Conclusions: It may be possible to prevent hikikomori from becoming severe if the above predictors are used to identify high-risk individuals requiring active intervention while hikikomori is at an early stage.

Disclosure: No significant relationships.
Keywords: social withdrawal; Hikikomori; adolescence; risk factor

EPV0074

Child psychiatry expertise in the context of parental separation

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doi: 10.1192/j.eurpsy.2021.1683

Introduction: Marriages' dissolution phenomenon had increased in recent years in Tunisia. The impact of divorce on children depends on the interweaving of several factors and is not inevitably pathological. We have noticed in our daily practice a concomitant increase in the number of request for expert opinions concerning children.
Objectives: Determine the clinical children's profile of separated parents carried out within the framework of legal expertise.
Methods: We carried out a retrospective study in the outpatient child psychiatry ward at Fattouma Bourguiba general hospital in Monastir, Tunisia. Including all the expert reports of children affected by parental separations during a period of two years (2017 to 2019).
Results: 56 children were included in our study. The average age were (6.7 years) with a majority of males (58.2%). School failure concerned (24%). In most cases, the request for expertise was made in the context of mistreatment's suspicion (60.7%), than following the parents' separation (16.1%). Concerning the clinical picture: a normal psychiatric examination was found in the majority of cases (55.4%), anxiety symptoms concerned (32.1%). Cases of depression, global developmental delay and autism were also found.
Conclusions: According to our study, the vast majority of children presented a normal psychiatric examination. Moreover, a preponderant part of the symptoms seemed to result from educational errors. While parental separation poses risks for children, research shows that these negative effects are not the same for everyone. Several factors can reduce these risks and promote children's resilience. Thus, first-line psychosocial care should be offered for families and children in seprations' context.

Disclosure: No significant relationships.
Keywords: Child Psychiatry; expertise; parental separation

EPV0076

Anxiety symptoms and their frequencies in albanian children: Differences by age, gender and other variables

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doi: 10.1192/j.eurpsy.2021.1684

Introduction: Anxiety symptoms in childhood represent an important risk factor for developing anxiety disorders in subsequent developmental stages. This study examines the frequency and characteristics of the symptoms of the principal anxiety disorders in children and adolescents using a self-report questionnaire based on the diagnostic categories of the American Psychiatric Association (APA) manual.
Objectives: Our main aim was to have a bigger view of anxiety symptoms spectrum in Albanian children, their frequencies and diferences related to age, gender or other variables.
Methods: A cross-sectional, non-interventional study was conducted on 50 children/adolescents aged 8 to 17 years (45% males), frequenting Child/Adolescent Psychiatric Service, who completed the Spence Children's Anxiety Scale.
Results: More than one in four of the children and adolescents showed high scores in any anxiety disorder. The anxiety symptoms due to separation were the most frequent in the sample (5.5%), followed by physical fears. Girls scored significantly higher in all disorders ($P < .001$), except in obsessive-compulsive disorder. Differences were found as regards to age in all disorders, except physical fears, but the effect sizes were only in anxiety due to separation, which decreased with age, and generalized anxiety, which was higher in adolescents than in children.
Conclusions: This study puts emphasizes to the early detection of anxiety symptoms in children, in order to provide the early and effective intervention and prevent the development of anxiety disorders in later life.

Disclosure: No significant relationships.
Keywords: anxiety disorders; albanian children; Symptoms; childhood

EPV0077

Decrease in brain complexity with methylphenidate treatment in boys diagnosed with attention deficit hyperactivity disorder: An entropy-based qeeg analysis

