among females is 1.0% (Figure2). The prevalence rate of CD in primary school children is 1.4 times lower than the prevalence of secondary school children.
Conclusions: Gender, culture and socioeconomic inequality may contribute towards diagnostic inequality and prevalence differences. It is recommended that these aspects are addressed, and routine screening and early intervention services are developed.

Disclosure: No significant relationships.
Keywords: Child; adolescent; Conduct; prevalence

EPV0087

Testing the clinical application of the child psychosis-risk screening system (CPSS)

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Introduction: Children in a prodromal state manifesting as truancy or social isolation (hikikomori) often complain of problems that are physical in nature and are subject to significant changes. We developed the Child Psychosis-Risk Screening System (CPSS) that incorporates childhood psycho-behavioral characteristics revealed through a retrospective survey of schizophrenia patients into its algorithm.
Objectives: Our research aimed to test the risk identification of pediatric and psychiatric clinic outpatients using the CPSS.
Methods: We conducted an epidemiological study involving 204 outpatients between the ages of 6 and 14 years who had been examined at a pediatric or psychiatric clinic using the CBCL and clinical data from medical charts. Logistic regression analysis and T-tests were performed using each clinical data variable to clarify the risk of the CPSS calculated from the CBCL data and contributing factors.
Results: The results of the logistic regression analysis demonstrated that the diagnostic category (physical illness or DSM-5 diagnosis) and chief complaint did not contribute to differentiate between the high-risk and low-risk groups. Meanwhile, the environmental factors of "abuse" and "social isolation" did contribute to the discrimination of the two groups.
Conclusions: The fact that the diagnostic category during childhood does not contribute to the discrimination of the high- risk group warrants attention. It is possible that the high-risk group only had a latent endophenotype that had not yet manifested during this period. The factors suggested to have an association with the high-risk group may be reflecting activators and the dynamic state of the critical period for psychosis.

Disclosure: No significant relationships.
Keywords: schizophrénia; prodromal state; Screening; CBCL

EPV0088

The relationship between comorbid overweight-obesity and cold executive functions, verbal short-term memory, and learning in attention deficit hyperactivity disorder

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Introduction: Attention deficit hyperactivity disorder (ADHD) is the most common neurodevelopmental disorder in childhood. ADHD is a risk factor for the development of overweight and obesity. One neuropsychological factor that may play a prominent role in the relationship between ADHD and obesity is executive functioning.
Objectives: The aim of this study is to investigate the relationship between comorbid obesity/overweight and cold executive functions, verbal short-term memory, and learning in children with ADHD. This is the first study to examine relationship between verbal short-term memory-learning and obesity in patients with ADHD.
Methods: This study was conducted with 70 patients with ADHD and 30 healthy controls. In this study, patients diagnosed with ADHD were divided into two groups according to body mass index (BMI) as <85 percentile and ≥85 percentile. Cold executive functions were evaluated by Stroop Test (ST) and Cancellation Test (CT). Serial Digit Learning Test (SDLT) was administered to measure verbal short-term memory and learning capasity. In order to evaluate the severity of ADHD objectively, parents completed the Conners' Parents Rating Scale-Revised Short Version (CPRS-RS).
Results: The ST, SDLT and CT scores were significantly lower in both groups with ADHD than the control group. The CPRS-RS subscale scores were significantly higher in both groups with ADHD than the control group. There was no statistically significant difference in ST, SDLT, CT scores and CPRS-RS subscale scores between the two groups with ADHD.
Conclusions: This study show that overweight/obesity comorbid with ADHD was not associated with cold executive functions, verbal short-term memory, learning, or ADHD symptom severity.

