

and insignificant dynamics of individual manifestations throughout the disease with the preservation or some decrease in the level of educational and labor adaptation with the restoration of previous social contacts and a fairly high quality of life (scores 61-80 on the PSP scale). The progressive course was characterized by the gradual addition of new psychopathological disorders, or the aggravation of existing ones, patients had a distinct decrease in educational, labor and social adaptation (scores 50-31 on the PSP scale) or complete maladaptation of all spheres of life (scores <40 on the PSP scale).

Conclusions: The high incidence of progressive and monotonous course in juvenile chronic depression, contributing to a decrease in the level of functioning of patients, indicates the importance of timely detection of these conditions and the need for careful selection of therapy.

Disclosure of Interest: None Declared

EPP0641

Predictors of change in emotional regulation from 6 to 30 months of age in infants born after a threatened preterm labour.

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Introduction: Emotional dysregulation are considered early manifestations of neuropsychiatric disorders. Recent research has shown that a threatened preterm labour (TPL) represents an adverse prenatal event that involves temperament disturbances, even in absence of prematurity. Thus, full-term TPL infants at 6 months of age are characterized by lower positive affect, higher negative affect, and worse emotional regulation relative to a full-term non-TPL control group.

Objectives: The aim of this study is to explore the predictors of change of emotional infant competences.

Methods: This prospective cohort study recruited mothers who suffered from a TPL. Infants' temperament assessment was performed at 6 and 30 months of age using the Rothbart Behaviour Questionnaires, examining positive affectivity/surgency, negative emotionality, and orienting and emotional regulatory capacity. A regression model was carried out, including gestational age at birth, maternal anxiety trait, maternal history of psychological traumas, prenatal and postnatal maternal depression, anxiety, and cortisol as well as parenting stress as predictors.

Results: Increased positive affectivity was related with lower paternal stress ($p = .044$). Maternal history of trauma and parenting stress was associated with increased negative emotionality ($p = .037$ and $p = .045$, respectively). Increased emotional regulation disturbance was linked to low gestational age at birth ($p < .001$), higher postnatal depression ($p = .002$), higher prenatal anxiety at TPL diagnosis ($p = .039$) and higher postnatal anxiety ($p = .008$).

Conclusions: Therefore, maternal previous traumas, maternal psychopathology from pregnancy to postpartum as well as parenting

stress should be considered in psychological treatment to improve infant's emotional competences and prevent subsequent neuro-psychiatric disorders.

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The Friendship Gap: Investigating gender differences in adolescent friendships and mental health

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Introduction: Friendships are vital relationships throughout the lifespan, but become especially meaningful during adolescence. Adolescents between the ages of 10 and 18 name a friend as one of the most important people in their lives (Kiesner et al., 2004). Authentic social groups, defined as mutual social relationships that adolescents voluntarily engage in, are sources of support and companionship for adolescents, more than parents (Furman & Buhrmester, 1992). Past research shows adolescents turn to their friends most for mental health support in a crisis, yet less than half report finding the support helpful (Geulayov et al., 2022). Thus, it's crucial to understand friendship dynamics of adolescents in order to address an appropriate intervention. Past literature has demonstrated gender differences in how adolescents approach friendships and social relationships (Lempers & Clark- Lempers, 1993).

Objectives: I aim to investigate whether girls, boys, and gender non-binary individuals differ in their perceptions of friendship quality and friendship dynamics (i.e. social support seeking) and whether these differences have implications for their mental health outcomes. By studying gender differences in friendship quality and mental health, I hope to shed light on potential avenues for promoting inclusivity and positive mental health outcomes for both gender binary and gender non-binary adolescents.

Methods: A cross-sectional survey (OxWell) was administered online to students across secondary schools and further education colleges in England to assess their self-reported friendship quality. The RCADS and WEMWBS scales were used to assess depression and anxiety symptomology, and well-being, respectively. The results from the survey were analysed in R.

Results: Gender-binary and gender non-binary adolescents differed in friendship quality, friendship dynamics, mental health scores, and help-seeking behaviours. Gender non-binary adolescents had the worst mental health scores and reported lowest friendship quality compared to girls and boys. Boys had the best mental health when compared to girls and gender non-binary adolescents, and were more likely to perceive support provided by their friends as helpful. Surprisingly, gender non-binary adolescents reached out to their friends the most (when compared to girls and boys) for mental health support, despite having proportionally lower quality friendships, and were the least likely to find support received from friends helpful.

Conclusions: This data presents evidence for the difference in social relationships across adolescents of all genders. It highlights the need for specialized and inclusive mental health support being made available for gender non-binary youth in England—a