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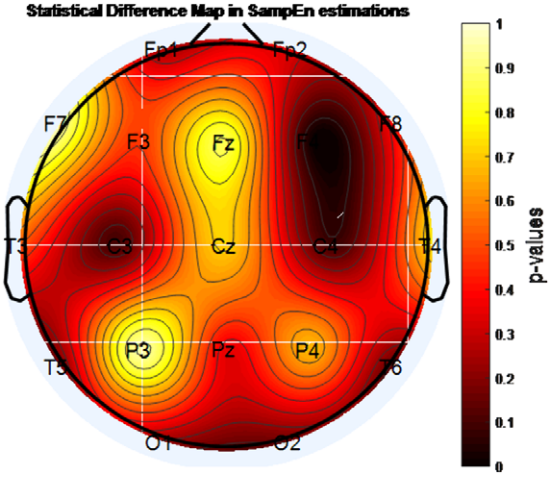
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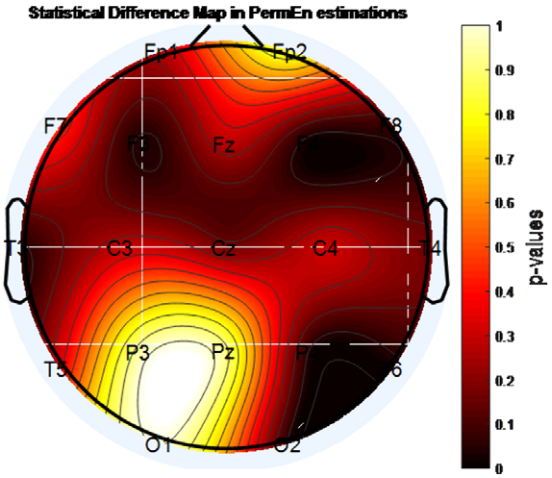
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doi: 10.1192/j.eurpsy.2021.1685

Introduction: Attention deficit hyperactivity (ADHD) disorder is a common childhood neurodevelopmental disorder, and Methylphenidate (MPH) is a first-line therapeutic option for treating ADHD. However, how brain complexity and entropy changes with methylphenidate treatment the clinical implications of possible changes in entropy and the clinical implications of possible changes in entropy have yet to be studied.
Objectives: This study aimed to reveal how the MPH treatment affects the complexity in the brain of children with ADHD by entropy-based qEEG analysis. In addition, the presence of the

https://doi.org/10.1192/j.eurpsy.2021.1685 Published online by Cambridge University Press

relationship between possible neurophysiological changes to be detected with clinical variables and how they are two other important questions of this study to be answered.
Methods: During eyes-open resting, EEG signals were recorded from 25 boys with ADHD-combined type before MPH administration and at the end of the 1st month of the treatment. Approximate entropy (ApEn), sample entropy (SampEn), permutation entropy (PermEn) were used to analyse.
Results:





A statistically significant decrease in entropy level was found with MPH treatment in the F4 channel according to approximate entropy (ApEn) and sample entropy (SampEn) analysis ($p<0.05$). In addition, according to permutation entropy (PermEn) analysis, the decrease in entropy with MPH treatment in the regions indicated by F3, F4, P4, T3, T6, and O2 channels was found to be statistically significant ($p <0.05$).
Conclusions: This is the first study to investigate how MPH treatment affects the complexity in the brain of children with ADHD. Entropy-based qEEG analysis may be a new method that can be used in diagnostic, clinical and prognostic predictions in ADHD.

Disclosure: No significant relationships.
Keywords: ADHD; methylphenidate; entropy; complexity

EPV0078

Increase in brain connectivity with methylphenidate treatment in boys diagnosed with attention deficit hyperactivity disorder: A coherence-based qeeg analysis

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doi: 10.1192/j.eurpsy.2021.1686

Introduction: Attention deficit hyperactivity (ADHD) disorder is a common childhood neurodevelopmental disorder, and Methylphenidate (MPH) is a first-line therapeutic option for treating ADHD. However, how brain connectivity changes with methylphenidate treatment have yet to be studied.
Objectives: This study investigates how the MPH treatment affects the connectivity in the brain of children with ADHD by coherence-based qEEG analysis during rest.
Methods: During eyes-open resting, EEG signals were recorded from 25 boys with ADHD-combined type before MPH administration and at the end of the 1st month of the treatment. Mutual Information (MI),Coherence Function (COH) and Phase Locking Value (PLV) were used to analyse the changes in brain connectivity.
Results: A statistically significant increase in connectivity level was found with MPH treatment between the F3-F4 channels, P3-P4 channels, F7-F8 channels and T5-T6 channels according to PLV, COH and MI analysis ($p<0.001$).
Conclusions: This is the first study to investigate how MPH treatment affects the connectivity of the brain of children with ADHD. Coherence-based qEEG analysis may be a new method

