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psychiatric symptoms preceding the act were assessed. We compared two subgroups: patients aged 10 to 19, and those aged 20 and over.

Results: 278 suicide patients were included. 101 of them were adolescents (10 -19 years), of which 89 (88.11%) were female. Mean age of suicidal adolescents was 16.5 years. They were mostly living with their families (92.07%). Intentional drug ingestion was more common in adolescents (81.1%) than in adults (40%). Adolescent suicide attempts were correlated with a conflictual family environment (p=0.04), exposure to mistreatment (p=0.001), the absence of underlying mental disorders (p<10-3), the presence of academic difficulties (p<10-3) and the presence of a precipitating factor such as family conflict (p<10-3) or school failure (p=0.004).

Conclusions: A good knowledge of the particularities of suicidal behavior in adolescents is preliminary to support an effective preventive measure targeting both family and school environment

Keywords: Suicide attempts; adolescents; Particularities

EPP0124

Features of interconnection between temperament, self-esteem and aggressiveness in adolescents with mental and somatic pathology

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Introduction: Adolescence can manifest different in norm and in illness. It's important to find common characteristics of adaptation with different types of ontogenesis, or leading manifestations of disease **Objectives:** Three adolescence (boys&girls) sample: normal – 22, middle age 16, cardio pathology – 7, middle age 16, psychopathology – 12, middle age 15

Methods: Direct self-esteem by Dembo-Rubinstein (DR) test and indirect self-esteem by color attitude test by Etkind (CAT), Structure of Temperament Questionnaire (STQ-77), Buss-Perry Aggression Questionnaire (BPAQ).

Results: Significant differences (criteria Kruskal-Wallis) were obtained on scales BRAQ "Hostility" (H= 8.430, p<0.015), "Common aggression" (H= 8.347, p<0.015), STQ-77 "Physical Endurance" (H= 9.895, p<0.007), "Physical Tempo" (H= 8.579, p<0.014), "Social Endurance" (H= 7.902, p<0.019), "Social Tempo" (H= 7.736, p<0.021), "Plasticity" (H= 7.797, p<0.020), "Selfconfidence" (H= 7.157, p<0.028), "Neuroticism" (H= 8.179, p<0.017); gaps DR-CAT for scales "Health" (H= 12.330, p<0.002), "Happiness" (H= 7.296, p<0.026). Pearson correlation coefficient between STQ-77, BRAQ and Gaps DR-CAT found in normal group: Gap DR-CAT "Health" - STQ-77 "Physical Endurance" (r=-.508, p<0.05), Gap DR-CAT "Smart" - STQ-77 "Intellectual Endurance" (r=-.521, P<0.05), Gap DR-CAT "Happiness" – BRAQ "Hostility" (r=.528, p<0.05), Gap DR-CAT "Happiness" – STQ-77 "Impulsivity" (r=.432, p<0.05), "Impulsivity" (r=.432, "Neuroticism" (r=.539,p<0.01). Correlation was founded in cardio pathology group: Gap DR-CAT "Smart" - BRAQ "Physical aggression" (r=.857, p<0.05), "Anger" (r=.842,p<0.05), "Common aggression" (r=.860,p<0.05), Gap DR-CAT "Happiness" - BRAQ "Physical aggression" (r=.826,p<0.05), "Anger" (r=.773,p<0.05), "Common Aggression" (r=.787,p<0.05). For psychopathology wasn't found correlations.

Conclusions: Comparative study of personality traits of adolescents with different types of ontogenesis (normotypical, mental, cardio pathology) is important for evaluating their adaptation and determining targets of psychotherapeutic work.

Keywords: aggressiveness; temperament; self-esteem; adolescents

EPP0126

Emotional dysregulation and attention deficit hyperactivity disorder (ADHD)

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Introduction: Because emotional symptoms are common in attention-deficit/hyperactivity disorder (ADHD) patients and associate with much morbidity, some consider it to be a core feature rather than an associated trait.

Objectives: Assess the possibility that symptoms of emotional dysregulation should be considered as core diagnostic feature of ADHD. **Methods:** It's a cross sectional study, including 60 children with ADHD and 60 children without ADHD ranging from 6 to 19 years of age (mean age 10.43 years). We defined moderate emotional dysregulation if a child had an aggregate cut-off score of >180 on the Anxiety/Depression, Aggression, and Attention scales of the CBCL and severe emotional dysregulation if a child had an aggregate cut-off score of > 210. This profile was selected because of its conceptual congruence with the clinical concept of emotional dysregulation.

Results: Sixty-three percent of children with ADHD had a severe emotional dysregulation versus 12% of controls (P<0.001). Emotional dysregulation was associated with elevated rates of hyperactivity and impulsivity: Ninety-six percent of the children with hyperactivity-impulsivity, according to the Conners scale, had emotional dysregulation. With a significant correlation between emotional dysregulation and hyperactivity-impulsivity (p = 0.001). Also all children with attentional disorders exhibited emotional dysregulation and a significant correlation between emotional dysregulation and inattention has been found in both groups (p=0.000).

