

Results: Three key themes were identified: curriculum, facilitators, and classroom management. Participants valued the practical skills provided through structured lessons. Successful facilitators had backgrounds in child and family work, prior facilitation experience, and supported parents in applying new skills. Support from community leaders significantly impacted the program's initiation, delivery, and sustainability. Recommendations include making the curriculum culturally relevant, flexible, and less internet-dependent. Addressing propriety issues is also crucial for the program's long-term success.

Conclusions: The Net PAMA Classroom's effectiveness relies on a robust curriculum, experienced facilitators, and effective classroom management. Enhancing cultural relevance and flexibility, reducing internet reliance, community support, and resolving propriety concerns are essential for sustainability and scalability.

Disclosure of Interest: None Declared

EPV0296

Descriptive study of the number and duration of physical restraints placed in patients admitted to an adolescent psychiatric unit from 2020 to 2023

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Introduction: The management of situations of behavioral dys-control is essential in hospitalization units. Strategies such as verbal or pharmacological restraint are the first steps to assist in the emotional regulation of a patient with a potentially escalating state of restlessness. In cases where this fails or is not possible, and there is a risk to the patient or others, physical restraints are a strategy for managing the agitated state. The Adolescent Short Stay Unit at Puerta de Hierro Hospital consists of 11 beds. The age of admission is 12 to 17 years.

Objectives: To present data on the number of physical restraints placed in the Adolescent Brief Hospitalization Unit and the average time of placement from 2020 to 2023. The results from 2024 will be presented in the poster of this abstract.

Methods: Physical restraint data were reviewed through patient records and the physical restraint registry that is part of the unit's protocol.

Results: During 2020, physical restraints were placed on 8.7% of the patients admitted that year (21 of 240). In that year, a total of 110 physical restraints were placed for a total of 707.73 hours and an average of 7.06 hours. During the year 2021, 13.3% required physical restraint (30 of 2236). In that year 89 physical restraints were placed for a total of 470.25 hours and an average of 5.35 hours. In 2022, 6.4% of the patients admitted required physical restraint (15 of 236), 11 of whom were women. In that year a total of 100 physical restraints were placed with a total of 457 hours and an average of 4.57. It should be noted that that year, of the 100 restraints, 52 were on the same patient, with 19 restraints on the second patient requiring the most restraints. In 2023, 8.2% of patients required mechanical restraint (19 of 229), 14 of whom were women. A total of 169 restraints were placed for a total of 402 hours and an average time of 2.37 hours. This year, 2023, of the 169 restraints, 106 are on the same patient. From January to August

2024 restraints were applied to 10 patient. A total of 58 restraints were placed, with one patient requiring up to 30 restraints.

It should be noted that the patients who require the most physical restraints are patients with a diagnosis of autism spectrum disorder or patients with intellectual disabilities.

Conclusions: A decrease in the average restraint time has been observed (7.06 to 2.37), which we believe is due to greater training on the part of the nursing team. Patients with Autism Spectrum Disorder and patients with Intellectual Disability are those who have received more physical restraint, suggesting that their management requires a structure and intervention different from those offered by the short hospitalization units.

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EPV0297

Mental health in children and young people with psoriasis. A comorbidity to consider

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Introduction: Children and adolescents with chronic cutaneous conditions are at risk of experiencing adverse psychosocial effects such as anxiety, depression, and loneliness. Children with psoriasis had significantly higher rates of any psychiatric disorder, but these are often unrecognized or under-recognized and not referred to mental health services. It is also clear that the well-being of these children's families may also be impacted by their child's condition.

Objectives: The aim of this study was to review current knowledge of the comorbidity of psoriasis and psychiatric disorders in the paediatric population, which are often underdiagnosed and under-treated.

Methods: A narrative literature review was carried out in the PubMed, Cochrane and Embase databases, selecting only the articles published in the last 10 years, using the following keywords: psoriasis, psychiatric disorders, paediatric population.

Results: There is no doubt that psoriasis is one of the most debilitating chronic dermatological conditions affecting children from a quality-of-life perspective. Indeed, numerous studies have demonstrated that its impact is on par with that of other chronic conditions such as diabetes, asthma or epilepsy. Current research generally supports a positive association between paediatric psoriasis and the onset of anxiety and depression. However, it is difficult to establish a causal relationship as there is some evidence that psoriasis and psychiatric illness can exacerbate each other. Children with psoriasis had significantly higher rates of any psychiatric condition, particularly depression and suicidal ideation. Patients with higher disease severity (Psoriasis Area and Severity Index (PASI) and Body Surface Area (BSA) scores) and longer disease duration, are undoubtedly more likely to experience worse anxiety and depression. They may have other psychiatric comorbidities, such as excoriation (skin picking) disorder or obsessive-compulsive disorder (OCD), resulting in body-focused repetitive behaviours that exacerbate psoriatic plaques.

