

## EPV0231

### Basic knowledge in child protection– evaluation of an online-course for webbased transfer of interprofessional basic knowledge in child protection

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**Introduction:** Insufficient or faulty cooperation between the various child protection professions can have an extremely negative impact on the well-being of the concerned children. Communication problems that were revealed when dealing with cases of child abuse show the importance of adequate cooperation and common language of the involved professions in child protection.

**Objectives:** An online-course addressing medical-therapeutic professionals, youth welfare as well as judiciary and police was developed to impart skills and knowledge in child protection to create interdisciplinary understanding and improve cooperation between the involved professions.

**Methods:** The acquisition of competencies, the transfer of learning content into everyday work and the quality of the online-course are determined using an online-survey before starting (t1) and after completing (t2) the course. T1-assessment is currently being evaluated with 1034 datasets, t2-assessment will take place 03/2022.

**Results:** Intended target groups could be accessed and participated in the online-course, although the ratio of medical-therapeutic participants was greater than of judiciary professionals. Specific results of T1- and T2- assessment and comparing analyses are expected in March 2022 and will be presented.

**Conclusions:** Based on existing online-courses developed by the Universityhospital Ulm, the suitability of online-education for training professionals in the field of child protection could be proven. If comparable effects can be shown for this online-course, there is an increase in evaluated offers of high quality. These enable comprehensive and low-threshold access to the subject of interdisciplinary communication and cooperation in child protection for involved professionals.

**Disclosure:** No significant relationships.

**Keywords:** child protection; sexual violence against children; Child abuse

## EPV0230

### Quality of Life in Neurotypical Siblings of Children with an Autism Spectrum Disorder: Associations with Parental Social Support and demographic variables

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**Introduction:** Health Related Quality of Life (HRQOL) is acknowledged as an important construct in describing the individuals overall condition within the health context. In the case of families with Autism Spectrum Disorders (ASD), neurotypical siblings'

HRQOL is an important concept for this at-risk population. Social support has been identified as an important protective factor against parental psychological problems. However, possible associations between HRQOL in neurotypical ASD-siblings and parental variables, such as perceived social support, remained unexplored in the ASD-siblings' literature.

**Objectives:** This study aimed to investigate any association between HRQOL in neurotypical ASD-siblings and parental perceived social support and key demographic variables.

**Methods:** 118 parent-child-dyads from Greek ASD-families that fulfilled inclusion criteria participated in this study and answered a demographic questionnaire. Parents were administered the Multidimensional Scale of Perceived-Social-Support (MSPSS), while the children answered the Kidscreen-27. A hierarchical multiple regression was performed to test the hypothesis.

**Results:** Hierarchical regression showed that neurotypical siblings HRQOL (as measured with KIDSCREEN-27 total score) was associated with perceived social support from the family (std beta=0.184; p=0.027; model 1), and this association persisted after demographics entered the model (std beta=0.369; p=0.015; model 2). Thus, it was found that the sibling's HRQOL was associated with perceived social support from the family independent of demographics.

**Conclusions:** The results of the present study showed that the HRQOL in ASD-siblings is associated with perceived social support from the family, pointing to the need for supporting siblings and designing effective interventions in order to prevent possible mental health problems in neurotypical siblings of ASD individuals in the future.

**Disclosure:** No significant relationships.

**Keywords:** Quality of Life; neurotypical siblings; parental perceived social support; Autism Spectrum Disorders

## EPV0231

### Decision-analytic modeling for health economic evaluation in child and adolescent psychiatry using inpatient equivalent treatment - design of a doctoral thesis

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**Introduction:** Despite the high prevalence of psychiatric disorders among children and adolescents, services are often accessed too late or not at all. Inpatient-equivalent treatment can be a good option here, as it can counteract structural barriers by enabling treatment from home. Although national and international studies highlight the benefits, this form of treatment is offered by only a few psychiatric facilities.

**Objectives:** The aim is to provide a decision-making aid for the introduction of outreach treatments with regard to cost-effectiveness. Based on this, the question will be answered whether telemedicine can be an option for the distribution of rare (human) resources.

**Methods:** 1) Based on a systematic review, the best available evidence will serve for deriving hypotheses and providing assumptions for the decision-making model. 2) Decision analytic modeling will be used to determine the cost-effectiveness of inpatient-equivalent treatment compared to conservative inpatient treatment. 3) An additional systematic review will provide information on the use of telemedicine in inpatient equivalent treatment.

