

Image 1:

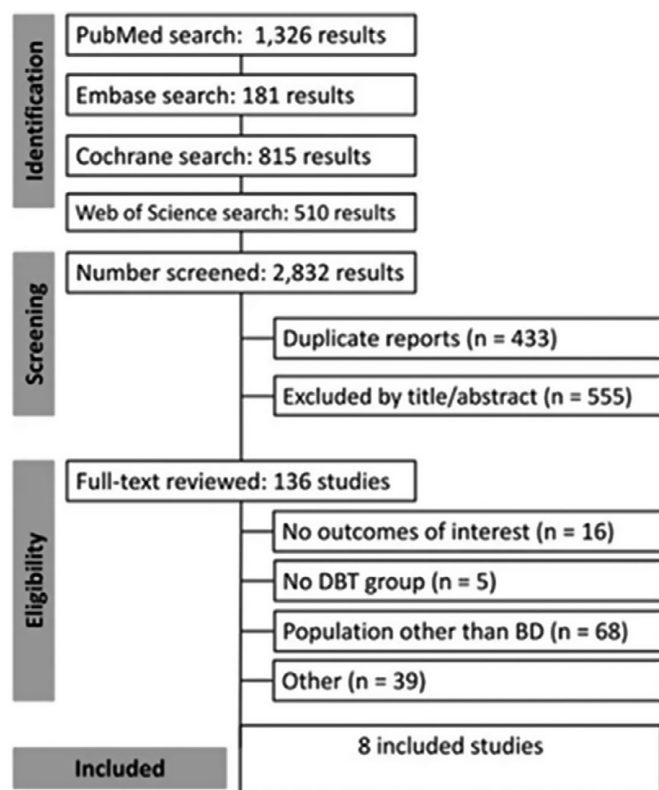


Figure 1. PRISMA flow diagram of study screening and selection

Image 2:

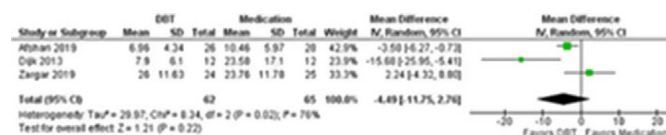


Figure 2. Mean Beck Depression Inventory (BDI-II) score

Image 3:

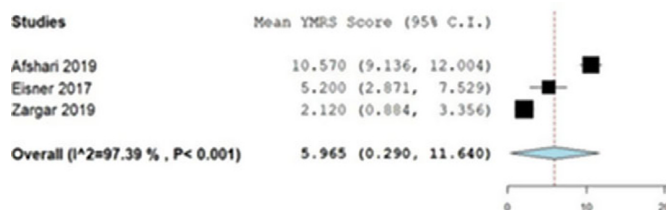


Figure 3. Mean Young Mania Rating Scale (YMRS) score

**Conclusions:** The DBT was observed to have a beneficial impact on mood episodes and symptomatic manifestations among adolescents and adults diagnosed with BD. Therefore, it may be postulated that the DBT could be employed in conjunction with pharmacological agents to mitigate the severity of symptoms and enhance the overall quality of life in patients with such a diagnosis.

**Disclosure of Interest:** None Declared

## Child and Adolescent Psychiatry

### EPV0260

#### Long-acting Paliperidone in the Management of Severe Behavioral Disturbances Post-Traumatic Brain Injury: A Case Report

A. Y. Al Ghailani<sup>1\*</sup>, H. Mirza<sup>2</sup> and S. Al Adawi<sup>2</sup>

<sup>1</sup>Psychiatry, Oman Medical Speciality Board and <sup>2</sup>Behavioural Medicine, Sultan Qaboos University Hospital, Muscat, Oman

\*Corresponding author.

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**Introduction:** Traumatic brain injury (TBI) is a critical public health issue that often results in lasting cognitive and behavioral impairments. These impairments include heightened risks for psychiatric disorders, such as aggression, social withdrawal, and mood instability.

Managing TBI-related behavioral symptoms can be complex, particularly in adolescent patients, where non-adherence to medication presents additional challenges.

