

data were analysed through content analysis by doing category, code and prepare theme.

**Result and discussion** After receiving family therapy and education, parents are able to gain a good knowledge about their child's condition. They also learned how to make their child able in doing functional activities such as self care, study and play activities by using structured home environment with daily visual schedule, some sorts of sensory stimulation, visual timing, using sign of toilet, dining, kitchen etc. Through doing these activities with family members, their children are able to learn about timing of doing things, sequence and steps of doing activities.

**Conclusion** Parents find it helpful to create a friendly environment for their children at home by family therapy and education.

## 1249 DEVELOPMENT OUTCOME OF EXTREME PRETERM INFANTS AT 2 YEARS; HAS THE OUTCOME CHANGED OVER LAST FEW YEARS?

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O Narayan. Paediatrics, Princess Royal University Hospital, Orpington, UK

**Background and Aims** Extremely low and very low gestational age (ELGA and VLGA) constitutes a risk factor for development even in absence of cerebral damage, as an immature central nervous system is exposed to invasive and inadequate stimulation. Different developmental trajectories emerged in relation to GA, with poorer developmental outcomes and higher rates of impairment in ELGAs and few mild impairments in VLGAs.

**Method** A retrospective Audit was done. All new-borns at Princess Royal University Hospital, Orpington, UK (< 30+0) between Jan 2008–Dec 2009 were included.

The **parameters** were as follows:

Gender  
Gestation  
Significant Neonatal intervention  
Referred by hospital for dev asses or not  
Assessed by community Paediatricians or not  
Assessed at 2 years or not (H/C)  
Referred to portage services or not if delay  
Development delay if any  
Outcome documented or not

**Results** Total no of cases:

2008: 26  
2009: 23  
Total: 49  
47 eligible (as 2 had died)  
10 (from out of borough or moved out so not followed up) so 37 eligible  
29/37 (78%) followed up

**Delay**

Severe 6 (21%)  
Mild 9 (31%)  
No delay 14(48%)

These results are very similar to EPICure studies done in 2006.

**Conclusions** Children born prematurely still have a higher chance of physical impairment, 3–5 times higher rate of cognitive deficits at 6 years, 2–3 times higher risk of psychiatric diagnosis at 11–12 years. (EPICure).

To have the best possible outcome of these children one should follow them in a multidisciplinary team possibly in an integrated care pathway.

## 1250 DELUSIONAL IDEATION IN YOUNG ADULthood IS ASSOCIATED WITH GREY AND WHITE MATTER ALTERATIONS IN ADOLESCENCE

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AK Kalpakidou, MP Allin, M Walshe, KW Nam, PK McGuire, L Rifkin, RM Murray, C Nosarti. Department of Psychosis Studies, Institute of Psychiatry, King's College London, London, UK

**Background and Aims** Several studies have described an association between very preterm birth and psychiatric problems later in life. We aimed to investigate whether young adults who were born very preterm (VPT) (< 33 gestational weeks) are at increased risk of experiencing non-clinical psychotic symptoms compared to controls (e.g., delusional ideation) and whether such symptoms are associated with altered brain maturation.

**Methods** Sixty-four VPT born individuals and 39 controls (mean age 20 years) completed the Peters' Delusional Inventory, which measures psychosis proneness in the general population. Structural MRI data collected at age 15 years were used to investigate possible anatomical correlates of psychosis proneness, by subdividing the sample according to high ( $\geq 8$ ; VPT: 40.6%, controls: 48.7%) and low ( $< 8$ ) PDI scores.

**Results** The groups did not differ in PDI scores ( $\chi^2=0.67$ ,  $p=0.41$ ). High PDI scores at 20 years were associated with structural brain alterations at 15 years. In controls, those with high PDI scores showed decreased grey matter volume in parahippocampal and middle occipital gyri and decreased white matter volume in inferior temporal gyrus and precuneus. In VPT-born individuals grey matter volume decreases were observed in those with high PDI scores in superior/medial frontal and middle temporal gyri and white matter volume decreases in insula.

**Conclusions** High PDI scores in early adulthood are associated with region-specific structural brain alterations in mid-adolescence. Fronto-temporal alterations observed in the VPT group may reflect the neurodevelopmental vulnerability of this network, which has been implicated in the pathophysiology of delusions in psychosis.

## 1251 NEURODEVELOPMENTAL DISABILITIES AND MENTAL HEALTH IN EXTREME PRETERM CHILDREN. A NATIONAL POPULATION BASED STUDY

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<sup>1</sup>SK Elgen, <sup>1,2</sup>KT Leversen, <sup>3</sup>JH Grundt, <sup>3</sup>J Hurum, <sup>3</sup>AB Sundby, <sup>1,2</sup>IB Elgen, <sup>1,2,3</sup>T Markestad. <sup>1</sup>Department of Clinical Medicine, Pediatrics, University of Bergen; <sup>2</sup>Department of Pediatrics, Haukeland University Hospital, Bergen; <sup>3</sup>Department of Pediatrics, Hospital Innlandet Trust, Lillehammer, Norway

**Objective** To compare mental health at 5 years in children born extremely preterm with a reference group, and assess associations between neurodevelopmental disabilities and mental health within the preterm group.

**Design** In a national Norwegian cohort with gestational age (GA) 22–27 weeks or birthweight 500–999g mental health was assessed with The Strengths and Difficulties Questionnaire (SDQ), cognitive function with the Wechsler Preschool and Primary Scale of Intelligence-Revised (WPPSI-R), motor function with the Movement Assessment Battery for children (ABC-test) and severity of cerebral palsy (CP) with the Gross Motor Function Classification for CP (GMFCS). Neurodevelopmental disabilities (NDD) were described as mild and moderate/severe. SDQ of the preterm children was compared with that of an unselected reference group. SDQ sub-scores  $\geq 90^{\text{th}}$  percentile of the reference group were defined as a mental health problem and a Total Difficulties Score  $\geq 90^{\text{th}}$  percentile (TDS90) as suggestive of psychiatric disorder.

**Results** Of 372 eligible preterm children parents completed SDQ for 255 (69 %). 97(38%) had TDS90 compared to 116 (11%) of the