

**Introduction** Psychiatric disorders are frequent among patients with epilepsy. The association between epilepsy and mood disorders is recognized since the classical antiquity. Recent studies demonstrated that the prevalence of bipolar symptoms in epilepsy patients is more significant than previously expected. In the first half of the twentieth century, Kraepelin and Bleuler were the first to describe a pleomorphic pattern of symptoms claimed to be typical of patients with epilepsy and recently Blumer coined the term interictal dysphoric disorder to identify this condition. Although for some authors, the existence of this condition as a diagnostic entity is still doubtful, for others, it represents a phenotypic copy of bipolar disorder.

**Objectives** In this work, we start from the phenomenological similarities between the interictal dysphoric disorder and the bipolar disorder, to explore the neurobiological underpinnings that support a possible link between epilepsy and bipolar disorder.

**Methods** Research of articles published in PubMed and other databases.

**Results** Interictal dysphoric patients have features that resemble the more unstable forms of bipolar II disorder and benefit from the same therapy used in bipolar depression. Epilepsy and bipolar disorder share features like episodic course, the kindling phenomenon as possible pathogenic mechanisms and the response to antiepileptic drugs. The study of possible common biological processes like neurogenesis/neuroplasticity, inflammation, brain-derived-neurotrophic-factor, hypothalamus pituitary adrenal axis, provided promising but not consensual results.

**Conclusions** Further efforts to understand the link between epilepsy and bipolar disorder could provide the insight needed to find common therapeutic targets and improve the treatment of both illnesses.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EW56

### Comparison of treatment response of typical and atypical antipsychotics in acute mania

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**Introduction** The medical treatment of acute mania today mainly includes atypical and typical antipsychotics, lithium or valproate. Atypical antipsychotics are often used as first-line treatment, while typical antipsychotics come with the risk of severe long-term side effects and less used today. However, typical antipsychotics may lead to a faster reduction in the severity of mania or a faster remission of symptoms.

**Objective** To investigate whether the acute effect of typical antipsychotics differs from atypical antipsychotics measured by a daily mania rating-scale (MAS-M) and duration of treatment in a real-life clinical setting.

**Aim** To help determine if short-term treatment with typical antipsychotics may still be of benefit in the acute treatment of mania.

**Methods** This is a retrospective case record study. Patients admitted to an acute hospital ward with acute mania between 2012 and 2015 were included ( $n = 100$ ). The daily use of atypical and typical antipsychotics will be compared by daily change in Bech-Rafaelsen Modified Mania Scale (Mas-M) score and time to discharge. The change in mania over time is presented visually using graph curves.

**Results** The data extraction and data handling will be executed in the winter 2015–2016.

**Conclusions** Any preliminary findings will be presented at EPA 2016.

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## EW57

### The metacognitive functioning in bipolar patients and in bipolar alcoholics patients

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**Introduction** Metacognition is described as the set of human abilities that allows us to recognize and think about own and other people's mental states. We use these skills in order to overcome psychological and interpersonal issues and to cope emotional, cognitive and behavioral suffering. Studies that focusing on metacognition in bipolar disorder (BD) are still limited and data are controversial. Our purpose is investigating the difference between BD patients and BD patients with alcohol addiction (BD+A), in terms of metacognitive functions. In addition, we want to assess among BD+A whether the increase in metacognitive functions mediates the relationship between symptoms at T0 and T1.

**Methods** Forty patients were recruited for this study. A set of tests was performed on each patient to formulate a metacognitive and clinical evaluation. A single measurement was performed on 20 BD patients. Two measurements (T0–T1) were carried out on the 20 BD+A patients, after an integrated treatment.

**Results** Data shown significant differences between these two groups. As regards the treatment of BD+A patients, differences were found between T0 and T1. Among the BD+A patients, reduction in the Beck Cognitive Insight Scale (BCIS-SC, P 0.042) scores between T0 and T1, leads to the prediction of symptom improvement.

**Conclusions** Our results confirm the existence of a specific profile of metacognitive functioning in these patients. Our results reveal that the metacognitive functions appear to be predictors of the improvement in the remission of symptoms.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## Child and adolescent psychiatry

### EW59

#### Correlation of vitamin D to attention deficit hyperactivity disorder

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ADHD is one of the most common neurodevelopmental psychiatric disorders. Many factors have been identified as the cause of ADHD. ADHD is thought to be the result of interactions between biopsychosocial factors leading to neurobiological change. The aim of this study is to investigate the association between serum level of vitamin D and symptoms of attention deficit hyperactivity disorder (ADHD).

**Design** This is a case-control study which was conducted in children below 12 years of age from June 2013 to May 2014 at

outpatient child psychiatry clinic at Elhussin Hospital Al-Azhar University, Cairo, Egypt.