**Objectives:** To evaluate the effectiveness of long-acting injectable paliperidone palmitate in managing severe behavioral disturbances following TBI in an adolescent patient with a history of non-adherence to oral antipsychotic treatments.

**Methods:** A case study approach was employed to detail the treatment and outcomes of a 16-year-old male who developed persistent aggressive and impulsive behaviors following a severe TBI at age 9. The patient's treatment history involved multiple oral antipsychotic trials, each limited by adherence issues or side effects, before transitioning to paliperidone palmitate injections.

Behavioral outcomes were monitored, and family-reported assessments of improvement were collected.

**Results:** Following the initiation of monthly paliperidone palmitate injections at an initial dose of 100 mg, later increased to 150 mg, the patient showed significant reductions in aggression and improved behavioral control.

Family members observed fewer aggressive outbursts and better social interactions.

Mild side effects, including weight gain and an increase in prolactin levels, were reported, but these were generally well tolerated by the patient.

**Conclusions:** This case demonstrates the potential benefits of long-acting injectable antipsychotics for managing behavioral dysregulation in TBI patients who struggle with medication adherence. Paliperidone palmitate was effective in stabilizing the patient's behavior, underscoring the need for tailored, multidisciplinary treatment plans that incorporate both pharmacological and psychosocial interventions to optimize long-term recovery in TBI-related neuropsychiatric care.

**Disclosure of Interest:** None Declared

### EPV0261

#### The Influence of Childhood Adversity on Academic Performance, Cognitive Function, and Life Satisfaction in University Students

K. K. Al Qassabi

Psychiatry, Oman Medical Specialty Board, Muscat, Oman

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**Introduction:** Childhood is a pivotal developmental phase, with experiences during this period significantly shaping future outcomes. Adverse Childhood Experiences (ACE), such as abuse, neglect, and household dysfunction, are linked to long-term adverse health outcomes, risky behaviors, and impaired cognitive function. These experiences can also negatively impact academic performance and life satisfaction. Despite the prevalence of (ACE), there is limited research in the Middle East.

**Objectives:** The study aim to examines the relationship between Adverse Childhood Experiences (ACE), academic performance, cognition, and life satisfaction among Sultan Qaboos University students.

**Methods:** This cross-sectional study recruited undergraduate students from Sultan Qaboos University using self-administered surveys distributed via social media and college administrations. It assessed ACE scores, academic performance (GPA), cognitive function, and life satisfaction through validated instruments.

**Results:** The study found that 26.5% of students had high ACE scores, with emotional abuse being the most common. Higher ACE scores were associated with a history of mental illness, urban residence, and lower family financial status. Significant negative correlations were found between ACE scores and life satisfaction, GPA, and cognitive function. Regression analysis revealed that higher ACE scores increased the likelihood of lower GPA and decreased life satisfaction, emphasizing the substantial impact of ACEs on university students' well-being and academic performance.

Table 1: Multinomial Logistic Regression Results of GPA as Dependent Factor.

GPA Category	Predictor	B	Sig. (p-value)	Exp(B)	95% CI for Exp(B)
<2.00	ACE Score	0.317	0.025	1.373	1.041 - 1.811
	Gender	-1.639	0.001	0.194	0.073 - 0.517
	College	-0.229	0.02	0.795	0.656 - 0.964
2.00-2.49	Gender	-1.889	<0.001	0.151	0.066 - 0.345
	Academic Year	0.338	0.012	1.403	1.079 - 1.824
	College	-0.181	0.021	0.835	0.716 - 0.973
2.50-2.99	Academic Year	0.343	0.007	1.409	1.100 - 1.805

Table 2: multiple linear regression analysis SWLS as dependent variable.

