

The results showed us a specific development disorder comorbid with a deficit of attention so we decided to start with the psychopharmacological treatment and psychotherapy.

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## EV225

### Early interventions practices in ASD – Maternal behavior in spontaneous interaction with their children

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Recent studies point out that the occurrence of Autism Spectrum Disorders (ASD) is up to 1%. In Brazil, providing services of medical diagnosis for children with ASD takes precious time. The time spent waiting for the conclusion of the diagnostic process would be extremely important to the child's development. In this context, the parent–children interaction is an important aspect to be considered as a factor that has a positive impact in this process. The aim of this study was to explore maternal behavior during a spontaneous play situation with their children. All subjects were filmed for 30 minutes during a spontaneous play situation with their mothers that did not receive any special instructions. The subjects were 30 normal children, 3 of each age (respectively 9, 12, 15, 18, 21, 24, 27, 30, 33 and 36 months) and 20 autistic children with ages varying from 2:10 to 10:6 (not expected any chronological association). The whole corpus was analyzed considering of each subject, of each group and the possible associations between the groups. The analysis of the maternal behavior provides data about the importance of mother–child interaction and how everyday life activities and routines can be used to increase the opportunities to improve the ASD child's communicative abilities and their creative use as an important part of the whole development. These findings provide further evidence that families should be included in any plan for intervention designed towards ASD children.

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## EV232

### Affective symptoms and emerging psychotic disorder in adolescents

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Depressive symptoms are frequently reported during the period preceding the onset of schizophrenia in adolescents when such symptoms can be mistaken for those of mood disorder. However, it is unclear which emotional symptoms should be considered predictive of schizophrenia onset.

The types of emotional disturbances that may precede schizophrenic disorder were sought through a review of historical descriptive studies and seminal works using a phenomenological approach. Five main types of emotional disturbances have been found as prodromal symptoms of a schizophrenic disorder: (1) increased sensitivity to stress, (2) poor or incomplete expression of emotions, (3) reduced emotion sharing, (4) emotional detachment, and (5) disconnection between the perception and expression of emotions. Studies based on phenomenological views of schizophrenic disorders stressed the chronological sequence of these symptoms in the same person. For example, the term “delusional mood” (Wahnstimmung) coined to describe changes

in the perceived atmosphere encompass mood disturbances from subtle emotional overreactivity to more severe symptoms that could evoke athymhormia.

Analysis of recent studies among subjects at high-risk for psychotic transition showed that the presence of mood symptoms at a very early stage of the disorder is common. While these symptoms predict a lower level of general functioning, they were not associated with a higher risk of developing a schizophrenic disorder at follow-up.

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## EV233

### The RDoC roadmap to explore neurocognitive difficulties of youths with severely dysregulated mood: Current findings and prospects

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The Research Domain Criteria (RDoC) has been developed as a multilevel approach to study neurocognitive impairments in psychiatry. Considering the high prevalence and the functional impairment associated with disruptive mood dysregulation disorders (DMDD) in youths, a better understanding of the neurobiological mechanisms underlying such emotional difficulties could help guide therapeutics.

So far, three key difficulties in the socio-emotional neurocognitive process have been documented in youths with DMDD:

- a deficit in the recognition of facial emotions has been found (systems for social process/social communication construct). Functional imagery has shown that such impairment is associated with a hypoactivity of limbic neural structures, especially the amygdala. Such findings are in line with those found in adults with depressive episodes;

- poor flexibility during cognitive tasks (cognitive systems/cognitive effortful control construct). In particular, these youths score poorly in neuropsychological tasks associated with response reversal paradigm measuring the capacity to change cognitive strategy when the rules of the game change implicitly. These results partly explain the difficulties facing DMDD youths in a frustrating context;

- higher level of emotional arousal. Such youths would present specific impairments in the initial stages of attention; reflected by lower N1 event-related potential amplitude during Posner affective tasks.

Ongoing studies are being conducted to explore other RDoC domains such as abnormalities in circadian rhythms; in metacognition and perspective-taking tasks; and in the non-facial communication process (such as prosody or postural expressions). A computational model of interactive behaviors is a promising field to study difficulties of DMDD youths in regulating moods during social interaction.

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## EV234

### Childhood adversities and emergency room visits

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**Introduction** Institutionalized children and adolescents who reside in foster centres are a subgroup of population that use mental health resources. This group of population has an increased risk of physical and psychopathology health problems. That translates into a greater number of emergency visits. This is the same perception presented by different professionals.

**Objectives** The aim of the study is to analyse visits to emergency child and adolescent psychiatry service from a pediatric hospital. Also ask for a point of view of the professionals about it.

**Methods** We select all the patients attended the emergency psychiatry child and adolescent care that were institutionalized. The sample was collected for 4 months in a pediatric hospital.

