

## EPV0177

**Characteristics of early and late onset pediatric depression**L. Díaz-Castro<sup>1\*</sup> and K. L. Hoffman<sup>2</sup>

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doi: 10.1192/j.eurpsy.2023.1528

**Introduction:** Depression, anxiety and suicide are serious psychiatric conditions that affect Mexican youth (Institute for Health Metrics and Evaluation, IHME, 2022), with depression showing a prevalence greater than 16%. Suicide ranks as the second most important cause of death in this age group, (6/100,000 deaths), the first being violent deaths by firearms (15/100,000 deaths; IHME, 2022).

**Objectives:** To identify factors related to age of onset of pediatric depression.

**Methods:** A cross-sectional study was carried out during 2018-2020 in two Children's Psychiatric Hospitals in Mexico City. Data were collected using a survey method. All participants signed an informed consent form. We applied Cox hazard analysis, with the hazard event being the onset of psychiatric symptoms.

**Results:** Data from 400 patients were analyzed, 148 girls (37%) and 252 boys (63%). Mean patient age was 12 years, and mean age of symptom onset was 8 years. The most common diagnoses were hyperkinetic disorder (51%), depression (34%), and anxiety (7.8%). Age of depression onset was significantly reduced in association with male sex (HR=1.46), family history of psychiatric disorder (familial depression HR=2.34; hyperkinetic disorder HR=2.67; psychoactive substance abuse HR=5.09), and certain medical comorbidities (asthma HR=6.41; enuresis HR=3.03). These same covariates were not associated with age of onset of hyperkinetic disorder or anxiety.

**Conclusions:** These analyses indicate that a subgroup of pediatric depression has an early onset and is associated with familial hyperkinetic disorder and depression, the male sex, and certain medical comorbidities.

**Disclosure of Interest:** None Declared

## EPV0178

**The Relationship between Cyberbullying and traditional Bullying**L. Sahli<sup>1\*</sup>, S. Bourgou<sup>2</sup>, S. Haj Amor<sup>3</sup> and A. Belhadj<sup>2</sup>

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doi: 10.1192/j.eurpsy.2023.1529

**Introduction:** Traditional bullying and cyberbullying behaviors represent a serious problem in our schools with deteriorious effects on youths.

**Objectives:** The aim of our study is to determine the relationship between school bullying and cyberbullying among tunisian adolescents.

**Methods:** Adolescents enrolled in middle and high schools in Tunis, Tunisia were surveyed about their experiences of traditional bullying and cyberbullying. This study was developed by the Child Psychiatry Department of Mongi Slim Hospital, (Tunis, Tunisia). Approval of the ethic committee of the Hospital was obtained.

**Results:** The total number of participants in our study was 935 adolescents. The average age was 14.2 years with a slight female predominance (54%) and a sex-ratio of 0.85.

The results revealed that 32 % of the students were victims of both cyber and traditional bullying, while 26 % of the students bullied others in both cyber and physical environments. Compared to female students, male students were more likely to be bullies and victims in both physical and cyber-environments.

**Conclusions:** Cyberbullying and traditional bullying may not be two separate phenomena, but rather two sides of the same coin. Reducing bullying is an important issue to deal with, wheatear it happens online or offline.

**Disclosure of Interest:** None Declared

## EPV0179

**Parental Alienation Syndrome (PAS). Psychological and legal implications**M. Arrieta Pey<sup>1\*</sup>, S. Rubio Corgo<sup>1</sup>, A. Álvarez Astorga<sup>1</sup>, A. M. Delgado Campos<sup>1</sup>, C. Díaz Gordillo<sup>1</sup>, A. C. Castro Ibáñez<sup>1</sup> and M. Á. Álvarez de Mon González<sup>2</sup>

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doi: 10.1192/j.eurpsy.2023.1530

**Introduction:** The first definition of PAS, enunciated by Richard Gardner in 1985, refers to a disorder originating in the context of legal conflicts related to child custody. Its main characteristic would be a smear campaign by the child towards a parent, in the absence of plausible arguments. In this context, the child would experience an oppositional and dichotomous feeling towards his or her parents. In recent years, the presence of PAS has become increasingly important, both in the legal and health fields, largely due to the controversy and debate surrounding its approval and recognition, and there is currently no consensus on the matter.

**Objectives:** The main objective of this work is to examine the current state of PAS in depth in the different fields in which it is emerging: the medical-scientific and legal spheres. The current controversies and debate, both scientific and legal, will be developed. Research will be carried out on the origin of the concept and its evolution, its symptomatic presentation, the neuropsychological consequences in minors, the role and legal value of expert reports, as well as the existing evaluation methods for the assessment of PAS.

