

Objectives: In this study, preferred medication strategies for acute mania over six consecutively published KMAP-BP (2002, 2006, 2010, 2014, 2018, and 2022) were investigated.

Methods: A written survey using a nine-point scale was asked to Korean experts about the appropriateness of various treatment strategies and treatment agents. A written survey asked about the appropriateness of various treatment strategies and treatment agents commonly used by clinicians as the first-line.

Results: The most preferred option for the initial treatment of mania was a combination of a mood stabilizer (MS) and an atypical antipsychotic (AAP) in every edition. Preference for combined treatment for euphoric mania increased, peaked in KMAP-BP 2010, and declined slightly. Either MS or AAP monotherapy was also considered a first-line strategy for mania, but not for all types of episodes, including mixed/psychotic mania. Among MSs, lithium and valproate are almost equally preferred except in the mixed subtype where valproate is the most recommended MS. The preference of valproate showed reverse U-shaped curve. This preference change of valproate may indicate the concern about teratotoxicity in women. Quetiapine, aripiprazole, and olanzapine were the preferred AAP for acute mania since 2014. This change might depend on the recent evidences and safety profile. In cases of unsatisfactory response to initial medications, switching or adding another first-line agent was recommended. The most notable changes over time included the increasing preference for AAPs.

Conclusions: The Korean experts have been increasingly convinced of the effectiveness of a combination therapy for acute mania. There have been evident preference changes: increased for AAP and decreased for carbamazepine.

Disclosure of Interest: None Declared

Child and Adolescent Psychiatry

EPP0367

The morbidity and prevalence of mental pathology in children and adolescents in the kyrgyz republic for 2005-2020

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Introduction: One of the principles of healthcare is preventive focus, that is, the implementation of measures to improve the hygienic education of the population and maintain a healthy life-style. The scientific rationale for carrying out primary prevention activities is based on an analysis of morbidity and prevalence rates and their dynamics.

Objectives: to conduct a comparative analysis of the primary incidence and prevalence of mental pathology in children and adolescents (0-17 years) in the Kyrgyz Republic for 2005-2020 .

Methods: statistical data from the Republican Center for Electronic Health and the National Statistical Committee of the Kyrgyz Republic were used (<http://www.stat.kg/ru/rss/>), (<http://cez.med.kg/>).

Results: primary incidence of mental pathology among children and adolescents in 2005, 2010, 2015 and 2020 amounted to 66.2, 44.1, 44.8, 51.1 respectively (based on 100,000 the child population). The prevalence of mental pathology for 2005-2020 was 418.4, 317.0, 312.5, 400.0 respectively (based on 100,000 the child population). That is, morbidity and prevalence rates show higher numbers in 2005 and in 2020 (Diagram №1). In the gender aspect, morbidity rates were higher in males 40.0, 28.0, 31.3, 31.0 compared to females 26.3, 16.1, 17.1, 20.1 (based on 100,000 the child population; (Diagram №2).

Image:

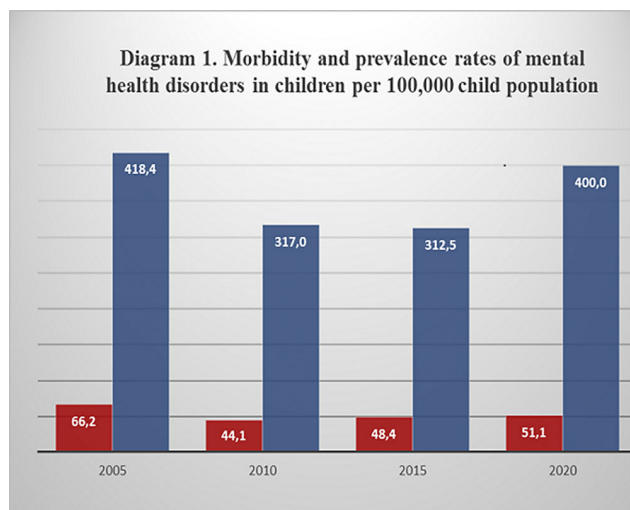
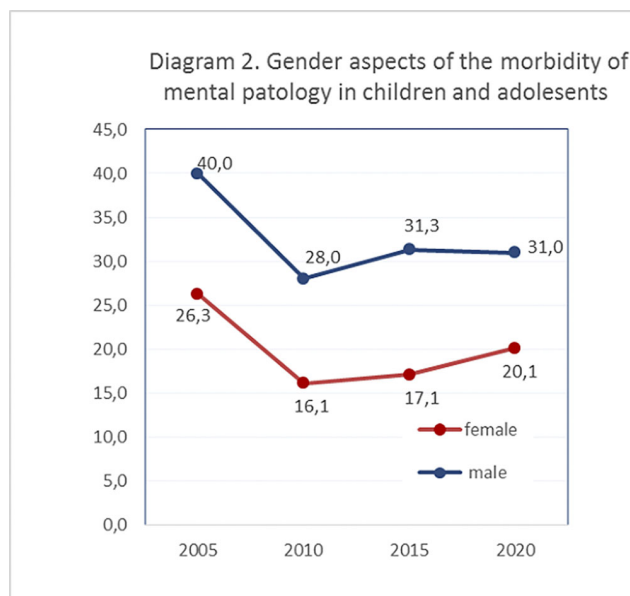


