S562 E-Poster Viewing

EPV0333

Characteristics of adolescents with autism spectrum disorder: About 43 cases

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Introduction: Autism spectrum disorder (ASD) is a neurodevelopmental disorder that appears in early childhood. The diagnosis is based on a clinical dyad: impaired social communication and restricted and repetitive behavior. From the age of 13, children with ASD are integrated into the "Erraihan" therapeutic farm.

Objectives: The aim of our study is to describe the clinical profile of adolescents with ASD followed at the "Erraihan" therapeutic farm. **Methods:** This is a descriptive and analytical cross-sectional study of 43 parents of adolescents with ASD treated at the therapeutic farm.

The "Erraihan" therapeutic farm is a center that takes in adolescents aged over 13 with ASD.

A questionnaire using a pre-established form was administered to the parents by the same doctor to collect data relating to the adolescent.

Results: Forty-three adolescents followed for autism spectrum disorder were included in our study. Their mean age was 17.79 ± 2.29 years (min=13; max=20) with a male predominance 79.1% (n=34). Adolescents with autism were older in 48.8% of cases. They suffered from a chronic illness in 44.2% (n=19) of cases. The most frequently reported somatic antecedent was epilepsy (n=17).

Psychiatric comorbidity was found in 55.8% of adolescents. It was mainly mental retardation (n=22). Adolescent age at first consultation ranged from 1 to 4 years, with an average of 1 year 6 months. Age at diagnosis ranged from 3 to 6 years, with an average of 3 years 3 months.

Time to diagnosis ranged from 0 to 24 months, with an average of 5 months. Twenty-three adolescents (53.5%) communicated with poor speech intelligibility.

Behavioral problems were present in 72.1% of adolescents. Medication was prescribed in 62.8% of cases. The most commonly prescribed drug was risperidone (44.2%).

Sphincter autonomy was acquired in 69.8% of adolescents. Thirty-four adolescents (79.1%) had received speech therapy in childhood. Almost half (44.2%) had entered kindergarten at an early age, and only 14% had started school and then withdrawn.

Conclusions: This study sheds light on the clinical profile of adolescents with autism spectrum disorders at the "Erraihan" therapeutic farm. The results underline the importance of early and appropriate care. Although the majority of adolescents have acquired certain skills, such as sphincter autonomy and access to speech therapy, challenges remain, particularly in terms of communication and behavior. This information underlines the need for ongoing follow-up and personalized approaches to improve the quality of life of these young people within their therapeutic environment.

Disclosure of Interest: None Declared

EPV0332

Idiopathic Central Precocious Puberty and Attention Deficit Hyperactivity Disorder: A Clinical Case Study

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Introduction: Precocious puberty is defined as the appearance of secondary sexual characteristics before the age of 8 in girls and 9 in boys. It can be classified into central precocious puberty (dependent on the hypothalamic-pituitary-gonadal axis) and peripheral precocious puberty. Attention Deficit Hyperactivity Disorder (ADHD) occasionally co-occurs with precocious puberty, complicating its management. This case focuses on a 9-year-old girl diagnosed with idiopathic central precocious puberty, treated with both GnRH analogues and stimulant medication, showing significant improvement in symptoms.

Objectives: The primary objective is to explore the relationship between these two conditions through the presented clinical case. Additionally, the study aims to evaluate the impact of hormone-suppressing medications and ADHD treatment on the patient's social and academic functioning.

Methods: A 9-year-old girl with precocious puberty and ADHD symptoms, diagnosed through hormonal tests and ADHD scales administered to parents and teachers, as well as clinical assessments of emotional status. A multidisciplinary approach is essential for managing complex cases involving idiopathic central precocious puberty and ADHD. Follow-up was conducted every 3 months to assess pubertal status, ADHD symptoms, and psychosocial adjustment.

Results: GnRH analogue therapy successfully arrested pubertal progression, with bone age stabilization and normalized growth velocity. ADHD symptoms improved significantly with extended-released methylphenidate, leading to better attention, reduced hyperactivity, and improved classroom behavior. The patient demonstrated enhanced self-esteem, better peer relationships, and a positive psychosocial outlook.

Conclusions: The relationship between ADHD and precocious puberty may be due to a combination of hormonal, neurobiological, and psychosocial factors. Although the precise connection has not been fully determined, there appears to be an interaction between the neuroendocrine system and brain pathways that regulate behavior and development.

Disclosure of Interest: None Declared

EPV0333

Adolescents hospitalized in adult psychiatric departments: socio-demographic features and clinical profile

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Introduction: Adolescence is a critical period of physical, cognitive and emotional development. Mental health among adolescents is a major public health issue. The number of teenagers requiring psychiatric care is constantly increasing and several studies have found high prevalences of psychiatric disorders in this group.

Objectives: The aim of the study was to describe sociodemographic and clinical characteristics of adolescents hospitalized in an adult psychiatric department.

