

O0013

Predictive and discriminant validity of different psychopathology and temperament scales for major psychiatric disorders – 23-year follow-up of the Northern Finland Birth Cohort 1966

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Introduction: Several psychological and psychiatric instruments have been developed to recognize or predict different psychiatric disorders.

Objectives: We studied the predictive, and discriminant validity of different psychopathology scales and temperament traits for subsequent psychiatric diagnoses due to schizophrenia, bipolar and depressive disorders in a 23-year follow-up.

Methods: Temperament traits, perceptual aberration, physical and social anhedonia, depression and anxiety subscales of Symptom Checklist (SCL-D and SCL-A), Hypomanic Personality Scale (HPS), Schizoidia Scale, and Bipolar II Scale were completed as part of the 31-year follow-up survey of the prospective Northern Finland 1966 Birth Cohort (n = 5006). New onset psychiatric diagnoses were followed until age of 54 years using different nationwide registers.

Results: In the follow-up 28 (0.6%) individuals had diagnosis of schizophrenia, 40 (0.8%) bipolar and 405 (8.1%) depressive disorders. Several of the included scales associated statistically significantly with subsequent diagnoses. High SCL-A and SCL-D scores were strong predictors (Cohen's d's between 0.76 and 1.08) for schizophrenia and depressive disorders, whereas high HPS score was best predictor (d=0.67) for bipolar disorders. When comparing patient groups, schizophrenia group had low scores in reward dependence when compared with both bipolar (d=-0.80) and depressive (d=-0.66) disorders. Harm avoidance was the best trait to discriminate depressive and bipolar disorders, with higher scores in depressive disorders (d=0.48).

Conclusions: Interestingly we found that differed psychopathology scales were strong but non-specific predictors for these psychiatric disorders, whereas temperament traits were useful predictors regarding discriminating these disorders. The presented scales can be used in population samples when predicting psychiatric illnesses.

Disclosure: No significant relationships.

Keywords: bipolar disorders; schizophrenia; Depression; temperament

O0012

Pharmacogenetic markers to predict safety of antipsychotics in adolescents experiencing acute psychotic episodes

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Introduction: There are relatively fewer pharmacogenetic studies of antipsychotics in adolescents than in adult patients. The development of personalized pharmacotherapy is promising.

Objectives: Identify the most significant pharmacogenetic predictors of antipsychotic safety in adolescents experiencing acute psychotic episodes

Methods: The study included 101 adolescents diagnosed with acute polymorphic psychotic disorder at the time of admission (F23.0-9 according to ICD-10). All patients were taking an antipsychotic as their main treatment for 14 days. Children's Global Assessment Scale (CGAS), Positive and Negative Symptoms Scale (PANSS), Clinical Global Impression Severity (CGI-S) and Improvement (CGI-I), UKU Side Effects Rating Scale (UKU SERS), Simpson-Angus Scale (SAS), Barnes Akathisia rating scale (BARS) were used. All study participants underwent pharmacogenetic testing of pharmacokinetic and pharmacodynamic factors.

Results: CYP2D6 "intermediate" metabolism increased the risk of developing an adverse reaction by a trend of significance (OR=2.616 (95% CI 0.950-7.203); p=0.063). Carriage of HTR2A rs6313 was associated with a lower score on the UKU SERS "Other Symptoms" subscale (Beta=(-0.289); p=0.003) and an objective score on the BARS akathisia severity scale (Beta=(-0.217); p=0.029). DRD3 rs324026 carriers had a lower BARS akathisia scale score (Beta=(-0.349); p=0.004); DRD3 rs6280 carriers had a lower SAS extrapyramidal symptom severity scale score (Beta=(-0.351); p=0.003). Carriers of ANKS1B rs7968606 were associated with a higher SAS scale score (Beta=0.237; p=0.017).

Conclusions: We proposed that genotyping of CYP2D6*4, *10, DRD3 rs324026 (C allele), DRD3 rs6280 (C allele), HTR2A rs6313 (TT genotype) and ANKS1B rs7968606 (T allele) will predict the high risk of intolerance to antipsychotics in adolescents with acute psychotic episodes.

Disclosure: No significant relationships.