**Methods and subjects** The study was based on 62 cases and 30 controls. The data collection instrument included socio-demographic & Children Attention and Adjustment Survey (House form){CAAS}. And interview by (Diagnostic Interview Kiddie-Sads-Present and Lifetime Version (K-SADS-PL) to exclude other psychiatric morbidity, clinical data, serum 25(OH) Vitamin D. Descriptive statistical analysis were performed, Pearson Chi<sup>2</sup> test ( $\chi^2$ ) and Student (*t*) test.

**Result** 1-Vitamin D level was much lower in ADHD children compared to healthy children, and was a significant difference in the mean values of vitamin D between ADHD(23 ± 13) and control group means (44 ± 12) and *P* value was >0.001 and was significant difference between subgroup of ADHD, means of inattentive subtype was(20 ± 13) hyper active subtype (30.1 ± 5)and combined subtype(24.04 ± 4). *P* value 0.011\*.

**Conclusion** Children with ADHD had significantly lower levels of VITAMIN D than healthy, and inattention subtype than other types of ADHD.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EW62

### Prevalence and determinants of common fears in children and their socio-demographic characteristic

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**Objective** Most children experience some degree of fear during their development. Excessive fears can create serious obstacles to children. The aim of this study was to identify the most common fears in a sample of children and adolescents and examine the socio-demographic correlates of fears.

**Subjects and methods** This cross-sectional study was conducted during the period July 2010 to February 2012 at Public and Private Schools of the Ministry of Education and Higher Education, in Qatar. Out of 2188 students approached, 1703 students agreed to participate in this study, with a response rate of 77.8%. The questionnaire includes socio-demographic information, academic performance, behaviour at home and various fears.

**Results** More than half of the children experienced fears (56.7%). Most of them were in the intermediate level, 12–15 years old (46.1%). Overall, reported fears were significantly more frequent in girls (62.6%) than boys (37.4%) (*P*<0.001). A significant difference was observed between girls and boys who experienced fears in their age group (*P*<0.001), education of mother (*P*=0.04), household income (*P*=0.008) and academic performance (*P*<0.001). The most frequent reported fears were fear of someone dying in the family (85.2%), parents getting divorced (84.5%), breaking religious law (82%), being kidnapped (78.2%), family members ill (78%) and dying (76.7%).

**Conclusions** The study findings revealed that fears were highly prevalent in Arab children and adolescents in Qatar. Girls reported more fears than boys. There was a significant difference observed between girls and boys in their age group and academic performance for the reported fears.

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## EW63

### Anticipating the unknown: A mixed method study assessing French psychiatrists opinions towards prognosis in adolescent and young adult psychiatry

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The early treatment of psychiatric disorders has become a central goal of mental health policies worldwide. Yet little is known about the attitudes of psychiatrists regarding prognosis in their daily work. When treating young patients with acute psychotic symptoms, how do psychiatrists manage diagnostic uncertainty? Do they anticipate the risk of schizophrenia or avoid making prognostications? To what extent do they communicate their expectations to patients and their families?

**Methods** This is a mixed method study. Firstly, a series of in depth interviews addressed French youth psychiatrists' opinions towards prognosis. Participants worked in a variety of settings, public institutions, private practice, and student help. Secondly, an online survey investigated French psychiatrists' opinion toward prognosis. The survey consisted of the presentation of a clinical vignette in which a psychiatrist communicates on prognosis to a young patient with acute psychotic symptoms. The vignette was randomly shown in four versions with different predictions and outcomes. Respondents were then asked questions regarding prognosis communication.

**Results** Qualitative analysis stresses psychiatrists' uncertainty in their daily work with teenagers presenting unclear symptoms that might be the sign of a beginning psychotic process or might as well reflect adolescent unease. Psychiatrists are reluctant to commit into prognosticating or using standardized tools. The contradiction between the expectations that psychiatrists be able to predict what will happen to a young patient and their impossibility to do so, raises an ambivalence that is only managed through a deep emotional involvement. The survey received more than 400 answers, and statistical analysis is in progress.

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## EW65

### Disorganized attachment and psychological symptoms in children with somatic symptoms disorders

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**Introduction** Somatic symptoms disorders (SSD) are one of the most neglected areas in child and adolescent psychiatry (Mohapatra et al., 2014). SSD are characterized by multiple and variable physical symptoms without demonstrable pathophysiological processes. Literature has investigated the role of several psychological variables in SSD, with inconclusive data. Moreover, there is a paucity of studies on middle-childhood and early adolescence in this clinical condition.

**Objectives** We focus on the role of attachment and on psychological aspects in children with SSD.

**Aims** The aims are to verify the presence of:

- an overrepresentation of attachment disorganization in these children;

- an overrepresentation of psychological symptoms.

**Methods** Fifty-six consecutive Italian patients with SSD, aged from 8 to 15, were administered Child Behavior Checklist (Achen-