Methods: We carried out a retrospective descriptive study. It included adolescent patients, aged between 16 and 19 years, who were admitted to the department G of Razi Hospital (Tunisia), between May 2019 and May 2024 (the minimum age for hospitalization in adult psychiatric wards was 16). Data were collected from patients' files.

Results: Thirty-five adolescents were included. The mean age was 17.8 ± 0.8 years. A male predominance was noted with 65.7% of patients. We found that 57.1% of teenagers were using at least one psychoactive substance. Tobacco was the most used substance (54.3%), followed by cannabis (42.9%) and alcohol (40%). The most common motive for hospitalization was behavioral disturbances with 79.1% of patients. The most common psychiatric disorders were schizophrenia (32.6%) and schizophreniform disorder (18.6%). Antipsychotics were the most prescribed medication (58.13%) followed by benzodiazepines (30%).

Conclusions: Knowing the profile of adolescents hospitalized in psychiatry, their sociodemographic and clinical characteristics would enable us to better the care we offer to them.

Disclosure of Interest: None Declared

EPV0345

Assessment of Eating Disorders and Self-Esteem in Adolescents

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Introduction: Self-esteem is a significant indicator of health and well-being, as well as an explanatory variable for various aspects of human behavior. The relationship between self-perception, self-esteem, overall mental well-being, and eating disorders (ED) is considered particularly important, especially during adolescence. **Objectives:** to evaluate the relationsheep between eating disorders (ED) and self-esteem among adolescents and identify associated factors.

Methods: This was a cross-sectional, descriptive, and analytical study conducted between June 2024 and September 2024 among adolescents resident in Sfax. Data were collected through an online Google Forms questionnaire exploring sociodemographic and relational data. We used the "Eating Attitudes Test 40 (EAT-40)" to detect the presence of ED, with a score of \geq 30 indicating the presence of an eating disorder. Self-esteem was assessed using the Rosenberg Self-Esteem Scale: A score below 25 indicates very low self-esteem. A score between 25 and 30 indicates low self-esteem. A score between 31 and 33 indicates average self-esteem. A score between 34 and 39 indicates high self-esteem. score above 39 indicates very high self-esteem.

Results: We collected data from 120 adolescents, with an average age of 16 years and a predominance of females (71.7%). The majority of participants (79.3%) lived in urban areas, 69.2% had a medium socioeconomic status, and 80.8% were enrolled in secondary schools, 33.3% of adolescent have reported relational difficulties with peers,41,5% of Adolescents were living in particular family situations(death of one parent, parental separation, relational difficulties with parents). In our study, 30% of adolescents had personal psychiatric histories. The prevalence of eating disorders estimated at 47.5%. Among participants, 43.3% had very low selfesteem, 55.8% had low self-esteem, and 0.8% had average selfesteem. Our study objectified a signifiant correlation between eating disorders and low self-esteem (p=0.005).

Conclusions: The results of the study show a high prevalence of eating disorders among adolescents, associated with several factors, notably low self-esteem. This underscores the need to develop prevention strategies focused on improving self-esteem during adolescence. Developing effective interventions in this regard could be beneficial for addressing the behaviors and attitudes observed in eating disorders.

Disclosure of Interest: None Declared

EPV0346

Assessment of Eating Disorders in Adolescents: Tunisian cross-sectional study

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Introduction: Adolescence, around the time of puberty, is the life stage most prone to the emergence of eating disorders, with bodily and psychological transformations at the center of the issue. The body serves as a key medium for expressing distress in adolescents. **Objectives:** To estimate the prevalence of eating disorders (ED) among adolescents and to determine associated factors to ED

Methods: This is a cross-sectional, descriptive, and analytical study conducted between June 2024 and September 2024 among adolescents resident at Sfax, Tunisia. Data were collected via an online Google Forms questionnaire exploring sociodemographic and relational data. We used the "Eating Attitudes Test 40 (EAT-40)" to detect the presence of ED, with a score of \geq 30 indicating the presence of an eating disorder.

Results: We collected data from 120 adolescents, with an average age of 16 years and a predominance of females (69.2%). The majority of participants (84.6%) lived in urban areas, 80.8% were enrolled in secondary schools, and 33.3% of adolescent have reported relational difficulties with peers. 41,5% of Adolescents were living in particular family situations (death of one parent, parental separation, relational difficulties with parents).

In our study, 30% of adolescents have a psychiatric disorder. The average total score on the EAT-40 scale was 35.03, the prevalence of eating disorders was estimated at 47.5%. The factors correlated with ED included: female gender (p=0.012), relational difficulties with peers (p=0.002), the death of one parent (p=0.024), and personal psychiatric history (p=0.00).

Conclusions: This study reveals a significant prevalence of eating disorders among adolescents in Sfax, Tunisia. Gaining a deeper