presentation attending the paediatric neurology departments in Ireland. A questionnaire and chart review was performed on all cases.

Results 16 cases were documented by paediatric neurologists from 2006- 2013 giving an incidence of 0.21/100,000. 13 occurred in females with a median age of 10 years. 75% presented predominantly with a hemichorea.

All had functional impairment with 11/16 having behavioural or mood change. 5 had carditis diagnosed by echo. 13 had serological evidence of previous GAS infection. All had a normal MRI brain.

15/16 received medication. valproate was the first choice in 11 cases, steroids in 2 and valproate in combination with steroids in 2. 8 were treated with penicillin for >11 months.

Conclusion The incidence of Sydenhams chorea appears to be rising. It is a clinical diagnosis and important to recognise. In our cohort we used a combination of steroids and valproate which gave a good response. There was a trend towards long-term penicillin.

Acknowledgements Collaborators: David Webb (Crumlin), Tony Bouldin (Crumlin), Deidre Peake (Belfast), Sanjay Tirupathi (Belfast), Niamh Mc Sweeney (Cork).

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WHAT ADULTS KNOW ABOUT CHILD DEVELOPMENT IN ALBERTA, CANADA: IMPLICATIONS FOR HEALTH SERVICES

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10.1136/archdischild-2014-307384.549

Background Adult knowledge of child development shapes their expectations and feedback to children as they learn and grow. Effective guidance of children by adults is influenced by their knowledge of child development.

Study questions/aims (1) What is adult Albertans' knowledge of developmental milestones from birth to 6-years in four developmental domains: physical, cognitive/language, social, and emotional? (2) What parenting supports do adults use regarding child development?

Methods 1,451 randomly selected adults in Alberta, both parents and non-parents, completed a telephone survey exploring knowledge about child development and parenting supports. Data was analysed using univariate and multivariate techniques (p < 0.05).

Results 35% of adults identified when at least half of physical developmental milestones typically occur; 23%, 16%, and 11% could do so for cognitive/language, emotional, and social development milestones respectively. Errors in reporting when milestones typically occur were primarily related to respondents thinking a milestone was achieved earlier. Knowledge has not changed since a similar survey in 2007. Gaps in child development knowledge did not differ substantively between parents/non-parents, females/males or urban/rural residence. Respondents identified key parenting supports to be family members

(76%), family doctors or paediatricians (61%), and teachers (54%). Common resources included books (68%), television/media (43%), and the internet (36%).

Conclusions There were meaningful gaps in adult knowledge of when children achieve developmental milestones. Evidence to date suggests that better child outcomes begin with accurate parent knowledge of child development. There is opportunity to help parents and care providers become more aware of these milestones through knowledge dissemination strategies.

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DEVELOPMENTAL COORDINATION DISORDER IN CHILDREN WITH A HISTORY OF INFANTILE COLIC

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10.1136/archdischild-2014-307384.550

Background Infantile colic or excessive crying during the first months of life is common and causes concern among parents. Little is known about the health and development of children with a history of infantile colic. We evaluated whether these children have motor development impairments by the age of seven. Method Data on crying symptoms in infancy and parental Developmental Coordination Disorder Questionnaire '07 (DCDQ'07) were avaliable for 27,940 singletons from the Danish National Birth Cohort. We fitted a linear regression comparing DCDQ'07 total scores of children with and without a history of infantile colic. We moreover compared the risk (odds) for probable Developmental Coordination Disorder (DCD), defined as a DCDQ'07 total score < 46, for children with and without a history of infantile colic in a logistic regression model. All analyses were adjusted for a number of covariates.

Results Children with a history of infantile colic had slightly lower total DCDQ'07 scores (-0.5 [95% confidence interval: -0.9; -0.03]. The difference was larger among boys (-0.7 [-1.4; -0.1]) than among girls (-0.2 [-0.7; 0.3]). Children with a history of infantile colic had slightly higher risk for probable DCD (Odds ratio: 1.2 [1.0; 1.6]. This was more obvious among boys (1.3 [1.0; 1.7]) than among girls (1.0 [0.6; 1.7]). For both associations, the gender-specific estimates did not differ statistically.

Conclusion Boys with a history of infantile colic had a tendency to lower motor development scores. However, the associations were weak, and the clinical importance of these findings may be limitted.

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INFANTILE COLIC, HYPERKINETIC DISORDER, AND EMOTIONAL AND BEHAVIOURAL PROBLEMS IN CHILDHOOD - THE DANISH NATIONAL BIRTHCOHORT

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10.1136/archdischild-2014-307384.551

Background Infantile colic is considered a transient problem, but children with infantile colic may have persistent behavioural problems. We studied the association between history of infantile colic, and attention deficit, hyperactivity, emotional and behavioural problems.