dysfunction in school and home, impulsivity symptoms showed more dys-
function with peers. 70% of subjects reached threshold in seven of nine
inattention symptoms, only 50% of subjects reached threshold in three of
nine hyperactivity/impulsivity symptoms. Children presented more thresholds
in hyperactivity/impulsivity symptoms.
http://dx.doi.org/10.1016/j.neurenf.2012.05.060

Epidemiological studies of child and adolescent mental
disorders

Su-S-056
Stigma in children and adolescents with psychiatric illness
compared to school population
C.L. Toh
Psychiatry, Selayang Hospital, Batu Caves, Malaysia

Topic:– Stigma in children and adolescents with psychiatric illness compared to
school population 785 parents of children with psychiatric diagnoses, 1619
school children, 1410 parents and 102 teachers were surveyed across seven states
in Malaysia. The results showed that whilst parents were often blamed for the
onset of their children’s mental health problems, there was a large degree of pity
and people wanting to assist. Exposure to media information on persons with
mental illness helped people to understand the illnesses and resulted in feelings
of empathy towards caregivers and their mentally ill children. However, this did
not prevent them from still fearing the children. The implications of the study
call for more work on understanding the mindset and fears of people towards
children and adolescents with mental illness.
http://dx.doi.org/10.1016/j.neurenf.2012.05.061

Su-S-057
Epidemiology of child and adolescent psychiatric disorder
in Bangladesh
M.S.I. Mullick
Department of Psychiatry, Bangabandhu Sheikh Mujib Medical University,
Dhaka, Bangladesh

The first two-phase exploratory study of prevalence of child psychiatric disorder
in Bangladesh was carried out in three contrasting areas. The estimated preva-
ience of any ICD-10 diagnosis was 15% where area difference was ranged from
11–21%. In a subsequent study, the prevalence of psychiatric disorder between
rural and urban school going children was found 14.9% (16% in rural area and
14% in urban area). In another two-stage study in urban area, prevalence of any
DSM IV diagnosis was 18%. The pattern of psychiatric disorders found in Ban-
gladeshis children that identified in other parts of the world, with a preponderance
of behavioural and anxiety disorders. The rate of obsessive-compulsive disorder
was higher than in previous studies. Children from the slum were significan-
tly more likely to have serious behavioural problems. Behaviour disorder was
comparatively more in urban area. In contrast, emotional disorder was more in
rural area. By comparison with the relatively prosperous urban area, the families
in the rural area were less affluent and less well educated, but they had greater
social capital, as judged by high ratings for neighborhood helpfulness and low
ratings for neighborhood danger. The rural families’ greater social wealth may
have offset their financial and educational disadvantages. By contrast, the slum
families were poorer in all ways – experiencing even more financial and educa-
tional disadvantage than the rural families, but without the extra social capital
to offset this. Other associated factors were detected as, good merit status, absence
of recreation facilities, bully victim, academic load, financial crisis in family,
disciplinary hardships and punishment in school, rural resident, low parental
education, positive family history and prolong psychiatric illness of the parents.
In a country with very few child mental health professionals, there is a vast gap
between need and provision that must be addressed.
http://dx.doi.org/10.1016/j.neurenf.2012.05.062

Su-S-058
Prevalence and risk factors of depression in Japanese
junior high school students: An epidemiological approach
A. Kiyota
Department of Pediatrics and Child Psychiatry, Oita University, Yufu-Oita,
Japan

Objective.– To investigate the prevalence and risk factors of depression using
self-report questionnaires.

Methods.– Subjects were 2014 students in two distant regions and 1946 sub-
jects reported. Using self-report questionnaires including Depression Self Rating
Scale for Children (DSRS-C) whose cut-off point was 24 or more according to a
previous study in Japan.

Results.– After excluding 173 subjects because of lack of data, “depression”
group consisted of 62 subjects (3.4%) similar to previous reports. Logistic regres-
sion analysis revealed that risk factors of depression included past deliberate
self-harm (odds ratio 2.39), past suicidal idea (3.29), past abnormal experiences
as psychotic-like experiences (1.73), existence of people to consult (0.18), and
chance to express emotion to others (0.32).

Discussion.– The present study suggests that it is important for teachers to
have reliable relationships with depressive students and give chances to talk
and express their emotion. Through discussion with teachers, teachers might
have a tendency not to notice depressive symptoms in the earnest and sensitive
students.
http://dx.doi.org/10.1016/j.neurenf.2012.05.063

Neuroimaging and neurocognitive markers in pediatric mood
disorders

Su-S-060
Neural systems implicated in attentional control in youth
diagnosed with and at familial risk for mood disorders
C.D. Ladouceur
Psychiatry, University of Pittsburgh, Pittsburgh/PA, USA

This presentation will provide a brief review of neuroimaging evidence demons-
trating that altered development of frontolimbic systems implicated in emotion
processing and regulation during adolescence may contribute to heightened vul-
nerenability for mood disorders in at-risk youth. It will also include findings from a
study including 16 unaffected bipolar offspring (8–17 years) (HBO), and 15 age-
matched healthy controls (HC). We used an emotional working memory fMRI
task to measure neural activity in a priori neural regions supporting emotion
processing (amygdala, ventral striatum) and emotion regulation (ventrolateral
prefrontal cortex (VLPFC), dorsolateral prefrontal cortex (DLPFC), anterior
cingulate cortex (ACC)). Connectivity analyses used VLPFC as a seed region.
Relative to HC, HBO had significant greater activity VLPFC and amygdala to
positive distractors and reduced VLPFC-amygdala connectivity during positive
and negative distractors only. These findings will be discussed in terms of their
implications for risk of future onset of mood and the importance of elucidating
developmental changes in frontolimbic systems during adolescence.
http://dx.doi.org/10.1016/j.neurenf.2012.05.064

Su-S-061
Neural systems implicated in impulse control in pediatric
bipolar disorder and ADHD
A. Passarotti
Psychiatry, University of Illinois at Chicago, Chicago, USA

In a series of studies, we differentiated the neural and behavioral phenotypes of
impulsivity in pediatric bipolar disorder (PBD) and attention-deficit hyper-
activity disorder (ADHD). In a first study, we exami-
ned impulsivity in terms of inhibitory control. We used conventional fMRI and