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Emotional Dysregulation and Altered Reward Processing in Self-Harm

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Introduction: Self-Harm (SH) is any act of self-injury carried out by somebody irrespective of motivation. SH most commonly functions to relieve negative affect (NA). Tentative evidence suggests reward processing is altered in SH. NA may trigger reward hypersensitivity and therefore SH. Whether NA influences reward processing in SH remains unclear.

Objectives: To investigate whether self-harmers differ in motivation to obtain SH stimuli than healthy controls (HCs) following NA induction.

Hypothesis: After NA induction, SH participants will have a significantly shorter reaction latency (RL) and greater reaction accuracy (RA) than HCs in the SH condition of the Incentive Delay (ID) task.

Methods: 16-25-year-old SH (n=35) and HC (n=20) participants were recruited online and underwent the Trier Social Stress Test, to induce NA, followed by the ID task, where participants were cued to respond to a target as quickly as possible. On responding, an image of either a SH act (SH Condition), people socializing (Social Condition) or money (Monetary Condition) appeared. Each condition included control trials showing a neutral image. RA was the percentage of trials responded to within the target's presentation time. RL was the time (seconds) between target appearance and participants' response.

Results: There was no significant main effect of group, condition or group x condition interaction for RL. There was a significant main effect of condition (p < 0.05) but not of group nor a group x condition interaction for RA.

Conclusions: Reward processing did not differ in the SH group compared to HCs post-NA induction. Future studies could investigate reward processing in longitudinal and larger SH samples.

Disclosure: No significant relationships.

Keywords: self-harm; psychiatry; emotion regulation; reward

processing

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"She gets out of control when she's on her period". Cyclic menstrual psychosis. A case report

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Introduction: Cyclical psychosis related to the menstrual cycle is an entity not included in the DSM-V and ICD-10 classifications, however there are data collected in the literature on cases that agree

with this diagnosis. When reviewing cases, psychotic symptoms of sudden onset are described a few days before menstruation, with the symptoms resolving in a self-limited way when the bleeding ends. The end of psychotic symptoms is not directly related to the use of antipsychotics. The complete clinical picture is nonspecific and fluctuating. With acute onset, short duration, cyclical repetition, with psychotic symptoms (mutism, confusion, delusions, hallucinations) or a manic episode. We present the case of a 14-year-old adolescent with a history of epileptic seizures in childhood, without current treatment. She goes to the emergency department brought by her father and brother presenting psychomotor agitation, verbiage, flight of ideas, loss of the common thread in the speech, referring delusional ideas with experience of harm. His relatives report that he has not slept for a few days, with soliloquies, unmotivated laughter. They refer that the picture has been repeated in recent months during the days of menstruation.

Objectives: Knowing a diagnosis not included in the current classifications

Methods: Imaging tests and neurological evaluations rule out organic picture.

Results: Given the periodicity of the condition, the symptoms are self-limiting at the end of menstruation, without a clear relationship with psychopharmacological treatment (although agitation improves).

Conclusions: Cyclical menstrual psychosis approximates affective disorders, especially bipolar disorder in adolescence. The role of psychotropic and hormonal treatment is debatable.

Disclosure: No significant relationships.

Keywords: cyclic; menstruation; Psychosis; cyclic psychosis

EPV0147

Snapshot of a Child and Adolescent Psychiatric ER during Pandemic

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Introduction: The COVID-19 pandemic has disrupted numerous fundamental systems ranging from businesses to education system. The long-term consequences of the Pandemic, namely virtual learning and prolonged social isolation are coming to fruition in Child/Adolescent-Psychiatric Emergency-Rooms (CAP-ER). Discontinuity of in-person attendance of schools has poorly impacted the mental health of children and adolescents (C&A) of low-socioeconomic areas, who often rely on schools for meals, physical activity, and mental-health support. An increase in agitation, suicidal ideation, and a declining school performance has been observed in such situations.

Objectives: The primary objective of this study is to explore the increase in these symptoms as the presenting complaint in the psychiatric ER.

