

development in different cultures can help in clarifying universal and culture-dependent aspects of autonomy development.

Objectives: The present research studies adolescent's autonomy in context of family functioning in Azerbaijani (Baku) and Russian (Moscow) adolescents.

Methods: Family Environmental Scale (FES), Method of unfinished sentences to study adolescent's autonomy fields («I feel independent when...»), The Separation-Individuation Test of Adolescence (SITA) were used in the study with 201 adolescents, aged from 13 to 18.

Results: Family functioning of adolescents from Moscow is less achievement oriented (U-test, $p=0,000$), family life is less organized ($p=0,000$) and controlling ($p=0,000$). Adolescents in Baku consider the value of independence in families higher ($p=0,01$).

Context analysis of unfinished sentences shows universal categories of autonomy representation (autonomy in specific activities, autonomy as possibility to be alone) and culture specific representations: adolescents from Moscow describe autonomy more like «independence from others», whereas adolescents from Baku describe autonomy as «the presence of others nearby».

Engulfment Anxiety shows negative correlations ($p<0,01$) with family cohesion ($r=0, -0,474$), conflict ($r=-0,466$) and independence ($r=-0,326$) for all adolescents, with expressiveness ($r=-0,490$) and achievement orientation ($r=-0,286$) by Moscow adolescence and with intellectual-cultural ($r=-0,249$) and recreational family orientation ($r=-0,278$) by Baku adolescents.

Conclusions: Autonomy development in families has universal aspects (positive effects of cohesion, etc.), but Moscow adolescents are less focused on others and family in their autonomy development.

Disclosure: No significant relationships.

Keywords: adolescence; personal autonomy; cross-cultural study

EPV0169

Association of childhood externalizing, internalizing and comorbid symptoms with long-term economic outcomes

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Introduction: Externalising and internalising problems are common in school-aged children. Few studies have examined the association between comorbid externalising and internalising symptoms and adult-life economic participation.

Objectives: To investigate associations of childhood externalising, internalising, and comorbid internalising-externalising symptoms with earnings and welfare receipt in adulthood.

Methods: We used group-based trajectory modeling to identify profiles of children with externalising, internalising, and comorbid

symptoms from age 6-12 years. We estimated associations of the identified profiles with participants' employment earnings at age 33-37 years and welfare receipt from age 18-35 years obtained from tax return records. The child's IQ and family socioeconomic background were adjusted for.

Results: Four profiles were identified: no symptoms (45%), externalizing (29%), internalizing (11%) and comorbid symptoms (13%). Relative to the no-symptom profile, participants in the comorbid profile earned US\$-18,323 less annually (95% CI=-20,925 to -15700) at age 33-37 years and were significantly more likely to receive welfare across follow-up (RR=6.30, 95% CI=5.4 to 7.2). Similarly, compared to the no-symptom profile, participants in the externalising profile earned US\$-7,256 less per year (95%CI=-9,205 to -5,307), while participants in the internalising profile earned US\$-9,716 less (95%CI=-12,358 to -7,074). Significant interactions by sex were observed. For participants in the comorbid profile, males were more likely to have lower earnings while females were more likely to receive welfare, relative to the no-symptom profile.

Conclusions: Children exhibiting comorbid externalising and internalising symptoms are at high risk of poor economic outcomes in adulthood. Early detection, prevention and management is crucial to improve the life chances of this vulnerable population.

Disclosure: No significant relationships.

Keywords: disruptive behaviors; developmental psychopathology; behavioral disorders

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Electroconvulsive therapy in children and adolescents: a case report

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Introduction: Electroconvulsive therapy is a proven treatment for mood and psychotic disorders in adult patients. It is estimated that in children and adolescents this type of therapy is underutilised despite the fact that the most recent studies have supported the success of ECT in these patients. A case is described of a 15-year-old male patient diagnosed with psychotic disorder who was previously treated with several antipsychotics, including clozapine, and finally treated with electroconvulsive therapy.

Objectives: Review of the clinical indications of electroconvulsive therapy in children and adolescents with psychotic or mood disorders through a clinical case of a patient admitted to a Psychiatric Short Stay Unit

Methods: Detailed psychopathological description of the case as well as the treatments used (psychotropic drugs and electroconvulsive therapy).

Results: After the administration of electroconvulsive therapy, an improvement in both positive and negative psychotic symptomatology was observed, with a decrease in soliloquies and an improvement in affective flattening.

Conclusions: Electroconvulsive therapy is an effective treatment in adolescent patients with psychotic and mood disorders, which should be considered as indicated as an effective treatment.