Sample size is very small, which is explained by the specifics of the intervention. Further research should be focused on the increasing sample and the expanding analysis parameters, such as social and family history, intervention details and the additional variables of the existing measurements.

Disclosure of Interest: None Declared

EPV0186

Exploring the Impact of Wildfires on Children's Psychological Well-being: A Comprehensive Review of Recent Literature

M. K. Adu[1]*, B. Agyapong[2] and V. I. O. Agyapong[1]

[1]Department of Psychiatry, Dalhousie University, Halifax NS and [2]Department of Psychiatry, University of Alberta, Edmonton, AB, Canada
*Corresponding author.
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Introduction: Wildfire disasters have become increasingly rampant. There is a critical need for all to fully understand the mechanism and impact of these disasters on humans, with a special emphasis on the mental health effects they pose on the affected individuals and communities. This article specifically presents a scoping review of the psychological reactions of children and adolescents post-wildfire disaster.
Objectives: This review aims to synthesize currently available literature regarding the impact of wildfire on mental health, specifically the psychological reactions of children to wildfires.
Methods: We identified 8 research articles using 6 databases for this review. Data extraction was performed using a qualitative descriptive approach.
Results: The results identified post-traumatic stress disorder (PTSD), anxiety, depression, stress, alcohol/substance misuse, hopelessness, low resilience, reduced quality of life, and self-esteem as the psychological conditions manifesting in children and adolescents post-wildfire disaster. PTSD was the most evaluated psychological reaction in the participants (7 out of eight studies).
Conclusions: This review highlights that deleterious mental health effects, such as PTSD, depression, anxiety, and suicidality, can persist in children for years post-wildfire disaster. Factors such as gender, direct exposure to the wildfire, re-traumatization, and resilience informed or ameliorated the severity of the impact of wildfire on children and adolescents. Our findings further emphasize the need for multi-year funding and programs to support children and adolescents' mental health, including children with disabilities in the communities that have experienced wildfire disasters.

Disclosure of Interest: None Declared

EPV0188

Experience in the Psychotherapeutic Treatment of Eating Disorders in Children and Adolescents: A Brief Approach and EMDR Outcomes

L. López Gómez-Miguel*, L. Herranz Núñez, L. Santolaya López, F. Benavides Rivero, A. Privado Aranda and M. González San José

Unidad de Salud Mental, Hospital Universitario de Toledo, Toledo, Spain
*Corresponding author.
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Introduction: This study is based on our experience at public hospitals and private clinics of Toledo and Madrid, where we have addressed the treatment of children and adolescents presenting with Eating Disorders (EDs). Our intervention focuses on the application of brief psychotherapy, with particular emphasis on the effectiveness of Eye Movement Desesitization and Reprocessing (EMDR) in these cases.
Objectives: The primary objective of this study is to determine the benefits of applying EMDR in cases of pediatric and adolescent EDs in comparison to other psychotherapeutic techniques.
Methods: Over a period of one year, brief psychotherapy sessions were conducted with children and adolescents diagnosed with EDs. An integrative approach was used, combining family sistemic therapy, cognitive-behavioural therapy techniques, and brief psychodynamic approaches, along with EMDR sessions. Pre and post treatment assessments were conducted to measure changes in symptoms and patients' quality life.
Results: The results obtained reveal significant improvements in patient symptomatology, including a notable reduction in food-anxiety, dietary restriction and compensatory behaviours. Furthermore, improvements were observed in body image perception and patiends' overall quality of life. Incidence of relapse cases was minimal.
Conclusions: Our experience suggests that the application of a brief psychotherapy approach, combined with EMDR sessions, can be highly effective in treating children and adolescents with EDs. Early intervention and individualized adaptation of therapies are essential for achieving positive and lasting outcomes in this patient group. These findings underscore the importance of considering integrative approaches in the care of EDs in young population.

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EPV0189

The relation between autism and psychosis: overlapping and differing features

M. B. Ruas Resende*, F. Agostinho, R. Nogueira, F. A. Silva, R. Lousada and D. Cotovio

Psychiatry, Hospital de Loures, Lisbon, Portugal
*Corresponding author.
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Introduction: Autism spectrum disorders (ASD) and schizophrenia (SCZ) have a strong historic connection. At the beginning of the 20th century when referring to schizophrenic patients Eugen Bleuler used the term autism to describe the apparent withdrawal from the outside world. Other authors also emphasized the association between this two entities. In fact, only in DSM-III were these disorders placed in different diagnostic categories. Today, even though this nosological vision still prevails, a growing number of studies have shown significant overlaps between the two disorders. Patients with the diagnosis of ASD often experience psychotic symptoms and similarly schizophrenic patients have a high prevalence of autistic traits.
Objectives: To clarify the distinction between ASD and psychotic disorders, namely to help the clinical and phenomenological distinction between patients with a primary psychotic disorder versus patients with the diagnosis of an autism spectrum disorder that might also experience psychotic symptoms.

