Conclusions: The effectiveness of the rehabilitation process for severe neurotrauma in childhood is influenced by the involvement of adults close to the child. The personality traits of the parents, adaptability and resistance to stress, the severity of the child's illness - these factors turn out to be decisive. Most loved ones need medical and psychological support. Regardless of the severity of neurotrauma in children, parents become more active if they note the dynamics in improving mental health. In case of long-term, severe illness of children accompanied by disability, family members only provide care and supervision.

Disclosure of Interest: None Declared

EPV0901

Categorization in different modalities as cognitive processes impairment indicator in children with developmental learning disorder

A. M. Bukinich[1]*, G. D. Vzorin[1] and A. M. Konovalova[1,2]

[1]Faculty of Psychology, Lomonosov Moscow State University and [2]Department of Pedagogy and Medical Psychology, Sechenov University, Moscow, Russian Federation
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1547

Introduction: Categorization is one of the main processes representing human thinking. There is plenty of categorization study methods, but none use the same methodology to study categorization in different modalities. Notably, it is hard to compare results of such categorization directly due to the different category familiarity degree. For example, visual forms and number of visual stimuli are more familiar than number of syllables, plural or singular word form. However, it is possible to compare quality (type) of categorization errors in different modalities considering the relation to different cognitive processes.
Objectives: To explore the categorization errors in visual and verbal modalities.
Methods: A special task inspired by Bruner concept formation study was used. 49 children with developmental learning disorder had to recognize common features in series of visual or verbal stimuli (5 series of 30 stimuli in each modality).
Results: 15 error types were identified in both visual and verbal modalities indicating the impairment of working memory, executive control, nominative processes, cognitive speed and categorization level.
Conclusions: Studying types of categorization errors may indicate the cognitive processes impairment and helps to clarify the relation between categorization and modality of input information.

Disclosure of Interest: None Declared

EPV0902

Psychiatric and behavioral problems in Prader-Willi syndrome: a clinical case

I. M. Marques[1]*, S. Abreu[1] and M. C. Coroa[1]

[1]Department of Psychiatry, Centro Hospital e Universitário de Coimbra, Coimbra, Portugal
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1548

Introduction: Prader-Willi syndrome (PWS) is a rare neurodevelopmental and multisystemic disorder. This syndrome is most often caused by paternal deletion or a maternal disomy of chromosome 15. PWS is characterized by hypotonia, hypogonadism, and hyperphagia. Intellectual disability, impaired social skills, emotional regulation, sleep disorders and behavioral problems (tantrums, temper outbursts, obsessive–compulsive symptoms, skin picking) are also present. Autism spectrum disorder, mood disorders, anxiety, and psychosis are common in these individuals. (Bos-Roubos *et al.* Frontiers in psychiatry 2022; 13 897138).
Objectives: The aim of the case is providing a review of psychiartric and behavioral problems in PWS.
Methods: Clinical case description and literature review on the subject.
Results: We report a clinical case of a 23 year old man who was diagnosed with PWS. Clinical features includes intellectual disability, obesity, scoliosis bracing, probable hypoventilation-obesity syndrome [using non-invasive ventilation], hypercholesterolemia and hypogonadism. He took 3 doses of testosterone in 2017, which had to be suspended due to serious changes in behavior. Behavioral sporadic problems, reactive to the environment, are also present such as impulsiveness, stubbornness, aggressive outbursts, oppositional behavior, self-injuring behavior (placement of foreign bodies in the ear canal), card obsession and suspicious posture. This clinical condition has an impact on PWS relatives and at social level. He was medicated with Paliperidone 9mg; Topiramate 50mg; Clozapine 25mg; Escitalopram 10mg; and Haloperidol 2mg/ml (SOS). Currently, the patient is stable, with little weight gain and sporadic episodes of greater impulsivity without clinical relevance. He has participating in integrated activities at the institution.
Conclusions: The main limitations in adolescence/adulthood are psychiatric and behavioral comorbidities, in association with hyperphagia and intellectual disability, which become more prominent with age. However, these symptoms are highly variable among individuals of different ages. Antipsychotics have been used for management of psychiatric and/or behavioral comorbidities. Other medications have also been used such as antidepressants (SSRI), antiepileptics, mood stabilizers and the response may vary depending on the individual. Weight gain, due to atypical antipsychotics, can be mitigated when food has controlled access. PWS has a major impact on the individual's social and family environment, which requires an appropriate multidisciplinary strategy. A safe and constant environment as well as behavioral management programs must be ensured. (Butler *et al.* Current pediatric reviews 2019; 15 207-244).

Disclosure of Interest: None Declared

EPV0903

Fragile X Syndrome and multidisciplinary strategy: a clinical case

I. M. Marques[1]*, S. Abreu[1] and M. C. Coroa[1]

[1]Department of Psychiatry, Centro Hospitalar e Universitário de Coimbra, Coimbra, Portugal
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.1549

Introduction: Fragile X Syndrome (FXS) is a hereditary disease, linked to the X chromosome. FXS is the most common form of