

EPV0123

Diagnostic Results of IQ-test in School-Aged Children with Fetal Alcohol Syndrome and Fetal Alcohol Spectrum of Disorders

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doi: 10.1192/j.eurpsy.2022.1068

Introduction: FAS and FASD are completely preventable conditions which can be reduced by methods of prevention aimed at alcohol eliminating by women during pregnancy.

Objectives: The aim of the study was to assess level of intellectual impairment in children with FAS and FASD.

Methods: All children who participated in the study had physical development retardation and various dysmorphological features of FAS or FASD. The sample included 77 children, 8.6 ± 1.03 years of age. FAS was diagnosed in 8 children, FASD in 69 children. Assessments were carried out by pediatrician, psychiatrist and psychologist; level of intelligence was assessed using WISC test.

Results: Among children with FAS average IQ was 65.9 points (extremely low level), which corresponds to «mild mental retardation» diagnosis (F70, ICD-10). Four children with FAS had intelligence corresponding to «very low» level (IQ=70-79), three had «mild mental retardation» (IQ=50-69), and one had «moderate mental retardation» (F71, ICD-10) (IQ=35-49). Among children with FASD average IQ was higher and reached 79.5 points, corresponding to «very low» intelligence level. «Moderate mental retardation» was identified in 7.8% children with FASD; 22.1% children had «mild mental retardation», and 27.3% had «very low». In 37.7% children IQ level was within normal range: «low average» in 19.5% (IQ=80-89) and «average» in 18.2% (IQ=90-109). «Very high intelligence» (IQ=120-129) was detected in 2.6% children, «extremely high intelligence» (IQ=130 points and above) in 2.6%.

Conclusions: All children with FAS had impaired mental development. Children with FASD showed a wide range of total IQ values, from moderate degree of mental retardation to very high intelligence.

Disclosure: No significant relationships.

Keywords: School-Aged Children; Fetal Alcohol Syndrome; Fetal Alcohol Spectrum of Disorders

EPV0122

“Thoughts and Health”, the future prevention for adolescents today - Preventing a first depression

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doi: 10.1192/j.eurpsy.2022.1069

Introduction: Mental illness is a growing problem among adolescents. Adolescents are sensitive and at increased risk of developing a first depression. There are knowledge gaps about the long-term effects of prevention programs against depression for adolescents.

Objectives: A randomized controlled study among Swedish adolescents in eighth grade, who are at risk of developing depression. The study examines the long-term effects of the “Thoughts and Health” prevention program and whether it is as effective Online as In Real Life (IRL).

Methods: In a first step, about 20 junior high schools in the Västra Götaland region will be recruited and randomised into one of three groups.

The adolescents are screened for depression at school

Group 1 - Adolescents at risk of developing depression receive the course program “Thoughts and Health” Online.

Group 2 - Adolescents at risk of developing depression receive the course program “Thoughts and Health” IRL.

Group 3 - Adolescents at risk of developing depression receive the usual school health care (control group).

Psychologists decide inclusion after a diagnostic interview. OUTCOME VARIABLES

Quantitative

- development of depression is measured via self-assessment instruments and follow-up assessment, by a psychologist.

- school attendance and full grades at the end of compulsory school.

- biomarkers

Qualitative

Adolescent’s experiences and perceptions of the course program.

Results: Will create evidence for prevention programs against depression and be used to develop primary prevention for adolescents Online and IRL, which will be of great importance to public health.

Conclusions: Thoughts and Health can be a useful tool to prevent depression among adolescents

Disclosure: No significant relationships.

Keywords: Depression; prevention; Adolescence

EPV0123

Psychological Impact of parental cancer on children

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doi: 10.1192/j.eurpsy.2022.1070

Introduction: Cancer is often a diagnosis that generates instability in many Tunisian families. Children of parents with cancer may respond differently to the treatment. Communication about cancer

in Tunisian families needs sometimes professional intervention mainly with children.

Objectives: We aimed to assess psychological impact of cancer parents on their children.

Methods: We interviewed 103 parents of children aged 6-18 years between July and December 2020. Children were not interviewed as they were not allowed into the chemotherapy treatment rooms. The questionnaire included items about emotional and behavioral impact on children.

Results: Patients' characteristics are shown in Table 1. In our study, 85 patients (82.5%) told their children they were « sick ». Among the children who were not aware of their parent's condition, there were significantly more preschoolers, $p=0.001$. The reasons given by the parents in these cases were the young age of their children (60%) and the fear of generating emotional and behavioral trauma and threatening their psychosocial equilibrium (40%). In our participants 88.3% reported communication disorders with their children when referring to the parental illness.

Conclusions: Parental cancer may have unexpected consequences on children's behavior which should be handled by a specialist, hence efforts should be made for early detection and better understanding of these disorders.

Disclosure: No significant relationships.

Keywords: behavior; coping; Children; parental cancer

EPV0124

Headspace, a youth integrated care model: The relation between users satisfaction, clinical and demographic characteristics and service utilization.

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doi: 10.1192/j.eurpsy.2022.1071

Introduction: Youth integrated care services were developed to overcome common barriers to mental health treatment. Satisfaction is key for services utilization and engagement.

Objectives: To study users satisfaction with youth integrated care service, "Headspace", throughout the course of treatment and its correlation with clinical and demographic characteristics and service utilization.

Methods: A sample of 112 participants ranging between ages 12-25 who attended the Headspace clinic between March 2016 and June 2018 were assessed in the middle (after 7 sessions) and end of treatment ($n=71$).

Results: Participants expressed high levels of satisfaction across all service aspects at the middle and end of treatment. The highest rate of satisfaction was with the centre's staff and the lowest with personal outcomes. A repeated measures ANOVA analysis revealed that only satisfaction with personal outcomes improved significantly over time. Length of wait to begin treatment and parental engagement were negatively correlated with youth satisfaction.

Conclusions: Satisfaction rates of Headspace among youth are high from the start and with their outcomes increase over time. Youth satisfaction with the staff's attitude and approach and satisfaction

with accessibility suggest the service achievement in addressing barriers of help seeking in youth.

Disclosure: No significant relationships.

Keywords: young people; service satisfaction; treatment gap

EPV0125

Health Services Use and Costs in Individuals with Autism Spectrum Disorder in Germany: Results from a Survey in ASD Outpatient Clinics

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doi: 10.1192/j.eurpsy.2022.1072

Introduction: Autism spectrum disorders (ASD) are associated with high services use, but European data on costs are scarce.

Objectives: Utilisation and annual costs of 385 individuals with ASD (aged 4-67 years; 18.2% females; 37.4% IQ < 85) from German outpatient clinics were assessed.

Methods: Client Service Receipt Inventory

Results: Average annual costs per person were 3287 EUR, with psychiatric inpatient care (19.8%), pharmacotherapy (11.1%), and occupational therapy (11.1%) being the largest cost components. Females incurred higher costs than males (4864 EUR vs. 2936 EUR). In a regression model, female sex (Cost Ratio: 1.65), lower IQ (1.90), and Asperger syndrome (1.54) were associated with higher costs.

Conclusions: In conclusion, ASD-related health costs are comparable to those of schizophrenia, thus underlining its public health relevance. Higher costs in females demand further research.

Disclosure: No significant relationships.

Keywords: health services; autism; Germany; costs

EPV0126

Attention-Deficit/Hyperactivity Disorder and Parenting: Toward a Cognitive/Schema Model

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doi: 10.1192/j.eurpsy.2022.1073

Introduction: Attention-Deficit/Hyperactivity Disorder (ADHD) runs in families; however, there are mixed results on the interaction