**Results:** The following questions need to be discussed: 1) Is there an indication for all psychiatric diseases and age groups? 2) Are there ethical considerations that need to be taken into account, especially in the use of telemedicine? What incentives need to be set for psychiatrists to opt for inpatient-equivalent treatment?

**Conclusions:** The results of the study may help to raise awareness of inpatient equivalent treatment among decision-makers. Furthermore, fears could be reduced, since admission to a psychiatric facility can mean a stigmatizing intervention in the lives of young patients.

**Disclosure:** No significant relationships.

**Keywords:** hometreatment; mental disorder; inpatient equivalent treatment; children and adolescents

## Classification of Mental Disorders

### EPV0232

#### Taxonomic classification of mental disorders

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**Introduction:** DSM-5, ICD-10, and ICD-11 classifications can be described as „incoherent“. Psychopathology depends on “time of damage and resilience” ratio. Continuums of mental disorders compose a table, like a periodic table of chemical elements. Similar psychopathology can have different neurobiological origin, and vice versa.

**Objectives:** Current classifications of mental disorders ICD-10, DSM-5, as well as the new ICD-11 being developed, do not show interrelations in pathogenesis between groups of mental disorders. This is a weak point of these classifications, although they serve a good purpose in relation to medical statistics and encoding requirements.

**Methods:** Taxonomic classification of mental disorders proposed in this empirical study reveals interrelations between diagnostic categories of mental disorders. Classification as an object of this empirical study is initially developed on author's observation of psychopathology in clinical practice. It also relies on scientific data of genetics and neurobiology of mental disorders.

**Results:** The classification is based on two axes system. First axis reflects the time of damage of neural tissue in specific stage, i.e. neuron body genesis, neuron growths genesis, synaptic pruning or further neural information modeling. The second axis is connected with resilience. The two axes system includes in one continuum and connects into one classification table (Figure 1) almost all diagnostic groups from ICD-10 or DSM-5 (with two exclusions: “organic” type mental disorders and pathology of myelination process).

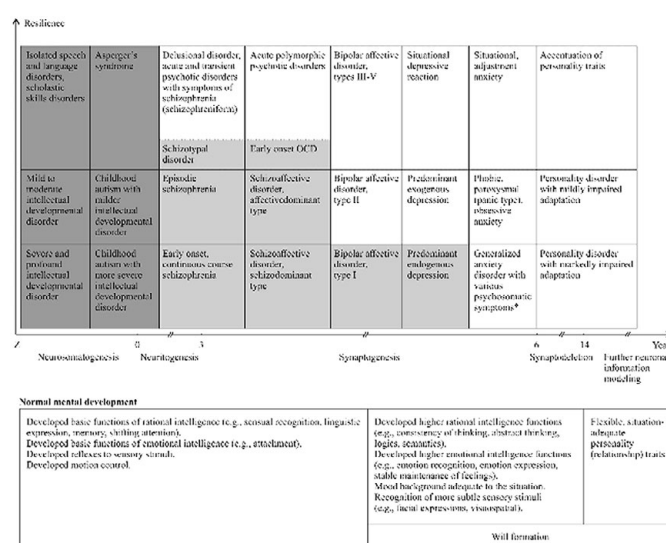


Fig. 1. Taxonomic classification scheme for mental disorders.

The year scale reflects the time of CNS damage. Only in the case of disorders in dark gray boxes does it coincide with the time of onset of symptoms.

Dark gray – congenital and mental disorders occurring in childhood.

Lighter gray – mental disorders occurring in adolescence.

White – mental disorders that can occur during adolescence and at any time later.

Z – zygote.

OCD – obsessive-compulsive disorder.

\*various psychosomatic symptoms: various forms of somatoform autonomic dysfunction, somatoform pain disorder, functional tics, sleep disorders, sexual dysfunction, eating disorders associated to psychological disturbances, dissociative function “drop out” disorders.

**Conclusions:** This empirically derived concept of classification could be used in clinical practice in differential diagnosis, discovering heterogeneities in patients with same diagnostic “code”, planning treatment strategies, predicting course of mental disorders.

**Disclosure:** No significant relationships.

**Keywords:** ICD-11; classification; DSM-5; ICD-10

### EPV0234

#### Reinforcing the new diagnosis of Complex Post-Traumatic Stress disorder (CPTSD) of ICD-11: exploring the clinical outcomes in youth exposed to complex trauma

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**Introduction:** Youth exposed to complex trauma (CT) show an increased risk of psychiatric morbidity, including a wide range of