Article: 1198

Topic: EPV04 - e-Poster 04: Child and Adolescent Psychiatry

Early Adolescence in Social Withdrawal: Two Hikikomori in Treatment

F. Ranieri<sup>1</sup>, M. Andreoli<sup>1</sup>, E. Bellagamba<sup>1</sup>, E. Franchi<sup>1</sup>, F. Mancini<sup>1</sup>, L. Pitti<sup>1</sup>, S. Sfameni<sup>1</sup>, M. Stoppielli<sup>1</sup>

<sup>1</sup>USL8 Arezzo, UFSMIA, Arezzo, Italy

#### Introduction

Social withdrawal is a potential signals of distress and mental illness such as psychosis, mood disorders, anxiety (Kirkcaldy & Siefen, 2012). The term 'hikikomori" defines a particular form of social withdrawal recognized in Japan at the end of the last century (Saito, 1998). At the moment in all the west world (United States, France, United Kingdom, Spain, Italy) there is an increasing frequency of adolescents and young people who show symptoms of hikikomori like a life style centered on the own home and refusal of the school.

# **Objectives and Aims**

Requests to take care of social withdrawal teenagers (hikikomori) are increasing. This work describes two cases in treatment of early adolescents.

#### Methods

Authors analyse the terapeutic steps of the clinical treatment of two very young teenegers arrived to the Public Health Service because their extreme social withdrawal. The work focusses the attention on the relationship with the patients, the families and the social context.

### Results

The two cases show that the treatment of hikikomori sindrome is complex. A single type of approach (e.g. individual psychoterapy or family therapy) is not sufficient. Combining different patterns it is possible to create a network of treatments able to promote the resources of subject and of his/her familiar and social context.

## **Conclusions**

Results underline the necessity of increasing the clinical knowledges on the social withdrawal sindrome and creating new protocols useful for the treatment.