Tensor imaging (DTI). All had completed the DAWBA diagnostic computerized interview that allows for symptom assessment.

In a first study, we included 42 adolescents with SBP and 168 controls. Voxel-wise comparisons were performed for DTI parameters using TBSS and for grey matter volume using voxel-based morphometry (VBM). In a second study, we compared regional grey matter volume using VBM between 119 adolescents with subthreshold depression and 475 controls.

**Results.** Significant decreases in global and regional Fractional Anisotropy were observed in SBP subjects in various WM tracts that have been reported altered in bipolar disorder, and GM volume was significantly decreased in the anterior cingulate cortex.

In participants with subthreshold depression, GM was significantly decreased in the ventromedial prefrontal cortex, in the anterior cingulate cortex, and in both caudate nuclei.

**Discussion.** Results suggest alterations of brain structure in healthy subjects with subthreshold affective symptoms that are similar to those reported in full-blown manic or depressive episodes, which might lead to preventive strategies. However, whether those alterations are developmental or predict pathology needs further investigation.

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**Mo-S-190**

**Neural systems in anxious adolescents: Neuroimaging studies**

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Anxiety typically emerges in childhood and heralds risk for anxiety and depression in adulthood. Findings of cognitive and emotional deficit in adolescent patients with an anxiety disorder will be reviewed. Cognitive deficit have been identified in three domains: attention bias learning/conditioning, and emotion processing. We will review behavioral and fMRI findings from independent studies using dot-probe detection, fear conditioning and exposure to affective stimuli to examine functional domains in anxious patients. During threat orienting, anxious showed greater amygdala activation together with reduced connectivity to the ventral prefrontal cortex (VPFC) relative to controls. Upon fear conditioning, anxious adolescents developed higher fear levels, but not greater differential conditioning, than controls. Exposed to emotional stimuli, anxious patients showed greater amygdala activation to fearful faces than happy faces in amygdala, VPFC, and anterior cingulated cortex than controls. These findings will feed a neural system model of early-onset anxiety disorders.

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**Mental health services for the children attacked by the large earthquake and huge Tsunami in Japan**

Mo-S-191

**Changes in mental problems of children and the proper treatment during the first year after the disaster**

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The Pacific seaboard of Iwate Prefecture is one of the most severely damaged areas by the massive March 11, 2011 earthquake and tsunami. No child psychiatrists were in the disaster-stricken parts of Iwate and there was an urgent need to organize effective child mental care systems to cover the large rural areas. With the idea of utilizing existing resources, the prefectural offices of child protection spread around the coastal areas were used as outposts, and the three Child Mental Health Care Centers were newly set up, to which psychiatrists have been dispatched periodically. Information from the prefectural offices of child protection and cooperation with local pediatricians were instrumental in successful operation. The Child Mental Health Care Center in Miyako opened in June 2011. Thirty-seven children visited the center (the total number of visits: 138) for nine months since it’s opening. As for changes of chief complaints with time, 53.1% of the total visits in the first three months were related to sleep disturbance, followed by behavioral problem (43.8%) and truancy (40.6%). The latter two have had high percentages; however, sleep disturbance has decreased every three months, whereas regression, separation anxiety, and developmental problems have been increasing.

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**Mo-S-192**

**Strategy of psychiatric intervention in collaboration with the municipal caregivers at severe disaster areas**

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Ishinomaki, the second largest city in Miyagi Prefecture with a population of 162,822, suffered enormous damage from the huge earthquake and tsunami occurred on March 11, 2011. In order to treat children stressed by the catastrophic disaster, the National Center for Global Health and Medicine organized the Child and Adolescent Psychiatric Intervention Team for Ishinomaki. The team’s activities included three steps of intervention, collaborated with the Community Board of Education. The first intervention was interviewing the children in shelters. The second intervention was performing a questionnaire study of psychiatric symptoms for 13,353 children (age: 4–18 years). And the third intervention visiting every school in Ishinomaki and talked about children’s problems with their schoolteachers based on the results of the study. Based on these three activities, we are planning a long-term intervention of children’s psychiatric problems with a collaboration of the Community Board of Education.