Image 2:



Conclusions: the variability of the obtained indicators of morbidity and prevalence of mental pathology in children and adolescents is due to difficulties in providing specialized psychiatric care to the child population due to the lack of child psychiatrists in the regions

of the country, the processes of population migration, and the phenomenon of stigmatization. In this regard, measures and educational programs are needed to improve the provision of psychiatric care to the child population at the level of primary medical and social care.

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EPP0373

Sexual exploitation of male youth: background characteristics and needs from a life-course perspective

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Introduction: Sexual exploitation is a human rights violation that has a detrimental impact on the psychological-, physical- and social well-being of victims. Sexually exploited male youth are prevalent, yet underrepresented in clinical practice, policy and research. There are multiple barriers that often prevent male youth to disclose and to seek or receive support, such as gender norms, limited awareness of victimization and feelings of guilt and shame.

Objectives: By gaining more insight into the background and clinical characteristics of male victims and their care and support needs, this study aims to raise awareness and to better inform policymakers, care- and educational professionals on adequate prevention and intervention efforts.

Methods: Twenty-six male youth at high-risk or victims of sexual exploitation participated in this qualitative study. By means of semi-structured interviews and case-file analyses, data was collected by to identify risk and protective factors in their life-course and care and support needs.

Results: Results indicate that several vulnerabilities (e.g. previous experiences of abuse and neglect, mental health problems, household dysfunction, social rejection, running away, substance use) and a lack of positive and supportive relationships led male youth into high-risk situations. Among these were involvement in pay dates, survival sex and criminality, which contributed to victimization. Experiences of stigmatization were often a barrier to express vulnerabilities and to disclose victimization. There was a wide variety in care and support needs, including peer-to-peer support, therapy, support with day-to-day practices and anonymous support.

Conclusions: These results will contribute to adequate prevention and intervention strategies and meet the unique needs of male youth at risk for, or victim of sexual exploitation.

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EPP0375

Mental health of children in ukraine. risks and challenges today

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Introduction: Today, the most vulnerable group of Ukrainians are children. Their physical and mental health has been tested since 2020, from COVID-19 to 2022, the start of a full-scale-russia's war against Ukraine. The children of Ukraine were the first to feel the changes, since a complete change in life and the principles of acquiring primary adaptive skills of social interaction were distorted by COVID-19. Subsequently, new challenges in the form of war deformed the idea of life, happiness and the future.

Objectives: Studying the level of adaptation potential in children and adolescents living in the front-line zone in Ukraine.

Methods: The examination included the use of clinical-psychological, psychodiagnostic and psychometric research methods.

Results: The study in 2021 involved 217 children and adolescents with signs of maladjustment. In 2022, 378 children and adolescents with signs of maladjustment, of which 285 children are still in the frontline zone of Ukraine, 93 children, at the time of 2022, were taken abroad and returned to Kharkov in 2023.

During the initial analysis of the results, it was revealed that children with low adaptive resources are more susceptible to showing signs of maladjustment. One of the main factors of an adaptation resource is interaction with others (direct communication). It was this criterion that became the primary frustrating factor for children in the first months of the war. External isolation has led to a lack of communication between children and everyone in Ukraine, who during COVID-19 have adapted to a way of communicating while staying at home in physical isolation. War is a powerful independent psychogenic factor for the formation of maladaptation, but in today's realities it has also become an additional trigger for a previous psychogenic event in the life of Ukrainians.

Parents, for their part, note a sharp deterioration in the well-being of their children, frequent complaints of headaches (89.4%), overwork, aggressiveness (81.5%), closed-mindedness (78.6%), health complaints (74.5%), which is why they have to often consult a doctor and endlessly carry out diagnostics in search of reasons for deterioration (72.3%), weight loss (64.5%). The data indicate the frustration of being in the front-line zone, which aggravates mental health and triggers the process of disruption of adaptation and mental health of children and adolescents.

Conclusions: The study is aimed at developing a psychorehabilitation program for children and adolescents with a low level of adaptive resource.

Disclosure of Interest: None Declared