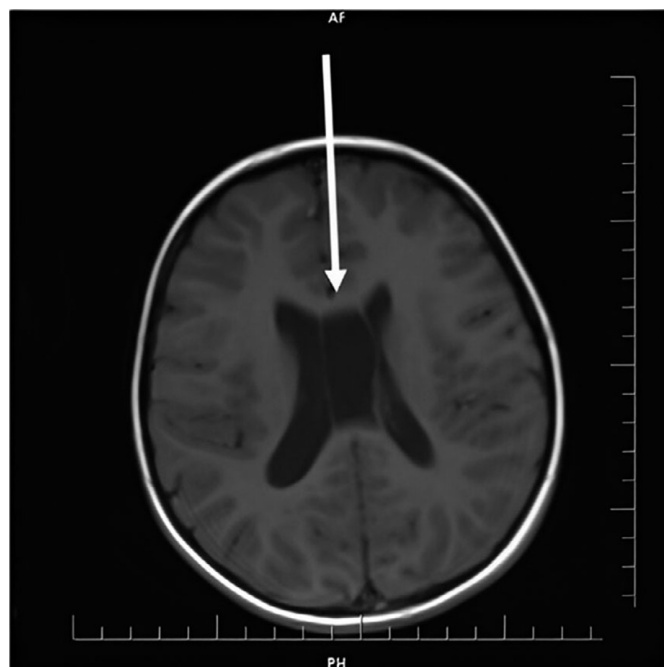


psychiatric diseases, supports the idea that neuroimaging findings that have emerged in recent years are changes in the neuroanatomical structure and brain connection of ASD.

Image 1:



Conclusions: Retaining the CSP or CV after birth may indicate abnormalities in the development of the brain. Isolated CV is rather unusual. Co-occurrence of enlarged CSP and CV persistent into adulthood is less common, but it has also been associated with neurodevelopmental disorders, decreased mental status, psychosis and bipolar disorder. (Landin-Romero *et al.*, 2015 Journal of Affective Disorders, 186, 53-57.) This case, based on the idea that CV is seen more frequently in psychiatric diseases, supports the idea that neuroimaging findings that have emerged in recent years are changes in the neuroanatomical structure and brain connection of ASD.

Disclosure of Interest: None Declared

EPV0273

Comparing the risk factors related to intra-familial and extra-familial sexual abuse in cases that underwent medicolegal evaluation and prepared a report

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Introduction: Childhood sexual abuse, a serious issue for all societies, is a complex experience that requires many legal and professional initiatives (Odacı et al. Psikiyatride Güncel Yaklaşımlar, 2023). It is a widespread, multidimensional problem

worldwide, with physical, mental, social, moral, cultural, and legal aspects (İşeri et al. Çocuk ve Ergen Psikiyatrisi Temel Kitabı, 2008).

Objectives: This study aimed to evaluate risk factors and medico-legal assessment results in children who were sexually abused.

Methods: The records of children who were victims of sexual abuse retrospectively reviewed at Dokuz Eylül University Faculty of Medicine, Department of Child and Adolescent Psychiatry, between January 2010 and December 2023. Sociodemographic, clinical, psychometric, and medicolegal evaluation data were analyzed.

Results: Of the 537 cases that underwent medicolegal evaluation, 80.3% were male and 19.7% were female. The mean age at the time of sexual abuse incident was significantly higher in females (12.5 ± 3.4) than in males (9.8 ± 3.4). Before the incident, 63.0% of cases had at least one psychiatric diagnosis (most commonly Mental Retardation or Developmental Delay (57.5%), MDD (5%), and Conduct Disorder (4.7%)). The period after the incident, 77.1% had at least one psychiatric diagnosis (most commonly PTSD (57.9%) and MDD (49.7%)), most of which occurred after the incident. 22.7% of the cases were victims of incest, 77.3% were victims of extra-familial abuse. The most common abuser was the father in incest (7.1%) and a familiar person (neighbor, etc.) in extra-familial abuse (22.4%). 51.4% of cases experienced simple sexual abuse, while 48.6% faced sexual penetration. In 42.7% of the cases, sexual abuse was first disclosed to family members. In incest victims, compared to cases of extra-familial sexual abuse; the rates of being female (86.9%-78.3%), having successful-average academic success (55.2%-43.3%), having normal-borderline intelligence (77.7%-67.7%), having an unemployed father (25.5%-16.2%), being subjected to simple sexual abuse (63.1%-48.0%), being subjected to sexual abuse by a single perpetrator (90.2%-81.2%), being subjected to repeated sexual abuse (69.7%-45.8%), living in a broken family (66.7%-38.9%), not having a psychiatric diagnosis before the incident (50.8%-34.2%), and withdrawing the abuse allegation/complaint (18.9%-6%) were statistically significantly higher. The age at the date of the incident was significantly younger (median: 11-13), and the time taken to apply to judicial authorities (months) was significantly longer (median: 18.5-12). Predictive variables of incest have also been evaluated using logistic regression analysis.

Conclusions: In this study, the findings found in cases that underwent medicolegal evaluation support the literature findings regarding risk factors for sexual abuse and the negative effects of sexual abuse on children and adolescents.

Disclosure of Interest: None Declared

EPV0274

Adolescent motherhood: reflections based on a clinical case

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Introduction: Adolescence and motherhood are transitional phases, moving from childhood to adulthood and from womanhood to motherhood. These processes involve significant psychological conflicts, where childhood narcissistic vulnerabilities risk being exposed.