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Methods: Between April to June 2021 a cross-sectional quality improvement (QI) study was done on children presenting to CAP-ER BronxCare-Hospital NY with psychiatric complaints. Concomitant substance use disorder was determined using CRAFT questionnaire.

Results: Our data comprised 209 patients (84 M/125 F) with 79 children and 130 adolescents. Ethnicity: 116 Hispanics (56%), 84 African Americans (40%), and 9 others. The most common presenting complaints were aggression (111, 53%), suicidal ideation/suicide attempt (50, 24%), acute exacerbation of chronic illness (7, 3.3%), accidental overdosage (5, 2.3%) and others (36, 17.4). Marijuana was the most used substance (34 patients).

Conclusions: There has been a surge in severity of presentation of psychiatric disorders among children and adolescents, aggression so far, the most prevalent. Further studies are needed to delineate the social links with this high emergent load and pandemic.

Disclosure: No significant relationships.

EPV0148

Hair cortisol and self-perceived stress in adolescents with functional somatic disorders – a comparison with general population data

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Introduction: Functional somatic disorders (FSDs) are characterized by persistent and disabling physical symptoms that cannot be attributed to well-defined somatic disorders. In adolescents, the prevalence is around 4-10%. Evidence from adult populations suggests that cortisol plays a role in the development and perpetuation of FSDs, but little is known regarding adolescents. As cortisol accumulates in hair over time, hair cortisol concentration (HCC) is a promising new biomarker for long-term physiological stress. Moreover, adult studies have found associations between HCC levels and self-perceived stress.

Objectives: To compare HCC levels between adolescents with severe FSDs and adolescents from the general population. Furthermore, to investigate the association between HCC and self-perceived stress. **Methods:** The data are retrieved from two projects: the AHEAD trial, including 91 15-19-year-old adolescents diagnosed with a severe FSD, and the Copenhagen Child Cohort 2000 (CCC2000), including data on 1455 16-17-year-old adolescents. Hair samples

were collected for HCC analysis, and web-based questionnaires were used to asses self-perceived stress. Functional somatic symptoms were assessed with the Bodily Distress Syndrome (BDS) checklist.

Results: The data have been collected and will be analysed and presented at the congress.

Conclusions: This study can contribute with knowledge about the potential role of cortisol in FSDs in adolescents, and whether self-perceived stress can be used as a marker for physiological stress measured by HCC. Treatments for adolescents with FSDs still need to be improved. The current study may help to understand whether future treatment strategies should include a greater focus on stress management.

Disclosure: No significant relationships. **Keywords:** hair cortisol; functional somatic disorder; Stress; adolescent

EPV0149

Parent Child Interaction Training (PCIT) in Zurich, Switzerland - Experiences and Results of the first two years

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Introduction: Parent Child Interaction Training PCIT (Zisser & Eyberg, 2010; Briegel, 2016) is an evidence-based treatment of oppositional defiant disorder in preschool children. However, it is implemented in few institutions in Europe. The advantage of PCIT is the involvement of both child and parents with direct coaching of the parents.

Objectives: We will give an overview of 20 treatment courses we have conducted since the introduction of PCIT at the Zurich University Hospital for Child and Adolescent Psychiatry. First, a descriptive analysis of our sample will be conducted. The influence of sample characteristics and intensity of training on the reduction of behavioral problems will be analyzed.

Methods: Parents attend the training for at least 6 months with regular sessions. The transfer into everyday life is achieved by daily homework. We use the Eyberg Child Problem Behavior Inventory as pre-post measurements. The ECBI is filled out by the parents before each session and also enables a progress analysis.

Results: Three times more boys participated than girls. Problem behavior was significantly reduced after the play training phase. There was also a significant overall pre-post effect. The effect seemed to be independent of the parental problem score before training and of the number of play-training sessions.

Conclusions: Parents and children clearly benefit from the play training. For the following cooperation training, the problem load experienced by the parents seems to be more relevant than the intensity of the child's problem behavior as assessed by them. This is to be examined in the future.

Disclosure: No significant relationships. **Keywords:** oppositional-defiant disorder; parent-child-interaction-training; Children; preschoolers