

## EPV0153

**Pervasive developmental disorders with a complex structure (epileptic seizures, catatonic, hallucinatory and manic symptoms, delirious episodes during life)**

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**Introduction:** The significant clinical efficacy of lithium and lamotrigine in the described patients is consistent with the hypothesis that microdeletion of the SHANK3 gene may be associated with bipolar disorder.

**Objectives:** The described phenotypes were characterized by intellectual disability, general speech underdevelopment, muscle hypotonia, and developmental dyspraxia. Their causal relationships with epileptic encephalopathy, schizophrenia, bipolar and hyperkinetic disorders have been analyzed.

**Methods:** Prospective studies of two patients with Phelan McDermid syndrome (22q13.3 microdeletions of the SHANK3 gene) within 10-12 years after genome scanning allowed describing the clinical polymorphism of developmental disorders. The sensitivity of psychotic symptoms to antipsychotic and mood stabilizer therapy has also been studied.

**Results:** Manifest psychotic disorders in patients did not reveal an affinity for therapy with amisulpride, haloperidol, quetiapine, which demonstrated a partial therapeutic response to treatment with aripiprazole, which cast doubt on the possibility of qualifying psychotic symptoms in patients as the debut of schizophrenia. The partial therapeutic efficacy of combination therapy with aripiprazole and benzodiazepines (clonazepam/diazepam) qualified psychotic episodes in two patients with 22q13.3 syndrome as pediatric delirium. The significant clinical efficacy of lithium and lamotrigine in the described patients is consistent with the hypothesis that microdeletion of the SHANK3 gene may be associated with bipolar disorder.

**Conclusions:** The combination of lithium and lamotrigine may be recommended for the treatment of polymorbid mental disorders in patients with ASD and 22q13.3 syndrome. If lithium salts are poorly tolerated, a combination of lamotrigine and aripiprazole may be used to treat polymorbid mental disorders with confusion and catatonic symptoms in ASD.

**Disclosure:** No significant relationships.

**Keywords:** Phelan McDermid syndrome; pervasive developmental disorders; lithium salts; lamotrigine; aripiprazole

## EPV0152

**The association between transient childhood psychotic experiences and psychosocial outcomes in young adulthood: examining the role of mental disorder and attachment.**

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**Introduction:** Psychotic experiences (PE) occur most often in childhood, at the same age many mental disorders (MD) develop. There is growing evidence that those who report PE and MD show poorer health outcomes. If this occurs in psychosocial outcomes e.g. self-esteem, stress, mental distress, or social support, is under examined. Attachment anxiety and avoidance are the dimensions of attachment, which is hypothesized to develop in infancy as a mechanism for interpersonal relationships in times of need.

**Objectives:** To examine the role of transient childhood PE in adult psychosocial outcomes, in those with and without MD. Additionally, to examine if the dimensions of attachment attenuate this model.

**Methods:** One hundred and three participants attended baseline (age 11 – 13) and 10-year follow-up. PE and MD were collected using the Schedule for Affective Disorders and Schizophrenia for School-aged Children, Present & Lifetime Version. Attachment and outcomes were collected using self-report measures. Analysis compared those with PE, MD and PE and MD, to healthy controls.

**Results:** PE in childhood was associated with lower self-esteem and lower perceived social support from friends. Lower self-esteem in adulthood was more pronounced in those reporting PE and MD, and was additionally associated with stress in relationships, daily life, and mental distress. Childhood MD without PE was not significantly associated with any psychosocial outcomes. Attachment dimensions significantly attenuated the relationship between PE and self-esteem.

**Conclusions:** This paper illustrates the significant association of childhood PE on adult outcomes, independent of the effect of co-occurring MD, and demonstrate attachment dimensions role in this model.

**Disclosure:** No significant relationships.

**Keywords:** psychotic experiences; youth mental health; early intervention; mental health outcomes

## EPV0153

**Health anxiety in frequently and rarely ill younger adolescents**I. Shishkova<sup>1,2,\*</sup> and E. Pervichko<sup>2,3</sup>

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**Introduction:** It is known that a high level of health anxiety is traditionally recognized as obligatory for hypochondria, which is characterized by a clear and pronounced belief of the subject in the presence of a disease or the danger of its development (A psychiatric glossary, 1975). Such patients are usually characterized by high concern about their health, but this anxiety can be represented by varying degrees of severity. At the same time, it is important to talk not only about pathological anxiety (hypochondria), but also about conditions associated with normal human anxiety about their health, also in children and adolescents.

**Objectives:** To study health anxiety in younger adolescents.