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Methods: Research on UpToDate using the terms "Autism Spectrum Disorders"; "Schizophrenia" and "psychosis".
Results: Delusional beliefs and paranoid ideation are common findings in autistic individuals in the same way that they constitute one of the main features of schizophrenia spectrum disorders. However, in ASD individuals one must be vigilant of its distinction with "childish fantasies". Both disorders (ASD and SCZ spectrum disorders) share Theory of Mind (ToM) impairments that contribute to the development of paranoia.
Sensory anomalies are common in ASD and might be confused with hallucinations. However, anomalous perceptual experiences can and do often happen in ASD and are clinically overlapping with hallucinatory phenomena. In the case of a neurodevelopment disorder, however, they could probably be better understood as a part of it more than the signal of a co-ocurring psychotic disorder. Attenuated psychotic symptoms pose an even more complex subject because of the overlap between autistic symptoms and subclinical psychotic symptoms. Another area that poses diagnostic difficulties has to do with the distinction between negative symptoms seen in schizophrenia and autistic symptoms. Lack of emotional reciprocity in ASD can be confused with "blunted" affect in schizophrenia.
Other overlapping features between these two entities can be identified.
Conclusions: The diagnostic boundaries between ASD and SCZ are not always clear. Their overlapping characteristics and potential co-occurrence might pose important diagnostic challenges in clinical practice. The clinical course of both diseases frequently represents a key element for the differential diagnosis between autism and psychosis. The profound knowledge of these two entities is of extreme importance contributing to the implementation of more targeted and effective management strategies.

Disclosure of Interest: None Declared

EPV0191

Preadolescent and Adolescent Victims of Cyber Victimization in Tunisia

A. Touiti[1,2]*, W. Askri[1,2], S. Halayem[1,2] and A. Bouden[1,2]

[1]Children and Adolescent Psychiatric Department, Razi Hospital, La Manouba and [2]Faculty of Medicine of Tunis, Tunis El Manar University, Tunis, Tunisia
*Corresponding author.
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Introduction: Nowadays children and adolescents are exposed to cyber victimization.This modern form of aggressive behavior has a negative impact on the psychological of victims,self esteem, and social interaction
Objectives: To investigate the relation between cybervictimization and depression in tunisian preadolescents and adolescents
Methods: The Arabic validated version of the "cyberbullying assessment instrument" was distributed through social media groups of preadolescent and adolescents in Tunisia.The participants were also invited to answer items about social and demographic characteristics. The participation was voluntary,without confidential data.
Results: Fifty four preadolescent and adolescent aged between 9 and 16 years old have participated. The average age was 12.4 years old. 64% of participants were girls.More than 80% of children have their own smartphone and a personal count on social media. Among those respondents,12 (22.2%) reported being cyberbullied at least once in the year.the children most likely to be bullied were girl aged between 9 and 12 years old with a poor socioeconomic level.low self esteem, depressive symptoms, anxiety symptoms are associated with cyber victimization.
Conclusions: The level of cyber victimization among preadolescents and adolescents is underestimated. Psychiatric disorder associated to this phenomena have to be considered in order to develop strategies and intervention to reduce the cyberbullying among vulnerable population.

Disclosure of Interest: None Declared

EPV0193

Association and predictor role of MASC scores in pharmacological or psychological treatment indication in a sample of children and adolescent in Spain

C. Canga-Espina[1]*, C. Vidal-Androher[2], M. Vallejo-Valdivielso[1], C. Maestro-Martin[2] and A. Diez-Suarez[1]

[1]Child and Adolescent Psychiatry and [2]Clinical Psychology, Clínica Universidad de Navarra, Pamplona, Spain
*Corresponding author.
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Introduction: Anxiety is one of the most common Mental Health diagnosis in underage population. We decided to study if there was any variable that would lead us to a specific treatment indication using the MASC (Multidimensional Anxiety Scale for Children).
Objectives: Prevalence of psychiatric disorders and comorbidities in an underage population.
Possible association between MASC questionnaire scores and the indication for pharmacological and/or psychological treatment.
Methods: This is a descriptive, observational, retrospective, quantitative study with data from patients between June 2016 and 2023. Inclusion criteria: 3-18 year-old-spanish-speakers who met criteria for a ICD-11 disorder. Exclusion criteria: absence of legal representatives, intellectual disability. **Variables:** Age, sex, psychiatric family history, ICD-11 diagnosis, treatment indication and MASC's subscales (physical symptoms, harm avoidance, social anxiety and separation anxiety). **Statistical analyzes** were performed with STATA-15 program, using as independent variables MASC questionnaire, and dependent ones the indication treatment and diagnosis.
Results: The sample contains 1024 patients, with a mean age of 12 (SD 4.028). Table 1 shows that the most frequent diagnosis is ADHD, with combined presentation with a prevalence of 22.27%, followed by Anxiety Disorders, without differentiating by subtypes (17.93%). It also shows that Defiant and Oppositional Disorder is the most prevalent comorbidity (9.66%) followed by Anxiety Disorder not specified (4.99%). Table 2 stands that there are significantly higher scores in all MASC subscales in those patients who do have prior psychiatry family history. We founf in Table 3 statistically significant differences were found between the score on the Physical Symptoms subscale based on whether the patient was undergoing previous treatment, both pharmacological (8.45 vs. 7.59) and psychological treatment (9.01 vs. 7.95) compared to those who were not (pharmacological 7.36 vs. 7.06), psychological (7.21 vs. 6.92). All these data have been adjusted.