

The WHO reminds us that “every gamer should be aware of the time spent on games, especially if their daily activities are affected, as well as any physical or psychological, social and health changes that could be attributed to gaming behaviour.”

Objectives: The aim of our study is to analyse the frequency of video game use, and to determine its relationship with psychological and social functioning and academic performance.

Methods: A cross-sectional study was conducted in the child psychiatry department at Arrazi Hospital in Salé among adolescents aged between 10 and 17 years. For this, we used :A hetero-questionnaire on socio-demographic characteristics, reasons for gambling, type of gambling, satisfaction, self-esteem, ability to make friends and degree of social support, and school results , The DSM 5 criteria proposed in the appendix for the research and The K-SADS

Results: Socio-demographic data

- Our study was carried out on a sample of 57 adolescents aged between 10 and 17 years, with an average age of 13.47.
- There was a predominance of males: 87. ; Girls: 17.5

All the adolescents are in school: Primary 26.3 , Middle school 59.6 , High school 14 % Social functioning and academic performance

- 54.4% reported having both real and virtual friends, 29.8% specified that all their friends are virtual, And 15.8% noted that they have no friends
- Academic decline was noted by the parents of 61.1% of adolescents Psychological functioning 68.4% reported low self-esteem, 31.6% reported being dissatisfied with their lives and 0.5% met the diagnostic criteria for video game addiction

Conclusions: Our study finds that problematic video game use is related to male gender, low academic performance, difficulties with social interactions and also low self-esteem and satisfaction. Screening for psychiatric co-morbidities and vulnerability factors is essential for the management of this type of pathology.

Disclosure of Interest: None Declared

EPV0169

SUICIDAL CRISIS IN THE ADOLESCENT: About 3 clinical cases

I. Belabbes*, I. KATIR, M. chtibi and H. KISRA

ARRAZI HOSPITAL, SALE, Morocco

*Corresponding author.

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Introduction: Suicide is the third most common cause of death among adolescents. It is linked to several mental pathologies. Early detection and effective and rapid management are essential elements to improve the mental health of the adolescent and prevent suicidal behaviour.

Objectives: Our objective is :

- To discuss through these medical observations the risk factors and pathologies at high risk of suicide,

- To detail the urgent course of action to be taken in the event of suicide attempts and
- To underline the importance of early management to prevent suicide in adolescents

Methods: We report hereafter the clinical cases of 3 adolescents followed in child psychiatry for the management of a suicidal crisis.

Results: 1st clinical case :

This is a 13 year old girl, brought back by the staff of the Lalla Meryem child protection centre, where she has been living since her separation from her family following abuse by her mother. She reports a reliving of scenes where her mother burned her private parts. She reports disturbed sleep with night terrors and nightmares. In addition, the centre’s staff reported irritability, crying spells and verbalized suicidal threats.

2nd clinical case:

This is a 15 year old girl referred by the paediatric service for management of a suicide attempt by ingestion of rat poison. She stopped her schooling 2 years ago to take care of her mother who had cervical cancer and died 6 months ago. Since then, she has experienced sadness of mood, low self-esteem with ideas of devaluation. During the first psychiatric interview, she did not criticize her suicidal act and said that she wanted to kill herself, which she considered the only solution to her suffering.

3rd clinical case:

This is a 12-year-old adolescent, followed in child psychiatry for conduct disorder with problematic use of tobacco, cannabis and benzodiazepines. He had stopped going to school since the third grade.

He consulted for a suicide attempt by ingesting 30 antihypertensive tablets. After somatic care, he was referred to us from the medical emergency department for psychiatric care.

Conclusions: Suicide among adolescents is on the increase in Morocco. It is necessary to take into account the risk of suicide in the face of any mental or somatic pathology. A rapid and urgent course of action is necessary to avoid recurrence.

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EPV0170

The impact of anxiety and depression across childhood and adolescence on adverse outcomes in young adulthood: a UK birth cohort study

I. Morales-Muñoz^{1*}, P. Mallikarjun¹, J. Chandan², R. Thayakaran², R. Upthegrove¹ and S. Marwaha¹

¹Psychology and ²Institute of Applied Health Research, University of Birmingham, Birmingham, United Kingdom

*Corresponding author.

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Introduction: Little is still known about the long-term impact of childhood and adolescent persistent depression and anxiety on adulthood.

Objectives: To investigate the impact of persistent anxiety, depression, and comorbid anxiety and depression across childhood and

adolescence on the development of multiple adverse outcomes in young adulthood.

