

Symposium: Children of parents with mental disorders: needs assessment and model interventions

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The needs of children who have parents suffering from severe mental disorders

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Abstract

Objective Mental illness in parents is a biological and environmental risk factor to which young people are exposed. Living with a parent suffering from a mental disorder may have a variety of detrimental consequences, including: (a) the reversal of caregiving ("parentification"); (b) the exposure to an adverse environment, where developmental needs of the child (emotional and practical) might be repeatedly neglected (lack of communication, high expressed emotion, etc.); (c) stigma and discrimination. We will provide a review of needs of these children and of possible interventions.

Methods Systematic searches located studies reporting and assessing met and unmet needs of these children.

Results Young people living in such families often have problems of internalizing and externalizing symptoms, cognitions of shame, guilt, and loneliness, perceptions of lacking social support and social acceptance. Children who have mentally ill parents are up to two and a half times more likely to experience poorer mental health outcomes than their peers. Compared to peers, children of parents with mental disorders are also at risk of poorer intellectual and social outcomes, of affect dysregulation, of behavioral problems, of impaired attention and reduced overall adaptive functioning, of higher rates of substance abuse and multiple diagnosis and finally of low occupational status, health risk behaviour and antisocial behavior.

Conclusions Given the high toll paid by children having parents suffering from severe mental disorders, it is urgent to develop, test and implement structured programmes to help these children cope with stressful circumstances and improve their resilience.

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Identifying and supporting children of mentally ill parents within adult mental health services

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Background Studies have shown that implementing a change of practice in adult mental health care to identify and support children of mentally ill parents is challenging, even though the risk of transgenerational transmission of socioemotional problems and psychopathology has been thoroughly demonstrated the last decade.

Aims The current presentation describes the existing practice of identifying and supporting children of mentally ill parents within adult mental health services. The study was conducted after Norwegian health legislation had been changed to make these tasks

mandatory. The effort included implementation of two interventions; Family Assessment, an intervention for practitioners to increase identification of patients who are also parents and their children, and child talks, an intervention designed to provide support for parents and children within the participating hospital.

Method The sample included mental health professionals in a large university hospital in Northern Norway, who responded to a web-based survey on the routines of the services, attitudes within the workforce capacity, worker's knowledge on the impact of parental mental illness on children, knowledge on legislation concerning children of patients, and demographic variables. Register data from the Electronic Patient Journals (EPJ) was analyzed to assess whether or not the self-reported routines match the reality in the clinic.

Discussion The prospects of clinical change will be discussed in general, as well as to which extent the two implemented interventions have contributed to changes in the clinical practice, workforce knowledge and attitudes in the participating hospital.

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Dutch intervention programmes for children of mentally ill parents

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This presentation reports on the outcomes of a practice-based and science-based enterprise in the Netherlands to develop a comprehensive national prevention program focused on children of parents with a mental illness. An outline of the multicomponent program is presented which includes a wide set of interventions that address evidence-based risk factors and protective factors in multiple domains, including children in different age groups, parents and families, social networks, professionals and the community as a whole.

The 20-year history of this program illustrates the importance of long-term collaborative investments that are required of practitioners, policymakers and scientists to develop and implement a nationwide, comprehensive approach for addressing the prevalent transmission of psychiatric problems from parent to child. The results of recently undertaken controlled efficacy studies of various preventive interventions are presented, as well as findings from process evaluations. Also, strengths and weaknesses of the current program are discussed and recommendations will be offered for the main challenges ahead in terms of program innovation, implementation and research.

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Toward the development of new strategies to assess the needs of children and adolescents with severely mentally ill parents

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Up to 10% of mothers and 5% of fathers in Europe have mental illness. Family, educational and social lives of children and adolescents with parental with mental illness (CAPRI) are disrupted by deprivation & repeated hospitalization. This is an urgent politi-

cal & public health concern: The European Union's CAMHEE report recommends better information on CAPRI risks and resilience and to enable interventions to target the highest risk. This is important because although large numbers of children are in the riskset, most remain resilient. Research needs to support delivery of the CAMHEE initiative by understanding who is at risk and how we can target them early before their life trajectories are fatally disrupted.