**Methods:** An extensive literature review was carried out on the subject in question, extracting information mainly from scientific articles, but also from legislative documents, manuals and books.

**Results:** There are currently no specific laws regulating PAS in European countries. According to Article 10.2 of the Spanish Constitution, norms related to fundamental rights shall be

interpreted according to the Universal Declaration of Human Rights. As a direct consequence of the chronic psychological stresses experienced by children, adaptive disorders may appear, often characterised by symptoms of anxiety and depression. In addition, a multitude of neuropsychological consequences have been observed not only in the affected child, but also in the adult he or she will become.

**Conclusions:** Currently, there is a fervent debate about the validity and recognition of PAS as a diagnostic entity, spanning different disciplines, ranging from health to social and legal. In Europe, professionals in the scientific field have not reached an agreement regarding the approval of PAS. On the one hand, there are those for whom PAS is a verified phenomenon; on the other hand, there are those who flatly reject the existence of this phenomenon. The latter consider PAS an unscientific construct, referring to it as “court syndrome” or “patriarchal alienation syndrome”.

**Disclosure of Interest:** None Declared

## EPV0180

### PANS Case Report. Assessment and management implications for a Liaison Child Psychiatry Program

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doi: 10.1192/j.eurpsy.2023.1531

**Introduction:** Pediatric acute-onset neuropsychiatric syndrome (PANS) was described in 2010 not related to streptococcus infection (as PANDAS is), and with a clinically distinct presentation, defined as: I) Abrupt, dramatic onset of obsessive-compulsive disorder or severely restricted food intake; II) Concurrent presence of additional neuropsychiatric symptoms; III) Symptoms are not better explained by a known neurologic or medical disorder.

**Objectives:** To describe the clinical features in a scholar boy who suffered an abrupt obsessive-compulsive disorder and highlight the need of an specific medical and psychiatric assessment and management from a multidisciplinary perspective.

**Methods:** Clinical case: A 7-year-old boy brought to the emergency department due to his repetitive and hyperactive behavior. After the admission in the hospital a clinical history was identified with PANS diagnostic criteria. He presented repetitive language and ritualized behavior, emotional lability and hyperactivity that has begun in an abrupt manner in the last 5 days. Family history, medical history and physical examination, infectious disease evaluation, neurological assessment and child psychiatric assessment were carried out during hospitalization. Coordination between neuropediatric consultant and child psychiatry was necessary.

**Results:** Combined treatment, psychofarmacologic and psychotherapeutic, was effective and the symptoms disappeared gradually in about three months.

**Conclusions:** In all school-age child presenting with abrupt obsessive-compulsive disorder or eating disorders a possible link to PANS should be evaluated and rule out. It is important a Liaison

Child Psychiatry program for a complete multidisciplinary evaluation and management of these patients.

**Disclosure of Interest:** None Declared

## EPV0181

### How countries' legislations can sustainably impact children's mental health

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doi: 10.1192/j.eurpsy.2023.1532

**Introduction:** In a new era where, more and more children are standing up against governments concerning important subjects like climate change that will impact their physical health in a near future, it is time to question ourselves on all the other decisions that are being taken and that could have a sustainably high impact on some of our children's development and mental health. Unfortunately, many of those children are forced to remain silent - unable to express themselves - or are just not being heard - unable to gain international medias' attention - because of their social condition, cultural background, age or religion. But more sadly, most of them remain silent because they are just unaware of the consequences their living conditions or hardships might have on their future mental health, due to lack of information or education.

**Objectives:** Therefore, it is our responsibility as childhood experts and professionals to speak for those children who cannot, to stand up for themselves and promote the importance of putting their interest first no matter what.

**Methods:** We have chosen six different studies led in different contexts of struggle for children all around the world to illustrate the consequences on their development and mental health.

**Results:** We will communicate on the situations of children living in refugee camps, children living with their mothers in prison cells, children being forcibly separated from their mothers returning from Daesh territories in France or children being forcibly separated from their migrant mothers at the US border, we will describe the hardships but also the effective support provided to unaccompanied minors in Canada, and especially discuss with our cochair expertise how the issue is or could be different for them according to government policies and legislations.

**Conclusions:** By describing these different contexts of unstable living conditions or traumatic experiences orchestrated by government legislation regarding children care, we want to highlight the responsibility that every government legislation must consider when it comes to child care and how it should become an absolute priority.

**Disclosure of Interest:** None Declared