Methods: This study used data from 8,122 participants in the ALSPAC cohort, in the UK. The Development and Wellbeing Assessment (DAWBA) was administered to capture child anxiety and depression symptomatology. We focused on the DAWBA generalized anxiety and mood subscales at 8, 10 and 13 years, and created a measure of comorbid anxiety and depression symptoms (i.e., anxiety + depression) at each time point. Further, a range of mental and physical health, and functional problems were assessed at 24 years. Latent Class Growth Analyses was used to detect trajectories of anxiety, depression and comorbid anxiety and depression, separately; and logistic regression to examine how persistent anxiety, depression or both associated with adverse outcomes at 24 years.

Results: All three classes with persistent anxiety, depression or both associated with presenting any mental health and functional problem at 24 years. However, persistent high anxiety was not associated with any physical health problem at 24 years. Finally, high levels of comorbid anxiety and depression was the domain that exerted the greatest negative impact at 24 years.

Conclusions: Children and adolescents with comorbid anxiety and depressions are at highest risk for suffering from more adverse outcomes at 24 years, compared to those presenting anxiety and depression alone.

Disclosure of Interest: None Declared

EPV0171

The impact of nonpsychotic postpartum psychiatric disorders (NPPDs) on offspring

J. Stojanov^{1*}, M. Stanković² and A. Stojanov³

¹Service for acute psychotic disorders, Special Hospital for Psychiatric Disorders, Gornja Toponica, Serbia; ²3. Center of Mental Health Protection, Clinical Centre Nis, Nis, Serbia, 2. Faculty of Medicine, University of Nis, Nis, Serbia and ³4. Clinic of Neurology, Clinical Center Nis, Nis, Serbia

*Corresponding author.

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Introduction: Non-psychotic postpartum psychiatric disorders (NPPDs) are among the most common underdiagnosed mental disorders with a preserved reality test after delivery.

Objectives: NPPDs have been shown to have an association with infant growth, attachment, sleep, temperament and ultimately offspring's emotional, behavioural, cognitive and social development.

Methods: Most prevalent NPPDs are postpartum mood and anxiety disorders, as well as obsessive-compulsive disorder, post-traumatic stress disorder and eating disorders.

Results: The high methodological quality of the reviewed studies strengthens the association between NPPDs and different disorders in the neurodevelopmental period with a negligible impact on mental status in adolescence and adulthood. NPPDs showed an effect on offspring's emotional, behavioural, cognitive and social development, due to common developmental mechanisms.

Conclusions: Timely accurate identifying and treating NPPDs, by using NPPDs symptoms screening tools could reduce the incidence of mental disorders in offspring. Although neurodevelopmental disorders and mental disorders related to pregnancy as separate diagnostic categories have been insufficiently researched, the

potential impact of postpartum mental disorders on children's development is an extremely unexplored field that should be focused on in further scientific research.

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EPV0172

Autism spectrum disorders - gender differences and the diagnosis dilemma

J. D. C. Moura*, J. Leal, J. F. Cunha, D. Seabra, S. Torres, T. Rocha, I. Lopes and B. Barata

Departamento de Psiquiatria e Saúde Mental, Centro Hospitalar Barreiro-Montijo, Lisboa, Portugal

*Corresponding author.

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Introduction: Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder characterized by social and communication deficits and restricted and repetitive or stereotyped behaviours. The prevalence of ASD has been thought to be higher in men, which may reflect aspects of the own aetiology of the disorder. Still, it may also be associated with misdiagnosis or missed diagnosis of females with autism due to specific phenotypic traits.

Objectives: To explore the differences between sex/gender in autism's clinical presentation.

Methods: Non-systematic literature review using the most relevant papers found on PubMed and Google Scholar using the following keywords: "autism spectrum disorder", "gender differences", and "autistic women".

Results: Autistic women seem to have a "camouflage" phenomenon, characterized by a high level of functioning, less unusual play or restricted interests, better socio-emotional reciprocity and coping behaviours. Therefore, women with ASD commonly have an anteriority of multiple diagnoses, which delays their access to the support and care they need.

Conclusions: Professionals must be aware of the sex/gender clinical differences to prevent the misdiagnosis or missed diagnosis of females with autism. Moreover, the current clinical criteria used to diagnose ASD may underserve the female population and deserve to be reviewed.

Disclosure of Interest: None Declared

EPV0173

Symptoms of bipolar disorder among adolescents residing at Youth Educational Centers in Silesia in Poland

K. Kamińska^{1*}, M. A. Ciołek¹, I. Rosół¹, M. Potaczek¹, M. Matlakiewicz¹, K. Wilczyński^{2,3} and M. Janas-Kozik^{2,3}

¹Students' scientific association at the Department of Psychiatry and Psychotherapy of Developmental Age; ²Department of Psychiatry and Psychotherapy of Developmental Age, Medical University of Silesia, Katowice and ³Pediatric Centre of John Paul II, Sosnowiec, Poland

*Corresponding author.

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