Conclusions: Emotional dysregulation is now known to play a causal role regarding ADHD symptomatology. It should therefore be included in future theoretical models of ADHD, as well as in clinical practice when identifying the major impairments in this diagnostic group and when deciding therapeutic strategies.

Keyword: emotional dysregulation attention-deficit/hyperactivity disorder

EPP0127

Investigation of clinical features of dysgraphia related to the subtypes of developmental coordination disorder in children regarding high IQ

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Introduction: Handwriting disorder is commonly observed in Developmental Coordination Disorder (DCD) (87-88%) and is often noted in children with high Intellectual Quotient (HIQ). Two mainly pure DCD subtypes: ideomotor-DCD (IM), visuospatial/or visuoconstructional-DCD (VSC) and a mixed subtype (MX) were identified in the literature but nothing is known regarding IQ and dysgraphia.

Objectives: To refine the specific clinical features of dysgraphia related to DCD subtypes regarding IQ levels.

Methods: Neurovisual, neuropsychological, neuropsychomotor functions, and handwriting performances of 38 children (6-to-12 yearsold: mean 9y, SD 2.7) diagnosed with DCD (DSM-5 criteria) were collected. Two matched groups were analyzed according to their IQ: 19 (TC) typical children (IQ=90-110) and 19 HIQ children (IQ> 120). Results: IQ scores were not significantly associated with dysgraphia. There is a significant difference between TC vs HIQ with a lower rate of IM-DCD respectively 11% vs 5% (p=.035) and 68% vs 37% for VSC-DCD (p=.03) but 21% vs 58% in MX-DCD (p=.41). Dysgraphia was significantly more present in TC group with MX-DCD and in HIQ with VSC-DCD. A negative correlation between Kho's' cubes test failure (p=.006), visual-spatial memory (p=.05) and VSC-DCD was noted in HIQ group. The deficit of visual spatial memory was significantly related to dysgraphia in HIQ children (p=.01) associated to visual gnosis impairment (p=.03).

Conclusions: Dysgraphia was significantly found with VSC-DCD subgroup in FIQ>120 with specific features of visual perception disorders suggesting more involvement of the right cortex. These results suggest that VSC-DCD in HIQ could be a neurovisual impairment rather than a pure VSC-DCD.

Keywords: Dysgraphia; Neurovisual impairments; Developmental coordination disorder subtypes; Intellectual quotient

EPP0129

Psychosocial care network for children with autism spectrum disorder in brazil

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Introduction: The prevalence of ASD is 1 for every 59 children, an increase of 15%, referring to 2012. Studies supported the formulation of laws and guidance documents by the State in Brazil. Each location has found ways to meet their demands seeking to guarantee the needs of these users in public health services, whether through the Psychosocial Care Centers or the Rehabilitation Centers, healthcare clinics suggested by the Ministry of Health for the service to these users.

Objectives: The general objective of this study is to characterize the psychosocial care network in Brazil, in order to verify whether these principles are considered in the line of care for ASD.

Methods: A public service evaluation questionnaire was applied to analyze the users' perception on the care network effectiveness.

Results: There is lack of communication, matrix support or articulation and highlight that the construction of physical spaces does not always translate into an integrated intersectoral treatment. The articulation between the services and referrals involved could contribute to greater treatment control of this demand.

Conclusions: Reflecting on the study, we consider that a network based on case severity care would be considerably more efficient, since the individual could use the services according to the demand present at the time. This proposal would create more humanized, personalized, assertive services, without financial waste, and would serve the system by guaranteeing the rights of integrality, universality and mainly of equity of these users within SUS.

Keywords: autism spectrum disorder; Psychosocial care network; Children; public health

EPP0130

Parental concerns during COVID-19-related school closures: Children's behaviors and media usage

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Introduction: While coronavirus disease 2019 (COVID-19) spreads across the globe, many countries have closed schools to ensure physical distancing to slow transmission and ease the burden on health systems. Concerns regarding Coronavirus Disease 2019 (COVID-19) school closures often increase stress levels in parents.

Objectives: This study examined whether higher levels of parental concerns were associated with children's problematic behaviors and other factors during COVID-19-related primary school closures.

Methods: Participants were 217 parents who responded to a web-based questionnaire covering parental concerns, subjective stress, and depression; children's sleep patterns, behavioral problems, and changes in activity level after COVID-19; previously received mental health services; and media usage during the online-only class period from community center in Suwon city.

Results: The number of parental concerns was associated with children's behavioral problem index (BPI) score (Pearson correlation 0.211, p < 0.01), sleep problems (0.183, p < 0.01), increased smartphone usage (0.166, p < 0.05), increased TV usage (0.187, p < 0.01), parents' subjective stress levels (0.168, p < 0.05), and parental depression (0.200, p < 0.01). In families with children who previously received mental health services, the children reportedly suffered from more sleep and behavioral problems but not increased media usage, and parents noted more stress and depression. Parental concerns are related to family factors such as change of caregiver, no available caregiver, decreased household income, and recent adverse life events.

Conclusions: Ongoing monitoring of mental health at risky group and multiple support systems should be considered for parents having difficulty in caring their children.

Keywords: COVID-19; Parental concern; Children's behavioral problem; Media addiction