

Results: We conducted our study with 150 patients. The diagnosis of PTSD according to DSM 5 criteria was retained in 56.2% of patients (N=80).

The average age was 12.4 years with extremes ranging from 7 to 17 years. We noted a female predominance at 58.8% (n=47)

Male gender was significantly associated with persistent avoidance ($p=0.03$). Sexual assault was significantly associated with the severity of flashback symptoms ($p<10^{-3}$) and reckless and self-destructive behaviors ($p<10^{-3}$) and with the frequency of dissociative symptoms ($p<10^{-3}$).

We also noted in our work that dissociative symptoms were significantly more frequent in victims with no personal psychiatric history with a p value of 0.021.

In our population, we found a predominance of hypervigilance and a greater severity of exaggerated startle reactions in the absence of a family psychiatric history with a p value of 0.048 and 0.008 respectively. We noted a significant predominance of exaggerated startle reactions in relation to the absence of exposure to previous traumatic events with a p equal to 0.043

Conclusions: The specificities identified in relation to the child should be taken into consideration during further evaluations and further analysis in the general population.

Disclosure of Interest: None Declared

EPV0199

Diagnostic stability in adolescents transiting to adult services: exploring the patterns of diagnostic adjustments

N. Baldaqui^{1*}, C. Crucilla², M. G. Menditto², L. Malvini², A. M. Maltese², M. Percudani² and S. Barbera²

¹Psychiatry and Psychology Department, Hospital Clínic de Barcelona, Barcelona, Spain and ²Psychiatry Department, ASST Grande Ospedale Metropolitano Niguarda, Milan, Italy

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1550

Introduction: Most mental illness of adult life begin in late adolescence, affecting young people when they require transition to adult services. In <18 years old patients is more difficult to establish a definitive diagnosis, so diagnoses are often unstable and temporary. In young patients, understanding diagnostic stability may help in clarifying the course, developmental changes, and long-term prognoses of psychiatric disorders. Little research has explored the diagnostic adjustments that occur in child and adolescent mental health services, however previous studies reported that mood disorders and schizophrenia showed more stability than other diagnoses.

Understanding diagnostic trajectories is necessary to improve developmental psychopathology, in order to acquire more discrete diagnostic entities, and clinical judgements, regarding risk and prognosis.

Objectives: as the evidence of diagnostic stability from childhood (child and adolescent mental health services) to adulthood (adult services) is limited, the aim of this study is to describe the clinical features in patients from child and adolescent mental health services in transition to adult services and to compare the main diagnosis of these patients made in both services.

Methods: all individuals, between 18 and 25 years old, admitted to our outpatient clinic specialized in prevention, diagnosis and

treatment of mental illness in adolescents (ASST Grande Ospedale Metropolitano Niguarda, Milan), referred to our service between 2021 and 2022. Clinical Diagnosis were established using ICD-10 criteria.

Results: 301 new patients were admitted in our outpatients service: 171 in 2021 and 130 in 2022 (until October). The mean age was 21.08. The 30.2% of patients come from child and adolescent mental health services (29.2% in 2021 and 31.5% in 2022). The main diagnosis of these patients were: first reaction to severe stress and adjustment disorders (F43), second specific personality disorders (F60) and thirteenth eating disorders (F50). The main diagnosis made in our services were: first specific personality disorders (F60), second first reaction to severe stress and adjustment disorders (F43), thirteenth other anxiety disorders (F41). 56.1% of patients have the same diagnosis in both services and 43.9% have a different diagnosis. There were not differences in sex (60.5% female and 39.5% male). Patients from child and adolescent mental health services were younger (19.68 vs 21.69), not statistically significant.

Conclusions: Further research is required to understand diagnostic trajectories, especially longitudinal studies in minors during transition period to adult services, in order to find patterns of diagnostic adjustments.

Disclosure of Interest: None Declared

EPV0200

Young Adults' New Cognitive Formations and the Feeling of Becoming an Adult

O. V. Markish*, S. M. Churbanova and O. B. Chesnokova

¹Department of Developmental Psychology, Faculty of Psychology, Lomonosov Moscow State University, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1551

Introduction: In adolescence, the person transitions from the reality of childhood, where he is mostly dependent on his parents, to the reality of adult life, which necessitates the acquisition of adult role systems, established autonomy, and ability to accept responsibility. The most important feeling during that time is that of maturation into adulthood.

Objectives: This study was designed to investigate the impact of new cognitive formations on the maturation of young adults' self-consciousness from the perspective of a subjective evaluation of the experience of becoming an adult, particularly its cognitive component.

Methods: The study was based on Akimova's Adult Practical Thinking Scale (Akimova et al., 2008), Zack's Theoretical Thinking Scale (Zack, 2010), Personal Differential Test (Bazhin & Etkind, 1983), Szustrowa's Egocentric Associations Scale with content analysis applied (Szustrowa, 1976), The Feeling of Becoming an Adult Expression Scale (Andriushchenko et al., 2014) and included 64 participants aged 18-22 years. The approbation group had 12 participants and the core group had 52 participants.

Results: The IBM SPSS 22 statistical rank correlation analysis provides support for: negative moderate correlation between (1) the reflective type of theoretical thinking and personal egocentrism ($rs=-.31$; $p=.024$), (2) adult practical thinking level and awareness of a new position in adolescents-adults relations self-consciousness component ($rs=-.28$, $p=.048$); positive moderate correlation between (1) social intelligence and the feeling of becoming an adult expression degree ($rs=.39$; $p=.004$), (2) orientation to