Keywords: Adolescents; Safety; Antipsychotics; pharmacogenetics

O0013

Suicide behaviour and Problematic Internet Use

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Introduction: The use of internet among children and adolescent has risen in the last decade. In addition, suicide is the second cause of death among adolescents. Previous research have indicated the relation between Problematic Internet Use (PIU) and different mental health problems. Nonetheless there is a lack of studies analyzing the relation between suicide behaviour and PIU

Objectives: The main objective of the present work was to analyze the relation between Problematic Internet Use and suicide behaviour and depression in adolescents

Methods: A total of 1036 adolescents (450 males) were randomly selected. Mean age was 15,21 (SD = 1,23). The Adolescent Behavioural Suicide Scale SENTIA, The Reynolds Adolescent Depression Scale Short Form (RADS-SF), and The Compulsive Internet Use Scale (CIUS) were used. A Manova was performed with two groups (risk and non-risk to PIU) as independent variables and suicide and depression scores as dependent variables

Results: The results revealed a statistically significant association between PIU and both depression and suicide behaviour ($\lambda = 0.245$, $F(2,81,000) = 15.549$, $P \leq 0.001$, $\eta^2 = 0.116$). In particular, adolescents at a higher risk for PIU obtained higher scores on suicide behaviours and depression.

Conclusions: Results found in the present study reveal that adolescents have moderate prevalence rates for PIU. Also adolescents at risk for PIU with a total of more than 3 hour sof internet use everyday were at a higher risk for suicide. Prevention strategies should be devote to intervene in internet use as it maybe a variable affecting suicide behaviour.

Disclosure: No significant relationships.

Keywords: mental health; adolescence; suicide behaviour; problematic Internet use

O0014

Empathy and aggressive behavior from teenagers in educative institutions in Monteria, Colombia

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Introduction: According to the World Health Organization (2016), adolescence is one of the most important transitional steps in the life of a human being, recognized by an accelerated rate of growth and changes in behavior. Adolescents from Colombia have reached this step, immersed in a context with a history of social, interpersonal and economic violence. In this sense, study of constructs such as empathy and aggressive behaviors are crucial to appease a healthy school coexistence and thus, contribute to a peace cultur

Objectives: Analyze the relationship between empathy and aggressive levels from adolescents.

Methods: This study was done through a cross-sectional study of correlational scope in 240 (N = 240) students. The Prosocial Behavior Questionnaire developed by Martorell and Gonzalez (1922) and the Aggressive questionnaire, developed by Buss and Perry (1992) were applied. The first one was used to measure empathy and the latter to appraise aggressiveness.

Results: There was evidenced of adequate levels of empathy and a great percentage of medium levels of verbal and physical aggressiveness. (Graph 1). In addition, there was a significant statistical correlation of negative magnitude between these variables (Table 1).

Graph 1: Distribution of levels of empathy and aggressiveness from teenagers.

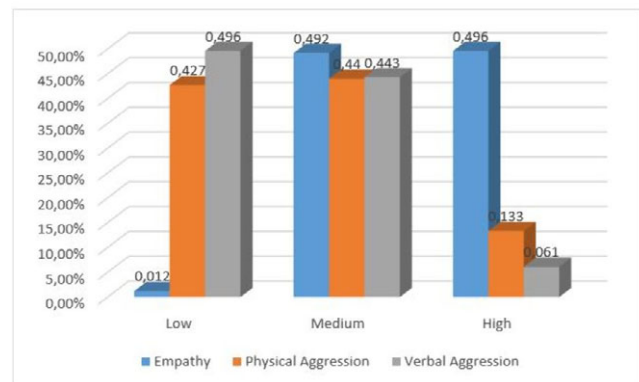


Table 1: Pearson correlations between empathy and aggressiveness

Variables	1	2	3
1. Empathy	---	,- 205**	,31*
2. Physical Aggression		---	,41
3. Verbal Aggression			---

Nota: **p < .01; *p < .05

Conclusions: It was concluded that the higher the optimal levels of empathy, the lower the aggressive behavior presented by teenagers.

Disclosure: No significant relationships.

Keywords: aggressive; Empathy; Adolescents

O0015

Cannabis use in early ADHD, a 3-years follow-up study in relations to clinical characteristics

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Introduction: ADHD is known to increase the risk of substance use, and is associated with lower degrees of education, criminal behavior and neuropsychic difficulties. Previous research is limited by small samples, variable findings, and short follow-up time. Earlier research tends to be limited to substance use above the threshold for abuse or dependency.

Objectives: This study aims at looking at the effects of cannabis use both over and under threshold for abuse or dependency in relations to clinical characteristics over a 3-year follow-up period.

Methods: At follow up a total of 203 patients were diagnosed with ADHD either as primary or as secondary diagnosis, of those 57 (28,1%) had lifetime use of cannabis (LUC), mean age at inclusion was 15 and half years old and 40% were of female sex.