an accurate diagnosis for an early treatment in order to alleviate the consequences of the ongoing disease. This symposium will address the interest and limitations of making a precise diagnosis during adolescence through clinical cases.

http://dx.doi.org/10.1016/j.neurenf.2012.05.339

Genetic research and ASD

Tu-S-360
Challenges in genetic studies of autism spectrum disorder and insights for future studies
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Previous studies including large-scale genome wide associations (GWA) have identified a number of probable susceptibility genes in autism spectrum disorders (ASD), but most of the susceptibility genes may remain to be identified. This challenge could be due to heterogeneity of ASD as well as lack of biological markers in ASD. Recently, according to advances in the technology, focus of the studies may be moving to exome and other studies which aim to find rare variants of genes, including de novo variants. These new strategies may be promising, but might not be free from the same or larger challenges in statistical analyses as in previous studies including GWA. These issues as well as promising role of Asian collaborations in genetic studies of ASD will be discussed.

http://dx.doi.org/10.1016/j.neurenf.2012.05.340

Tu-S-361
Integration of quantitative behavioral measures and genetic information in ASD
H.J. Yoo
Child and Adolescent Psychiatry, Seoul National University, Seongnam, Korea

The objective of this presentation is to discuss the results of behavioral genetic studies of autism spectrum disorder (ASD) performed in Korea and to discuss it in the genotype-phenotype relationship and population genetics perspectives. In this project, 176 families (720 individuals) consist of probands, siblings and both biological parents and another set of 151 family trios are recruited, carefully phenotyped and assessed using Korean versions of ADOS, ADI-R, intelligence, language, and adaptive functions tests, executive functions tests and rating scales measuring behaviors associated with ASD. Genotyping and statistical analyses were done. This presentation is composed of 3 parts. Aggregation and divergence of ASD-related phenotypes in unaffected siblings of ASD: It describes behavioral and cognitive profiles of unaffected siblings empathizing possible status of our subjects and discussion about uniqueness and diversity of Korean population, which raises issues regarding population stratification of currently proposed revisions. We hope to foment interest in the development of an agenda for research, clinical, systems and cultural questions as to their application to pediatric patients.

http://dx.doi.org/10.1016/j.neurenf.2012.05.341

Pediatric consultation-liaison psychiatry

Tu-S-362
A cross-sectional survey of the mental health requirements of children with 22q11 deletion syndrome in Ireland, and how these are being met
F. McNicholas
Department of Psychiatry, Our Lady's Children's Hospital, Dublin, Ireland

22q11 Deletion Syndrome, also known as Velocardiofacial syndrome, arises as a spontaneous mutation in 80% of cases, and is autosomal dominant in inheritance. It is the most multi anomaly chromosomal disorder occurring in approximately 1/2000. Rates of psychiatric disorder are significantly increased yet routine screening is not in place in many countries. This study presents the findings of a postal survey sent to 40 families on the “22q Association” database. Unmet mental health needs and psychiatric disorders present significant stresses for families with 48% parents rating mental health and psychological wellbeing as their top concern for their child. Routine psychiatric evaluations are perceived by nearly all parents (95%) to be essential in the overall management of children with 22q11DS, yet currently not available, despite their unprecedented high rate of psychiatric comorbidity. The study authors plan to pilot such a service.

http://dx.doi.org/10.1016/j.neurenf.2012.05.342

Tu-S-363
Somatic symptoms disorders in DSM 5: Implications for pediatric psychosomatic medicine
R. Ortiz-Aguayo
Department of Psychiatry, Children's Hospital of Pittsburgh, Pittsburgh, USA

Objective. – To present changes in the nomenclature, classification and diagnostic criteria of somatoform disorders, now Somatic Symptoms Disorders, in DSM-5 and discuss implications in pediatrics.

Background. – The current agenda for the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders includes changes in somatoform and associated disorders. Research on the implications of these changes in pediatric populations is limited.

Methods. – Core and rationale for, changes in the Somatic Symptom Disorders category will be presented. Brief review of available literature in pediatric populations will be discussed. Dialogue regarding classification, developmental, cultural and family factors and their impact on diagnostic and treatment planning will be fomented.

Results. – Participants will demonstrate increased familiarity with core concepts of currently proposed revisions. We hope to foment interest in the development of an agenda for research, clinical, systems and cultural questions as to their application to pediatric patients.

http://dx.doi.org/10.1016/j.neurenf.2012.05.343

Tu-S-364
Multidisciplinary delivery of paediatric liaison mental health service. What should the model for the future be?
M. Anglim
Department of Psychiatry, Children's University Hospital, Dublin, Ireland

This presentation describes a multidisciplinary model of liaison mental health service delivery in a paediatric hospital in Ireland and considers what future liaison service delivery should be when preparing for the amalgamation of three paediatric hospitals in 2015.

The service promotes an integrated, “whole child” approach within the hospital by working with children and families, including siblings where appropriate, and in close collaboration with referrers and all staff involved in the child’s care.

