

**Methods:** A study on CDC National Youth Risk Behavior Surveillance (YRBS) (1991-2017). Responses from adolescence related to cyberbullying and suicidality were evaluated. Chi-square and mix-effect multivariable logistic regression analysis was performed to find out the association of cyberbullying with sadness/hopelessness, suicide consideration, plan, and attempts.

**Results:** A total of 10,463 adolescents, 14.8% of adolescents faced cyberbullying a past year. There was a higher prevalence of cyberbullying in youths aged 15-17 years (25 vs 26 vs 23%), which included more females to males (68 vs 32%). (p<0.0001) Caucasians (53%) had the highest number of responses to being cyberbullied compared to Hispanics (24%), African Americans (11%). (p<0.0001) There was an increased prevalence of cyberbullied youths with feelings of sadness/hopelessness (59.6 vs 25.8%), higher numbers considering suicide (40.4 vs 13.2%), suicide plan (33.2 vs 10.8%), and multiple suicidal attempts in comparison to non-cyberbullied. (p<0.0001) On regression analysis, cyberbullied adolescence had a 155% higher chance of feeling sad and hopeless [aOR=2.55; 95%CI=2.39-2.72], considered suicide [1.52 (1.39-1.66)], and suicide plan [1.24 (1.13-1.36)].

**Conclusions:** In our study, cyberbullying was associated with negative mental health outcomes. Further research is warranted to examine the impact and outcomes of cyberbullying amongst adolescents and guiding the policies to mitigate the consequences.

Parameters	Odds Ratio	95% Confidence Interval	p-value
<b>Mental health conditions</b>			
<b>Sad and hopeless (vs no-sad)</b>	<b>2.55</b>	<b>2.39 - 2.72</b>	<b>0.0001</b>
<b>Considered suicide</b>	<b>1.52</b>	<b>1.39 - 1.66</b>	<b>0.0001</b>
<b>Made suicide plan</b>	<b>1.24</b>	<b>1.13 - 1.36</b>	<b>0.0001</b>
<b>Suicide attempts (0 times)</b>			
1	0.87	0.76 - 0.99	0.029
2-3	0.73	0.63 - 0.85	0.0001
4-5	0.48	0.35 - 0.64	0.0001
>6	0.49	0.37 - 0.66	0.0001
<b>Attempt Suicide Resulting in Injury needing medical care (ref=no need for medical care)</b>	<b>0.75</b>	<b>0.64 - 0.88</b>	<b>0.0001</b>
Model was adjusted for age, sex, race, school grade, alcohol use, cigarette use, and illegal injected drug use.			

**Disclosure:** No significant relationships.

**Keywords:** Suicide; Depression; Youth Risk Behavior Survey; Cyberbully

### O034

#### Multidisciplinary approach in children with autism spectrum disorder

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**Introduction:** Autism spectrum disorder (ASD) is characterized by persistent deficits in social communication and social interaction across multiple contexts and it is marked by repetitive sensory-motor behaviours and restricted interests or activities. Now recognized to occur in up to 1% of the population, the prevalence of ASD has registered a steady increase in the past two decades. Heterogeneity of presentation is a hallmark with comorbid psychiatric and medical morbidities frequently reported. Comorbidities mask and delay the diagnosis and are the cause of inadequate therapies.

**Objectives:** In the present paper, we studied a cohort of patients with ASD, investigating the rates and types of psychiatric and medical comorbidities.

**Methods:** A retrospective study of psychiatric and medical comorbidities was carried out on a sample of 120 participants that met ASD criteria according to DSM-V. The patients were examined with a detailed medical history, physical examination, as well as some additional functional, imaging, laboratory and genetic investigations. The associated conditions considered were: attention deficit/hyperactivity disorder (ADHD), epilepsy, intellectual disability, gastrointestinal symptoms, ophthalmologic manifestations, infections.

**Results:** Of the 120 ASD subjects referred, 25 (20.8%) received the diagnosis of epilepsy. ADHD was established in 24 cases (20%). IQ score was obtained in half of the patients, 43.3% of them presenting a severe intellectual disability (IQ<35). Respiratory disorders occurred in 25% of the cases. Ophthalmological findings were observed in 9.1% of the cases. Other frequent comorbidities included motor disturbances and feeding problems.

**Conclusions:** A better understanding of comorbidities in ASD patients improves interdisciplinary collaboration, thus facilitating effective treatment programs.

**Disclosure:** No significant relationships.

**Keywords:** autism spectrum disorder; intellectual disability; multidisciplinary; comorbidities

### O037

#### Understanding of the prevalence of depression in a sample of gifted children by identifying the developmental trajectory of risk and protective factors

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