no difference in the Vocabulary subtest-WISC. An explanatory hypothesis is that, to understand the text, it is necessary to recognize the words previously, whereas, in the WISC, it is not necessary to read, since the questions are oral. These results corroborate the hypothesis that deficits in reading comprehension in dyslexia are more related to difficulties in word recognition and fluency skills than in general listening comprehension.

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EPV0143

DISRUPTIVE IRRITABILITY & FAMILY DYSFUNCTION CORRELATION: ANALYSIS THROUGH FAMILY DRAWINGS

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Introduction: Drawing represents mainly a motor activity of expression. Drawing represents a form of non-verbal language that is very important both cognitively and affectively. Therefore, it allows to hypothesise and evaluate the degree of neurodevelopment of individuals as well as their level of interaction with the environment.

Family sketches can be evaluated in a projective, neurocognitive and affective way to provide insights on the attachment system, degree of bonding, communication, social and affect interaction as well as difficulties or problems that have motivated emergency consultation.

Objectives: This study evaluate the possible correlation between family dysfunction and irritability as cause of request of consultation in an emergency department of mental health in child & adolescents through the analysis of family drawings.

Methods: This is a retrospective, observational study of correlation between the reasons of emergency consultations, dysfunctional irritability and family difficulties represented through family drawing. It is based on a randomised sample of 30 reports of emergency appointments of children between 8 to 13 years old that have been examined in the Child & Adolescent Psychiatry Emergency Department at the Pitié Salpêtrière Hospital during two years for Emotional or Irritability dysfunction.

An adaptation of both Goodenough-Harris Drawing projective test and Corman test were used to evaluate findings from family drawings as well as neurocognitive parameters of drawing technics, sociodemographic dates, cognitive level and family dysfunction.

Results: The degree of cohesion, identification and devaluation of adult figures have been important elements of interpretation in irritability dysfunction and family drawings.

Conclusions: The family environment could be a factor in the interpretation of chronic irritability and its manifestations on the child's family drawings establish a clear correlation.

The adapted assessment of the family drawing could be an important tool in the nosological exploration of children's mental health in emergency, especially on relational systemic representation and symbolization.

Disclosure of Interest: None Declared

EPV0144

Early childcare from 0 to 3 years and child behavioural difficulties at age 5.5 years in France, data from the ELFE mother-child cohort

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Introduction: Previous studies have showed that the type of early childcare can be associated with child behavioural difficulties though results vary across countries.

Objectives: To investigate the link between early childcare from birth to 3 years and child behavioural difficulties at age 5.5 years, in the French context.

Methods: In this study (n = 9,699), parents participating in the French ELFE birth cohort reported their child main childcare type used between birth and three years of age (centre-based (22.6%), childminder (43.6%), informal (8.2%) or parents only [25.7%]), and the child's behaviour through the Strengths and Difficulties Questionnaire (SDQ) at age 5.5 years. Scores were calculated for each SDQ subscale as well as the total SDQ scores. Logistic regression analyses were carried out adjusting on socio-demographic, parents' and child's characteristics to evaluate the association between early childcare type and abnormal SDQ total score (>16) as well as subscale scores.

Results: In the study population, 584 (6.02%) children had abnormal SDQ total score, and 1,104 (11.4%) in the emotional subscale, 573 (5.91%) in the peer relationship subscale, 1,433 (14.8%) in behavioural subscale, and 1,097 (11.3%) in the hyperactivity subscale. After adjusting, compared to children who were looked after by their parents only, those who were in centre-based childcare had a lower likelihood of having an abnormal SDQ total score (OR_a = 0.76 [95% CI: 0.58 – 0.99]), while there was no significant difference for children who were in a childminder's care (OR_a = 0.94 [95% CI: 0.75 – 1.17]) or in an informal childcare (OR_a = 1.18 [95% CI: 0.86 – 1.63]). In additional analyses, we found that compared to children in parental care only, children in centre-based childcare had a decreased likelihood of having abnormal internalising subscales scores: emotional subscale, (OR_a = 0.81 [95% CI: 0.67 – 0.99]) and peer relationship subscale, (OR_a = 0.79 [95% CI: 0.61 – 1.02]). All other associations were not significant except for the informal childcare which was associated to a higher likelihood of abnormal behavioural subscale (OR_a = 1.29 [95% CI: 1.03 – 1.62]).