The department sees children who are attending the hospital, psychological, behavioural, and/or psychiatric symptoms associated with their medical or sur-
Depression prevention in adolescence

Tu-S-367
Fifty studies later, have we finally arrived? Results from an updated meta-analysis
S.N. Merry
Department of Psychological Medicine, University of Auckland, Auckland, New Zealand

Prevalence of depression rises rapidly in mid-adolescence and is associated with high levels of disability. Our aim was to determine whether psychological and/or educational interventions are effective in preventing its onset. We carried out a systematic review and meta-analysis of randomised controlled trials of psychological or educational interventions for participants aged 5 to 19 years old. Fifty-three studies with over 14,000 participants were included in analysis which showed the risk of having a depressive disorder post-intervention was reduced compared with no intervention (15 studies; 3115 participants risk difference (RD): −0.09; 95% CI: −0.14 to −0.05; P < 0.0003), at 3 to 9 months (14 studies; 1842 participants; RD: −0.11; 95% CI: −0.16 to −0.06) and at 12 months (10 studies; 1750 participants; RD: −0.06; 95% CI: −0.11 to −0.01). Thus, there was evidence that targeted and universal depression prevention programmes may prevent the onset of depressive disorders compared with no intervention, although there were some limitations to the studies. The persistence of findings suggests that this finding is real and not a placebo effect.

http://dx.doi.org/10.1016/j.neurenf.2012.05.347

Tu-S-368
Depression prevention (RAP) in UK Schools
P. Stallard
Department For Health, University of Bath, Bath, UK

This presentation will provide an overview of an implementation trial of a depression prevention programme delivered in UK schools. 5030 young adolescents aged 12–16 from eight schools were randomised to receive a cognitive behaviour therapy programme (Resourceful Adolescent Programme), attention control or usual school curriculum. The interventions were delivered to whole classes of young adolescents (i.e. universal delivery) as part of the school curriculum. The challenges of delivering school based depression programmes will be highlighted and the widespread use of such programmes discussed.

http://dx.doi.org/10.1016/j.neurenf.2012.05.348

Tu-S-369
MEMO: A multimedia mobile phone programme to prevent depression
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b Department of Psychological Medicine, University of Auckland, Auckland, New Zealand
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e Learning Technology Unit, University of Auckland, Auckland, New Zealand
*Corresponding author.

MEMO is a CRT-based multimedia messaging intervention that is delivered solely over the mobile phone. Key CRT messages are wrapped up in usual teen contexts and told in video diary messages from six adolescents, short cartoon “mobisodes” about four fictitious teens, video messages from celebrities and text messages. This universal prevention intervention was trialled in 15 high schools in Auckland in comparison with a full attention control programme of similar classes of young adolescents (i.e. universal delivery) as part of the school curriculum. The challenges of delivering school based depression programmes will be highlighted and the widespread use of such programmes discussed.

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Tu-S-365
Developing quality improvement programs in pediatric consultation-liaison psychiatry
P. Ibeziako
Department of Psychiatry, Children’s Hospital Boston, Boston, USA

In the United States more than 6 million children are hospitalized annually and nearly 3 million children undergo surgical procedures. High rates of comorbidity between childhood psychiatric and physical disorders ensure that psychiatric issues will present during the peri-operative period. Commonly encountered symptoms include agitation, anxiety, disorientation, perceptual disturbances, insomnia and pain. Agitation and aggressive behavior in the medical/surgical setting presents a unique challenge to providers, is costly to the healthcare system, and has adverse psychological and physical consequences. There are very few studies that pre-emptively target at risk patients prior to elective surgical procedures and implement strategies to prevent agitation during their hospitalization. This presentation will describe the development of preoperative psychiatric assessments by a psychiatry consult service and factors that contributed to successful patient hospital outcomes.

http://dx.doi.org/10.1016/j.neurenf.2012.05.345

Tu-S-366
The development of PCLP and its challenges in a Singapore paediatric hospital – A first-hand experience
S.H. Ong
Department of Psychological Medicine, KK Women’s and Children’s Hospital, Singapore

Introduction.– Efforts to make psychiatric care more accessible and to reduce stigma associated with psychiatric consultation have resulted in the development of a new psychiatric service set in the largest paediatric hospital in Singapore. The Child and Adolescent Mental Wellness Service (CAMWS) sited in KK Women’s and Children’s Hospital (KKWCH), was started in November 2010, and supported by two-part time paediatric consultation liaison psychiatrists (PCLP) and one resource nurse.

Results.– Linking medical and psychological components of a patient’s condition, and facilitating communication among patients, doctors, families, and hospital systems have emerged as the most challenging of psychiatric skills. Other challenges included manpower and resource constraints, incomplete understanding of PCLP service by medical teams which may affect referral and assessment by a psychiatry consult service and factors that contributed to successful patient hospital outcomes.

http://dx.doi.org/10.1016/j.neurenf.2012.05.346

Tu-S-367
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