

Irritability and Risk-Taking Behaviour on the Cambridge Gambling Task (CGT) in Adolescents With a Family History of Depression

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Aims. Irritability is a common symptom in children and adolescents, often resulting in referral to mental health services and is associated with depression. Depression in adolescents and adults at familial risk of, and with depression, is associated with reduced risk-taking on the Cambridge Gambling Task (CGT) particularly when the chance of winning is high. However, little is known about risk-taking in irritability. This study tests the hypothesis that increased irritability is longitudinally associated with later risk-taking behaviour on the CGT; specifically, that increasing irritability is associated with lower risk-taking when the chance of a favourable outcome is high.

Methods. We conducted a longitudinal study of the biological offspring of parents of children with depression (n = 337). Irritability, the exposure, was measured at wave one using the Child and Adolescent Psychiatric Assessment (CAPA). The primary outcome was risk-taking to obtain reward at varying probability ratios (6:4, 7:3, 8:2 and 9:1) measured by the Cambridge Gambling Task (CGT) at waves two and three. We investigated the longitudinal association between irritability at wave one and average risk-taking at each ratio across waves two and three using multi-level models. The extent to which risk-taking according to probability ratio varied with irritability was tested with interaction terms. We ran univariable models and then multivariable models.

Results. In univariable (n = 207; Coef. 0.006, 95%CI -0.011–0.023, p = 0.470), and fully adjusted (Coef. 0.011, 95%CI -0.007–0.029, p = 0.213) models there was no evidence of a main association between irritability and risk-taking on the CGT. There was evidence of an interaction between irritability and risk-taking ratio (p = 0.019). In fully adjusted models including the interaction, a one-point increase in irritability was associated with relatively higher risk-taking at the less favourable ratios (6:4 - 0.018 (95%CI -0.002–0.037) and 7:3 - 0.015 (95%CI -0.005–0.035)) relative to the more favourable ratios (9:1 - 0.001 (95%CI -0.019–0.021) and 8:1 - 0.011 (95%CI -0.008–0.031)).

Conclusion. We found no evidence of relationship between irritability and subsequent risk-taking on the CGT overall. However, there was some evidence that those with higher irritability were relatively more risk-taking when less likely to win compared with when a favourable outcome was more likely. These findings warrant further investigation of the association between prior irritability and later depression in a larger community cohort. If prior irritability and depression are both associated with risk-taking, this strengthens the case for focusing on risk-taking as a potential target for preventive intervention.

Abstracts were reviewed by the RCPsych Academic Faculty rather than by the standard *BJPsych Open* peer review process and should not be quoted as peer-reviewed by *BJPsych Open* in any subsequent publication.

Real-World Impact of Research Feedback Reports on CYP Mental Health for Families of Children With Rare Genetic Disorders and Intellectual and Developmental Disability

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Aims. Children and young people (CYP) with intellectual and developmental disabilities (IDD) of known genetic origin experience complex physical and mental health problems; IMAGINE-ID has followed a national UK cohort from childhood to early adulthood. Parents completed structured online psychiatric assessments on repeated occasions. From these assessments, semi-automated personalised reports were generated summarising each child's strengths and difficulties, in collaboration with IMAGINE ID participants and the charity UNIQUE.

We aimed to discover whether providing a structured summary of our mental health and behavioural assessments would be beneficial to families of children with rare genetic conditions and IDD. **Methods.** 574 of the CYP's caregivers completed an online 'impact' survey, five years after receiving their initial report, comprising four areas of potential benefit: Quality of Care (whether the report led to an improvement in the child's quality of mental and/or physical health care); Social Impact (whether the report was used as evidence to support an EHCP, disability benefits etc.), Psychological Impact (whether it led to any change in understanding of the child's condition), and Referrals (whether the report led to a referral for Autism/ADHD etc.). We also invited qualitative feedback.

Results. 82% of respondents rated the reports as helpful. 35% reported they had led to an improvement in their CYP's quality of care, 24% reported social impact using the report as supporting evidence, 99% reported a psychological impact - a change in their understanding of the child, and 17% used the report to initiate a referral for an assessment of ADHD and/or autism. In our qualitative analysis, families who found the report helpful mentioned it led to 'reflection' on their child's condition and that it provided 'access to benefits'. For those who did not find the report helpful, issues such as 'it lacked professional input' and 'forgetting the contents' of the report were identified.

Conclusion. Personalised summary reports, based on a structured assessment of their child's behavioural, social and emotional adjustment, are valued by families of children with rare genetic conditions and IDD and can bring about tangible benefits to the child and the family's access to resources.