Predictor	B	Std. Error	Beta	t	Sig.	95% CI B
Gender	-0.932	0.577	-0.069	-1.614	0.107	-2.066 to 0.203
College	0.358	0.117	0.131	3.066	0.002	0.129 to 0.588
Financial Status	1.14	0.566	0.094	2.015	0.044	0.028 to 2.251
Diagnosed with Mental Illness	-3.355	1.015	-0.144	-3.305	0.001	-5.350 to -1.360
ACE Score	-1.112	0.174	-0.298	-6.41	0.00	-1.453 to -0.771

**Conclusions:** The Study highlights the need for targeted interventions and support systems to address the diverse needs of students affected by (ACE). By understanding the long-term consequences of (ACE) and the mediating role of sociodemographic factors, educators, policymakers, and mental health professionals can develop strategies to promote resilience and well-being among young adults.

**Disclosure of Interest:** None Declared

## EPV0262

### KBG syndrome: a case report of a 12-year-old male child with ADHD

G. Lorenzo Chapatte<sup>1</sup>, C. Alario Ruiz<sup>1</sup>, L. Rodríguez Andrés<sup>1\*</sup>, C. Rodríguez Valbuena<sup>1</sup>, M. S. Geijo Uribe<sup>1</sup>, M. Ríos Vaquero<sup>1</sup>, L. Rojas Vázquez<sup>1</sup>, A. Monllor Lazarraga<sup>1</sup>, L. Sobrino Conde<sup>2</sup>, M. Fernández Lozano<sup>1</sup>, N. Navarro Barriga<sup>1</sup>, B. Rodríguez Rodríguez<sup>1</sup>, M. J. Mateos Sexmero<sup>1</sup>, A. Aparicio Parras<sup>2</sup>, M. P. Pando Fernández<sup>1</sup>, P. Martínez Gimeno<sup>1</sup>, M. A. Andreo Vidal<sup>1</sup>, M. Calvo Valcárcel<sup>1</sup>, M. D. L. Á. Guillén Soto<sup>2</sup>, L. del Canto Martínez<sup>1</sup>, F. J. González Zapatero<sup>1</sup> and M. E. Espinosa Muth<sup>2</sup>

<sup>1</sup>Psychiatry and <sup>2</sup>Psychology, Hospital Clínico Universitario de Valladolid, Valladolid, Spain

\*Corresponding author.

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**Introduction:** KBG syndrome is a rare genetic condition (autosomal dominant inheritance - ANKRD11 mutation) with a particular phenotype (short stature, craniofacial dysmorphism and skeletal abnormalities) and neurodevelopmental delay or intellectual disability. Patients with this condition usually have a greater tendency to present symptoms related to impulsivity and distractibility typical of ADHD, as well as behavioral disturbances and aggressiveness.

We present the case of a 12-year-old male child who is being followed up at the Child and Adolescent Mental Health Department for intellectual disability and ADHD combined.

**Objectives:** To address the importance and multidisciplinary approach of the KBG Syndrome in the pediatric population with a diagnosis of ADHD based on the presentation of the aforementioned clinical case.

**Methods:** Bibliographic search and description of a clinical case of a patient under follow-up for Child and Adolescent Mental Health at the "Hospital Clínico Universitario de Valladolid".

**Results:** A 12-year-old boy from Spain was referred to the Child and Adolescent Psychiatry Department for attention and concentration difficulties and impulsivity problems. The parents describe the patient as a restless and nervous child who is sometimes aggressive in moments of important frustration. They point out that he impulsively performs dangerous acts, such as crossing the road without making sure that a car is not coming by, and is easily distracted. The School Center reports that the child is incapable of following the rules and shows great difficulty in learning.

He has a medical history of growth delay with problems of right dorsal scoliosis requiring the use of a night corset, moderate hypoacusis in the right ear, myopia and astigmatism and macrodontia. He also underwent surgery for epigastric hernia.

In addition, he shows a particular phenotype that shares with his mother and for which genetic studies have been performed that determined the ANKRD11 mutation, confirming the diagnosis of KBG syndrome.

**Conclusions:** KBG syndrome is a rare genetic condition that should be considered in the differential diagnosis of patients with cognitive and behavioral difficulties in combination with a distinctive phenotype.

The importance of the diagnosis of this entity lies in being able to offer a better multidisciplinary medical approach at the organic and mental health level.