Disclosure: No significant relationships.
Keywords: Executive functions; obesity; learning; attention deficit hyperactivity disorder

EPV0089

Behavior problems associated with brain heterotopia

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Introduction: Brain heterotopia represent a group of rare malformations with a heterogeneous phenotype, ranging from asymptomatic to severe clinical picture (resistant epilepsy, severe developmental delay). The etiology is multifactorial, including both genetic and environmental factors.
Objectives: In this paper we present our experience regarding behavior problems in patients with heterotopia.
Methods: A cohort of 16 pediatric patients with brain heterotopia, six females and ten males, with age at last follow-up ranging from 2 months to 24 years were investigated by clinical examination, electroencephalographic studies, brain imaging, and genomic tests. Specific psychological tests and psychiatric evaluation were performed in all children for behavior problems assessment.
Results: Six individuals presented behavioral problems: autism (three patients) and hyperkinesia with attention deficit (three patients). All of them had intellectual disability or learning problems; five patients had epilepsy, with drug-resistant seizures in four cases. In two cases the behavioral problems occurred before the onset of epileptic seizures.
Conclusions: Behavior problems are important features in patients with brain heterotopia, making the management of these patients more difficult, especially when they occur in association with drug-resistant epilepsy. Acknowledgements: This work was supported partially by grants of the Romanian National Authority for Scientific Research and Innovation CCCDI – UEFISCDI, Projects COFUND-ERANET E-RARE 3-HETER-OMICS-2 Number 87/2019 and 88/2019 within PNCDI III.

Disclosure: No significant relationships.
Keywords: hyperkinesia with attention deficit; autism; Epilepsy; brain heterotopia

EPV0090

Suicidal ideation during the first wave of COVID-19 pandemic in a child and adolescent psychiatry emergency care sample

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Introduction: The COVID-19 pandemic forced many countries to apply restrictive measures. During the first wave Portugal went through a lockdown, and all the child and adolescents had to stay home and could only contact with the one's they lived with for several months.
Objectives: This study aimed to evaluate the impact of those restrictions on suicidal ideation in the pediatric population evaluated in a child and adolescent psychiatry emergency care of a tertiary referral hospital.
Methods: We conducted an exploratory retrospective study. All the data from discharge notes were collected between March 15th and June 15th of 2020 (n=59), and in the homologous period of the previous year (n=178). The referral after evaluation (primary care, child and adolescent psychiatry consultation, inpatient unit) was considered a measure of severity.
Results: The demographic variables (sex, age) were homogeneous between the two groups ($p \geq 0,05$). 17,4% (n=31) of the sample from 2019, and 16,9% (n=10) of the sample of 2020 had suicidal ideation, which was not statistically different between groups (p=1,000). The referral, after evaluation between groups were also not statistically different (p=0,186).
Conclusions: Even though the proportion of patients with suicidal ideation was homogenous during the two periods, the total number of patients evaluated in the emergency room were lower during the first wave of Covid-19 pandemic. We assume that the population had fear of seeking help in hospital facilities, but we also believe that the pause on school burdens and the reconnection between some families could have function as protective factors.

Disclosure: No significant relationships.
Keywords: Restrictions; pandemic; COVID-19; Suicidal ideation

EPV0091

The prevalence of oppositional defiant disorders among young people in europe: A systematic review and meta-analysis

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Introduction: This systematic review estimates the pooled prevalence (PP) of oppositional defiant disorders (ODD) among 5-to-18-year-old YP living in Europe, based on prevalence rates established in the last five years (LFY).
Objectives: Trends of prevalence rates across countries, gender and level of education were analysed. The random effects pooled prevalence rate (REPPR) for ODD was calculated.
Methods: A search strategy was conducted on three databases. Studies were also identified from reference lists and grey literature. Eligible studies were evaluated for reliability, validity, bias, and the REPPR for ODD was calculated.
Results: The European REPPR for ODD is calculated at 1.9% (Figure 1). The REPPR among males is 4.8%, whereas the rate among females is 2.7% (95% CI: 0.7%- 1.4%). The prevalence rate of ODD among primary school children is 1.8 times higher than the prevalence of secondary school children (Figure 2).

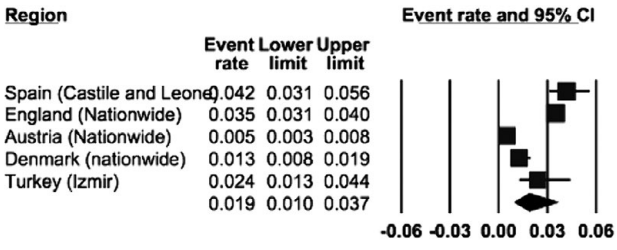


Figure 1: Forest plot showing the prevalence rates of oppositional defiant disorder