To do this, we aim to create groundbreaking cross-national datasets providing robust data on CAPRI prevalence & life trajectories needed to plan future services.

But epidemiology alone cannot expose how risk creates effects at the individual level. We need to know which CAPRI to target with potentially expensive, time-consuming specialist services

Powerful neuroscience techniques such as functional near infrared spectroscopy are now available with which we can link epidemiological risk to elucidate effects of exposure within individual infant brain. This unique interdisciplinary approach yokes robust epidemiological evidence to cutting-edge optical imaging that can be undertaken in very young infants.

This allows us to target developments in clinical interventions for CAPRI to those in greatest need and potentially to those most vulnerable with the future aim to identify early biomarkers of abnormality for targeting intervention in CAPRI.

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Symposium: diagnostic tools and medical device technologies in psychiatry

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Big data market analysis of e-health in medical neuroscience

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Depression is associated with more than 100,000 patent applications for its diagnosis and prognosis, the highest number among mental disorders. This is followed by schizophrenia with 47,000, bipolar disorder with 32,110 and hypomania with 11,377. Among diagnostic tools, magnetic resonance imaging is associated with more than 31,000 patent applications. Among recent technologies, biomarkers are associated with more than 12,000 epigenetics with about 970 metabolomics with 515 genome-wide association study (GWAS) with 486 and bionics with 497 patent applications. The patent applications related to diagnosis and prognosis of psychiatric diseases peaked in 2008 and was overall decreasing until 2016, with a local peak in 2013. This trend has been observed despite the value addition of recent technologies like machine learning, big data and internet of things. However, more conservative diagnostic tools from the last decade like magnetic resonance imaging, epigenetics, bionics and neuro-psychological testing are improved by the recent technologies. For example, bionics is improved by sensors of internet of things to collect the data from patients around the world and use the big data analytics to efficiently diagnose the psychiatric diseases. The Regents of the University of California and Human Genome Sciences Incorporation are the respective academic and non-academic institutions leading the innovations related to diagnosis and prognosis of psychiatric diseases.

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S105

The ethics of mobile health technology

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Introduction Mobile health (m-health) technology has been growing rapidly in the last decades. The use of this technology represents an advantage, especially for reaching patients who otherwise would have no access to healthcare. However, many ethical issues arise from the use of m-health. Health equity, privacy policies, adequate informed consent and a competent, safe and high quality healthcare need to be guaranteed; professional standards and quality of doctor-patient relationship in the digital setting should not be lower than those set for in-person practice.

Aims To assess advantages and threats that may arise from the wide use of m-health technologies, in order to guarantee the application of the best medical practices, resulting in the highest quality healthcare.

Methods A literature search has been conducted to highlight the most pressing ethical issues emerging from the spreading of m-health technologies.

Results Few ethical guidelines on the appropriate use of m-health have been developed to help clinicians adopt a professional conduct within digital settings. They focus on the need for professional associations to define ethical guidelines and for physicians to take care of their education and online behavior when using m-health technologies.

Conclusions The rapid spreading of m-health technologies urges us to evaluate all ethical issues related to its use. It would be advisable to produce an ethical code for the use of these new technologies, to guarantee health equity, privacy protection, high quality doctor-patient relationships and to ensure that m-health is not chosen over traditional care for merely economic purposes.

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Symposium: Social cognition in schizophrenia: pathophysiology, functional implications and treatment options

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Disorganization and social cognition: Data from the Italian network of research on psychoses

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Social cognition (SC) refers broadly to the domains of cognitive functions that are employed in socially relevant situations. These disturbances have been found to be strongly related to disorganized and negative symptoms in schizophrenia. Each of the disorganization symptoms suggests a diminishment or absence of organization. There seems to be a loss of the ability to be directed toward or committed to a particular focal topic or goal. Such conditions are likely to impact patients' drives or motivations to initiate goal-directed activities that could yield pleasurable opportunities. Moreover, it has been suggested that disorganized