

tistical society contained all of the primary school children with attention deficit-hyperactivity disorder in Rafsanjan City. Forty children with attention deficit-hyperactivity disorder were chosen by the method of random sampling and randomly assigned in control and experimental groups (20 children in experimental group and 20 children in control group). At first in pretest stage used academic self-efficacy questionnaire and the software of selected and divided attention. For measurements of academic improvement were used the scores of a teacher build test mathematic and spelling. Then, experimental group take 8 sessions education of selected and divided attention-shaping Training. The data were analyzed by analysis of variance with repeated measurement test. **Results** Results of this research show that selected and divided attention training improved the amount of divided and selected attention and academical improvement of children <but it's not effective significantly on reaction time and academic self-efficacy of children with attention deficit disorder-hyperactivity. **Conclusion** Attention training can be effective to increase attention and academical achievement in children with ADHD. **Keywords** Attention training; Selected attention; Divided attention; Academic improvement; Academic self-efficacy; Attention deficit hyperactivity disorder **Disclosure of interest** The author has not supplied his declaration of competing interest.

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#### EV0142

### Long-term injectable antipsychotics in adolescents. A case report

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**Introduction** Actually psychiatrists around the world are treating children and adolescents (despite limited medical indications in this age group) with atypical antipsychotics at increasing rates for a range of psychiatric illnesses (schizophrenia, bipolar disorder, behavioral changes. . .). Over the last few years, a number of new long-term injectable treatments (ILD) have emerged, the advantages of which are found in adult (adherence, functionality, consistent blood level without daily peaks. . .) but we do not have enough data in minors.

**Objectives** Discuss utility of ILD in adolescents.

**Methods** We expose a case report about a 17-year-old man, when he was a child he was diagnosed with attention deficit disorder and autism spectrum disorder and also he had a story of disrupted behavioural and aggressively. After been hospitalized in our hospital we remake his clinic history and he was diagnosed with schizophrenia. Before the injectable treatment (ABILIFY MAINTENA<sup>®</sup>) this patient tried various treatments (mood stabilizers, antidepressants. . .) and many hospitalizations.

**Results** After the ILD, our patient has good functionality, he is now living with his parents and studying in the high school. He has not needed another hospitalization after the last one.

**Conclusions** The ILD in adolescents must be a therapeutic option in mental disease, in this group is very difficult the complementation of the treatment, it's frequent the comorbid use of substances, this population are not used to take medications. . . so every treatment that facility this kind of problems must be a perfect weapon

to improve their mental health and to prevent relapse and hospitalization.

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#### EV0143

### A child with Pica. A case presentation

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**Description/clinical case** A. is a 10-year-old girl of Moroccan origin appearing in pediatric specialist of A.P repeatedly by unpecific stomachache, nausea and vomiting. After several visits to the same reason for consulting an exploratory interview alone with the patient in that regard that "sometimes when calms nervous scratching the walls and eating them" is performed. The mother says intrafamily difficulties. Information reported by the patient's mother confirms next visit also providing pictures on the wall of your room is returned. Referral to child and adolescent mental health is decided.

**Exploration/complementary tests** There is no single test for pica. It is carried out systematic blood, biochemical (iron, zinc, lead. . .) to assess toxic substances and nutritional levels. Abdominal Rx. Both normal.

**Diagnosis** Pica (F98.3).

**Differential diagnosis** Ingestion of nutrients can occur in the course of other mental disorders (for example, a pervasive developmental disorder, schizophrenia), mental retardation, in the Kleine-Levin syndrome. . . In these cases, should only be established an additional diagnosis of pica if the feeding behavior is sufficiently severe to warrant independent clinical attention.

**Conclusions** Pica disorder has been studied by pediatricians, gynecologists, dermatologists, psychiatrists, psychologists, nutritionists, anthropologists, etc., which has been interpreted as a conduct disorder, food, mental illness, poverty, hunger. . . but really the cause it is unknown. Although morbidity and mortality is unknown and difficult to study, include poisonings, parasitosis and surgical abdomen as serious complications. Finally, like all other eating disorders, the overall management of this entity requires the coordinated intervention of various professionals.

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### Approach to somatomorphic disorders in children. A case presentation

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