disclosure ($p<0.05$) and in those who did not disclose spontaneously ($p<0.01$).
Conclusions: The victim and perpetrator characteristics, pattern of disclosure is comparable with previous literature.

Disclosure: No significant relationships.
Keywords: sexual abuse; patterns of disclosure; victim characteristics

EPV0070

Teenage pregnancies resulting from rape in Sri Lanka – lessons learned

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Introduction: Rape resulting in pregnancy warrants special attention due to the associated psychosocial and physical adversities. There are no guidelines for the management of teenage pregnancies resulting from rape in Sri Lanka.
Objectives: This case series aims to describe the experience of four teenagers who became pregnant as a result of rape in Sri Lanka.
Methods: This is a case series of 4 pregnant teenagers who became pregnant as a result of rape
Results: This case series highlight the deficiencies in services in Sri Lanka such as lack of legal framework to terminate pregnancy following rape, delay in legal procedure leading to prolonged institutionalization of pregnant teenager, not giving the teenage mothers the choice of breastfeeding and lack of awareness about the psychological consequences of rape and teenage pregnancy.
Conclusions: Formulating a national guideline on managing rape related pregnancy in teenagers in Sri Lanka, with the involvement of all stakeholders is a need of the hour.

Disclosure: No significant relationships.
Keywords: teenage pregnancy; pregnancy following rape; pregnancy from sexual abuse; Sri Lanka

EPV0071

Increased externalizing and internalizing problems in children with sleep-disordered breathing

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Introduction: Sleep-disordered Breathing (SDB) is a spectrum disorder ranging from primary snoring to obstructive sleep apnea (OSA). One of the most common sleep-disorder in childhood, however remarkably little is known of the effect of SDB on behavioral functions.
Objectives: The aim of our study to investigate the behavioral consequences of SDB compared to children with no history of sleep disorders.
Methods: Two hundred thirty-four children aged 4-10 years participated in the study. The SDB group consists seventy-eight children, sixty-one of the them with OSA and seventeen with primary snoring (average age: 6,7 (SD = 1,83), 32 female/46 male), One hundred fifty-six children participated in the control group (average age: 6,57 years (SD = 1,46), 80 female/76 male). The two groups were matched by age and gender. We used the Attention Deficit Hyperactivity Disorder Rating Scale, Strength and Difficulty Questionnaire, and Child Behavior Checklist to assess the behavioral functions. Furthermore, the OSA-18 Questionnaire was administrated to support the diagnosis of SDB.
Results: According to our results, children with SDB showed a significantly higher level of anxiety and depression and demonstrated significantly higher externalizing (such as attentional problems, hyperactivity, or social problems) and internalizing behavior problems (aggression, rule-breaking behavior).
Conclusions: Due to the neurobehavioral consequences, our finding underlines the importance of the early diagnosis and treatment of sleep-disorder breathing.

Disclosure: No significant relationships.
Keywords: sleep-disordered breathing; behavioral consequences; externalizing; internalizing behavioral problem

EPV0072

Risk factors for severity of social withdrawal in adolescence: Understanding hikikomori as a spectrum

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Introduction: Social withdrawal, or hikikomori, is one of Japan's most serious psychosocial issues. The concept gained international attention around 2010 and widespread psychiatric epidemiological studies have since been conducted.
Objectives: With an understanding of the extensive range of hikikomori circumstances as a spectrum, we aimed to quantitatively measure the severity of hikikomori in adolescent subjects, an age group considered particularly susceptible to the condition, and to identify factors associated with its severity.
Methods: We selected population demographics, socioeconomic data, and psycho-behavioral characteristics as factors related to hikikomori and explored their associations with hikikomori severity using cross-sectional analysis. Subjects were a patient group of middle school students examined as outpatients at a psychiatric clinic during adolescence for a chief complaint of hikikomori and a control group of middle school students matched for sex and age. Subjects' parents completed a questionnaire pertaining to their child's hikikomori symptoms and living environment along with the Child Behavior Checklist (CBCL). The data collected was then statistically analyzed.
Results: T-test results demonstrated that scores for all CBCL syndrome scales were significantly higher in the patient group, but no scores fell within the clinical range. Multiple regression analysis revealed that being anxious/depressed, somatic complaints, lack of communication between parents, and overuse of the Internet were statistical predictors of hikikomori severity.