Paediatric patients with psoriasis appear to be more vulnerable to the psychosocial effects of their disease than adults, especially those

diagnosed at a younger age, who had poorer lifetime outcomes due to less robust coping skills compared to other children. Young children may also not be able to understand or express their emotions associated with psoriasis, which is a significant barrier to conducting research. There is little research on supportive treatment, but psychological support (group or individual) during appointments has been reported positively by patients.

Conclusions: It is essential to consider the psychosocial impact of this particular pathology on children and their families, in order to improve their quality of life through a better understanding of their conditions and the implementation of interventions that help to mitigate these effects.

Disclosure of Interest: None Declared

EPV0298

The Impact of Social Media on Adolescent Body Image: A Comprehensive Review

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Introduction: Social media has become a powerful influence on adolescent body image. Platforms like Instagram and TikTok, which focus on appearance, often promote idealized body standards, leading young users to internalize unrealistic beauty ideals. This has resulted in increasing body dissatisfaction and negative mental health outcomes, as adolescents seek validation through likes and comments.

Objectives: This review examines how social media exposure affects body image and emotional wellbeing in adolescents, particularly whether it contributes to negative outcomes like low self-esteem, body dissatisfaction, and mental health issues.

Methods: A review of international studies published in the last five years was conducted using PubMed and Google Scholar. Search terms included “social media,” “body image dissatisfaction,” “mental health,” and “adolescents.” A total of 26 studies that met the criteria were analyzed.

Keywords: social media, body image dissatisfaction, adolescents, mental health, eating disorders, self-esteem, COVID-19

Results: The studies consistently revealed a strong link between frequent social media use and negative body image. Both male and female adolescents reported increased body dissatisfaction, though most studies focused on females. Social media exposure was also linked to higher risks of eating disorders and a drive for thinness. Frequent users of appearance-focused platforms experienced reduced self-esteem and heightened levels of anxiety and depression, with social comparison behavior worsening these effects. Adolescents' body image was further influenced by peer and parental validation, with peer approval playing a critical role in shaping their self-perception. The negative impacts of social media were particularly exacerbated during the COVID-19 lockdown due to increased isolation.

Conclusions: Social media platforms centered on appearance have a significant negative impact on adolescents' body image and mental health. These findings highlight the need for interventions

promoting media literacy, critical social media engagement, and support from parents and educators to mitigate these effects.

Disclosure of Interest: None Declared

EPV0301

Should genetic screening be conducted for autism spectrum disorder? A case report of a 20 months old child

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Introduction: Autism spectrum disorder (ASD) is a developmental disorder that includes social communication challenges, restricted interests, repetitive behaviors, and intellectual incapacity. The specific etiology of ASD is unknown. However, it is thought to be a combination of genetic and environmental factors. ASD has been linked to copy number variation (CNV), which alters chromosome structure at the submicroscopic level. 16p11.2 deletion is one of the most commonly documented cytogenetic causes of ASD, with an estimated incidence of 0.5% among ASD patients. (Ju et al. 2021; Frontiers in cellular neuroscience, 15, 718720.)

Objectives: We investigated to explain the hereditary characteristics of a case of ASD that included intellectual disability and dysmorphic facial traits.

Methods: Our patient is 20 months old and applied to our clinic accompanied by his parents due to speech delay and with the story of forgetting a few words he had learned around 1 year old. When we evaluate it from a developmental perspective, he held his head at the 10th month, babbled at the 8th month, sat without support 13 the month, crawled at the 15th month, walked at the 17th month, said his first words at the age of one, but he has regression history around 1 year and 4 months old, and not completed his toilet training yet. At 18 months old, a genetic screening was conducted due to brachycephalic facial structure, prominent forehead ridge and protrusion in the frontal area, mild midface hypoplasia, hypertelorism (interocular distance of 2.9 cm), slightly slanted eye sockets, synophrys, anteverted nostrils, a small nose with a deeply set nasal bridge, mild prognathism, and deeply set, posteriorly rotated ears. The genetic screening revealed a 597.84 kb microdeletion in the short arm of chromosome 16(16p11.2) through CGH array analysis

Results: During our examinations, it was observed that the child is generally passive, does not sufficiently use verbal and non-verbal communication, has inadequate eye contact, and responds inconsistently to their name. Based on the developmental tests and our evaluation, the child was found to be significantly behind in developmental milestones, leading to a consideration of autism and cognitive delay. It was recommended that the child begin special education.

Conclusions: The deletion of 16p11.2 may lead to developmental disorders and poor socio-cognitive performance by disrupting long-range prefrontal synchronization. This is supported by ASD-associated CNV and impaired macroscale connectivity. (Bertero et al. 2018; Brain, 141(7), 2055-2065) Deletions of 16q11.2 are associated with higher rates of psychopathology relative to familial controls, emphasizing the need for early identification,