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**Mo-S-193**

**Mental health problems of the children in the earthquake and tsunami effected district: Early intervention by expeditionary child psychiatric care team from Hokkaido, Japan**

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The Great East Japan Earthquake occurred on March 11th, 2011. The earthquake triggered a powerful tsunami wave, which did serious damage to the Pacific coast of the Tohoku district. Hokkaido Prefecture sent 13 psychiatric support teams for children to the Kesennuma area, which was greatly effected by the disaster, between March 26th and September 2nd, 2011. The psychiatric support team was composed of 3 or 4 members. Each team stayed there for 5 to 7 days. We visited schools and educational facilities, examined children affected by the disaster, attended (held) lectures and consultation meetings. We visited 41 shelters, 20 nursery schools, 23 schools, and we held eight meetings. We examined 110 children who had psychiatric symptoms caused by the disaster. The symptoms are as follows; fear, avoidance of their damaged houses, sleep disturbance, separation anxiety, psychological regression, irritability, aggressiveness, and somatoform symptoms.

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**Mo-S-194**

**Analysis of child psychiatric intervention by Miyagi child mental health care team**

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A qualitative analysis of the transcultural aspects of international adoption

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The international adoption consultation of the Cochin Hospital’s Maisons des Adolescents (Prof. Marie Rose Moro’s department) receives families who have adopted a child abroad, whatever his age. The transcultural approach is used to complicate the question of the child’s birth culture. In a clinical research related to this consultation, we met 32 adoptive parents and 16 adoptive children or adolescents to explore the adoptive families’ relationship to the child’s country and culture of origin. Parent’s and children’s semi-structured interviews were subjected to an interpretative phenomenological analysis. This qualitative approach revealed several salient themes: the family’s alterity representations of the child, the child’s loyalties’ multiplicity and his feelings of belonging, parent’s cultural countertransference and their questions of genetic transmission, the denial of the child’s racism experiences and parents’ traumatic experiences during the period of their first encounter with the child.

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Psychotherapy in the treatment of ADHD in children and adults

Mo-S-195a

Mixing qualitative and quantitative methods: Cross cultural validation of a rapid screening tool for psychological distress in children 3–6 years old

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Background.— Cross cultural validation of mental health tools involved both qualitative and quantitative methods. This study aims to present the qualitative methodology used during the process of validation of a screening tool for young children in a humanitarian context.

Methods.— A standard cross-cultural validation was implemented using qualitative methods. This method included adaptation, translation of the tool, as well as a qualitative research on child development and psychopathology using focus groups and individual interviews.

Results.— Qualitative research provided useful information to support the external validity of the scale and strengthen the validation results.

Conclusions.— Using both methodologies provided a reliable and a valuable tool in screening for psychological distress in children 3 to 6 years old. To our knowledge, this is the first validation of a screening tool for young children, with a cross-cultural validation component, for use in humanitarian contexts.

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Mo-S-195b

Qualitative research on adolescent’s violence: Between history and identity

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The “riots” in autumn 2005 provoked astonishment and misunderstanding in French society. According to a sociological study, the teenagers engaged in the rebellion were “French from immigrant origin”, and more than 55% from a North African background. So these young people may be considered as “children” of the relationship of French history to its ancient colonies. Numerous attempts to interpretate the “riots” have been proposed, but none of them analyzed the traumatic impact of “silenced” colonial history upon their filiation. The study we present analyses the understandings of 15 French teenagers from Franco-Algerian background, exploring the links they establish between these recent facts and colonial and post-colonial history.

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Mo-S-196

Psychotherapy in the treatment of ADHD in children and adults

Mo-S-197

Efficacy of psychotherapy in the treatment of adult ADHD – a randomized controlled multicontext trial

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Attention Deficit Hyperactivity Disorder (ADHD) is a serious risk factor for co-occurring psychiatric disorders and negative psychosocial consequences in adulthood. Given this background, there is great need for an effective treatment of adult ADHD patients. Therefore, our research group has conducted a first controlled randomized multicenter study on the evaluation of disorder-tailored DBT-based group program in adult ADHD compared to a psychopharmacological treatment (COMPAS). Between 2007 and 2010, in a four-arm design, 433 patients were randomized to a manualized dialectical behavioural therapy (DBT) based group program plus methylphenidate or placebo or clinical management plus methylphenidate or placebo with weekly sessions in the first twelve weeks and monthly sessions thereafter. Therapists are graduated psychologists or physicians. Treatment integrity is established by independent supervision. Primary endpoint (ADHD symptoms measured by the Conners Adult ADHD Rating Scale) is rated by interviewers blind to the treatment allocation (Current Controlled Trials ISRCTN54096201). The trial is funded by the German Federal Ministry of Research and Education.