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The Prevalence of Attention-Deficit Hyperactivity Disorder in Functional Neurological Disorder: An Integrative Literature Review

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Aims. Functional Neurological Disorders (FNDs) affect motor or sensory functions without a detectable underlying disease. FNDs encompass a range of presentations including non-epileptic seizures, cognitive changes, weakness, and sensory symptoms. The prevalence of FND as a diagnosis is increasing rapidly. Following our clinical observations of a high prevalence of Attention-Deficit Hyperactivity Disorder (ADHD) in people referred with a previous diagnosis of FND to our tertiary Neuropsychiatry pilot service in Derbyshire, we conducted an integrative literature review with the aim to investigate the prevalence of ADHD in people diagnosed with FND.

Methods. We conducted an integrative literature review using a systematic approach. A literature search was performed on two databases, PubMed and ScienceDirect. The keywords 'Functional Neurological Disorder', 'Attention-Deficit Hyperactivity Disorder', 'Non-Epileptic Seizures', 'Functional' were used. Databases were searched for initial search on 31 November 2023 and the search was repeated on 31 January 2024. Only articles in English language were included. Studies were eligible if reporting the prevalence of ADHD in FND populations. Studies involving adults and children were included. A further search was conducted on reference lists from the selected articles.

Results. Database searches on PubMed and ScienceDirect had 298 and 11,837 results, respectively. Only seven studies were identified that explored the prevalence of ADHD in individuals diagnosed with a FND and were included. In the adult population an association between a FND diagnosis, and ADHD traits identified on screening, or a final ADHD diagnosis was identified. The findings also demonstrate an increased incidence of comorbid ADHD and FND with the presence of another co-existing neurodevelopmental disorder such as Autism Spectrum Disorder. Furthermore, results indicated that the prevalence of an ADHD diagnosis in children with a FND was higher compared with adults. The literature suggests that, in both adults and children with FND-related functional seizures there is an increased prevalence of comorbid ADHD.

Conclusion. In conclusion, the findings from this review demonstrate a lack of evidence looking into the prevalence of Attention-Deficit Hyperactivity Disorder in complex presentations being labelled as Functional Neurological Disorder. However, the existing literature indicates there is an association between FND and ADHD. These findings highlight the importance of considering potential ADHD comorbidity in the assessment and management of FND, potentially informing targeted treatment approaches for affected individuals. Further research could explore the efficacy of ADHD medication and similar dopamine modulating molecules in treating sub-cohort of people with FND.

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Impact of Covid-19 on Referrals to Paediatric Liaison Psychiatry at Children's Health Ireland (CHI) at Crumlin as the Pandemic Moved to Endemic Status

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Aims. Rates of acute mental health presentations in youth were rising pre-pandemic internationally. Longitudinal studies following Covid-19 attest to ongoing deterioration in youth mental health, recognising adverse unintended consequences following public health restrictions.

This study aimed to examine whether the initial reported post-Covid-19 increase in mental health presentations persisted following the reclassification of Covid-19 to endemic status, which was accompanied by removal of most restrictions.

Methods. All referrals to paediatric liaison psychiatry (PLP) between Jan 2018–Dec 2022 in a Dublin tertiary children's hospital were included in the study. An interrupted time series analysis was conducted examining referrals with respect to different phases of Covid-19 and application of public health restrictions.

Results. 1,385 referrals to PLP were received over the 5-year study time-period. There was a significant decrease in PLP referrals immediately post Covid-19, following a significant and sustained increase as the pandemic progressed. Public health restriction phases had a unique effect on those presenting with suicidal ideation, with a significant increase in the number of referrals received. There was no effect of restrictions on other clinical profiles.

Conclusion. Increased referrals for youth with mental health difficulties, reported during the Covid-19 pandemic, persisted into the early endemic stage, after Covid-19 public health restriction have ceased. Potential impacts of restrictions on referrals of youth with suicidal ideation require further study. Investment in child and adolescent mental health services remain a priority, and future pandemic responses need to examine unintended consequences of any enforced public health measure.

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IRAMP: Investigation of Risk Assessment and Management Processes Using Datix Report Analysis and Observation of Clinical Team Meetings

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Aims. To investigate risk assessment and management processes across a health board in the context of the implementation of a new risk screening tool and risk policy using comparison of DATIX incidents before and after implementation of the CRAFT tool.

In mental health services, risk assessment and management are key responsibilities for clinical staff. A risk management tool that is structured and evidence-based aims to assist staff in managing risks including violence, self-harm, suicide and self-neglect.

It is not clear whether risk tools have clinical utility in influencing risk-related decision making and previous reviews within the