**Results**  $n=66$  (51.5% male; mean age  $14.09 \pm 1.95$  years old), 31.8% was the first time at the emergency room, 31.8% had consulted between 2–4 times and 36.4% over 4 times. The main reason for consultation was aggressiveness (66.7%). The three main discharge diagnoses were conduct disorder (50%), adjustment disorder (25.7%) and TDAH (7.5%) The 45.5% had a history of drug use and the 24.2% of self-harm. Asking professionals 80% responded perception of increased emergency consultations and the 90% think inadequate value between 50–70% of queries.

**Conclusions** The boys institutionalized perform a high use of paediatric and psychiatric emergencies. There are a significant number of re-consultations. Professionals have the perception that their emergency visits are increasing. Since patients are at high risk of suffering mental disorders and high use of emergency would be interesting to develop specific protocols for emergency care for these groups.

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#### EV235

### Continuity of attachment in children with disruptive behavior disorders and in their parents: A pilot study

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**Introduction** The quality of adult–infant attachment plays an essential role in influencing the children's well-being (Groh et al., 2012). Disruptive Behavior Disorders (DBD) has been found as particularly influenced by the presence of unavailability in the parental caregiving. It is widely attested that parents' attachment states of mind predict the attachment patterns of their children. Nonetheless, the investigation of the attachment organization during the middle childhood shows inconsistent data. Moreover, a paucity of studies focused on the role of father's attachment in this period still remains.

**Objectives** This pilot study investigates the attachment patterns of children with DBD and those of their parents.

**Aims** The aims are to verify the presence of: (1) an over-representation of Disorganized attachment in these children; (2) an over-representation of Irresolution with respect to abuse or loss in one or both their parents.

**Methods** The sample consists of 33 subjects:  $n=11$  children with DBD and  $n=22$  parents. The children completed the Child Attachment Interview (Shmueli-Goetz et al., 2000) and the parents completed the Adult Attachment Interview (George et al., 1985).

**Results** Findings showed: (1) a significant presence of Disorganized attachment with respect to both parents in the children; (2) an over-representation of Insecure states of mind in their parents; (3) a more significant presence of Disorganization in the fathers than in the mothers.

**Conclusion** This focus on the topic of intergenerational transmission of attachment in a specific clinical sample enriches the

research, underlining the more pronounced role of fathers' attachment configuration.

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#### EV236

### Disruptive behavior disorders and somatic symptoms disorders: Which strategies of emotion regulation children and their parent's use?

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**Introduction** Emotion regulation (ER) is defined as the processes through which emotional awareness and experience are monitored, evaluated, maintained, and modified (Thompson, 1994). Difficulties with these processes have been proposed to increase risk for psychopathology. Disruptive behavior disorders (DBD) and somatic symptoms disorders (SSD) are characterized by an inability to express and modulate emotional states. Research aims to understand how ER influences mental health.

**Objectives** We focus on two strategy of ER: Cognitive Reappraisal, involves changing the way one thinks about a situation in order to change its emotional impact; Expressive Suppression involves suppressing or hiding external expressions of emotion from others (John and Gross, 2004)

**Aims** We assess ER in order to examine the relation with SSD and DBD in childhood and with their parents.

**Methods** The sample consists of 188 subjects divided in four groups:  $n=41$  children with DBD ( $M=10.78$  years,  $SD=2.11$ );  $n=50$  parents (36 mothers and 14 fathers) of children with DBD;  $n=44$  children with SSD ( $M=11.98$  years,  $SD=2.04$ );  $n=53$  parents (40 mothers and 11 fathers) of children with SSD. Were administered the ERQ (Balzarotti et al., 2010) for parents and ERQ-CA (Gullone and Taffe, 2012) for children.

**Results** DBD children reported higher levels of Suppression than SSD subjects; high levels of Suppression were reported in mother SSD and in father DBD.

**Conclusion** This study extended previous research in childhood, including both mothers and fathers. The findings contribute to a greater understanding of the development of ER, which has important implications for psychological wellbeing.

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#### EV237

### The evolution of cognitive functioning in adolescents with early onset psychosis

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**Introduction** Cognitive deficits (executive functions, verbal and spatial learning and memory, visual processing and attention) are a fundamental trait of schizophrenia.

**Objective** The main objective of this study is to compare the cognitive functioning in psychotic adolescents at the psychosis onset and after one year, using psychological tests.

**Methods** This is a longitudinal study, during a period of two years and a half. Twenty-eight patients with first psychotic episode agreed to participate to this study and were assessed during their hospitalization in a university clinic for child and adolescent psychiatry in Cluj-Napoca, Romania. The diagnosis was based on DSM-IV criteria. All the patients were initially assessed for intelligence level