Over half (53%) of children presented with suicidal thoughts or behaviours, and 23% presented with an episode of enacted self-harm. Methods were evenly split between cutting, deliberate ingestion and use of a ligature in attempted strangulation or hanging at approximately 33% each. 8/10 required referral to CAMHS for ongoing follow up.

Conclusions Children aged 0–12 years are presenting in increasing numbers to Paediatric Services with acute mental health difficulties, including self harm and suicidal behaviours. More research is needed into the precipitating factors behind acute psychiatric presentations in children versus adolescents.

**REFERENCES**

1. Cerebral palsy in under 25s: assessment and management. NICE guideline (NG62) Published date: January 2017.

**Abstracts**

**P410 HOW NICE ARE WE? A QUALITY IMPROVEMENT PROJECT TO IMPROVE COMPLIANCE TO MENTAL HEALTH SCREENING DURING CLINICAL CONSULTATION OF CHILDREN WITH CEREBRAL PALSY ACCORDING TO THE NICE GUIDELINES**

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**Introduction** NICE has published its first dedicated guideline on managing cerebral palsy (CP) in under 25s. The guideline highlights that children and young people with cerebral palsy have an increased prevalence of mental health issues. Emotional and behavioral difficulties are reported in up to 1 in 4 children and young people with cerebral palsy. These may be triggered by pain, discomfort or sleep disturbances and it is therefore important, as clinicians, to explore these issues during consultations.

**Plan: Aims, objectives and methodology** The aim of this project was to evaluate what percentages of children with Cerebral Palsy are asked about mental health issues during a clinical visit and to increase this percentage. The ‘Plan-Do-Study-Act’ improvement cycle was used.

A retrospective review of charts was undertaken to evaluate if there was documentation of each child’s mental health status at their annual review between January 2018 and August 2018 and results were recorded as ‘Yes’ or ‘No’. All patients under the age of 19 years were included. These results were compared to the NICE guidelines. Each child’s GMFCS was also recorded.

**Do: Results** Of the 18 patients that were audited, 44% (N=8) were assessed with regards to their mental health status. 60% (N=3) of those with a GMFSC 1 were asked while only 25% (N=1) of those within GMFCS 5 were asked. 50% of those within GMFSC 2 and 3 were asked.

**Study** This study showed that less than half of patients were asked, suggesting there is scope for increased awareness regarding mental health in children with CP. Currently there is a lack of evidence about the prevalence of such comorbidities in this population. Unless it is discussed, it may be under reported and therefore it is vital we ask about it during clinical review.

**Do A ‘Cerebral Palsy Pro forma’ will be introduced that will prompt doctors to discuss mental health during consultations. The results of this initial study were presented at a formal teaching meeting to discuss this project and the use of the new pro forma. The cycle will be repeated every 2 months.**
Conclusions Children with SN, present a patient history with a higher incidence of gestational-perinatal problems, genetic disorders and congenital heart diseases, thus presenting LD, PD, a variety of behavioral and developmental disorders, with notable example the impaired hand dominance, mainly ambidexterity.

P412
THE AGONY OF THE CHILD WITH COMPLEXITY: EXPLORING THE PSYCHOLOGICAL IMPACT ON PARENTS CARING FOR CHILDREN WITH COMPLEX HEALTHCARE NEEDS

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Aims Medical advances and improved neonatal care have led to increased survival of children with complex healthcare needs. The aim of this literature review was to explore what is known about the psychological impact on parents of caring for children with complex healthcare needs across North America and Europe, and more specifically within Ireland.

Methods A comprehensive search of the literature published within the last ten years was performed using PubMed and PsycINFO databases. Ten papers, consisting of qualitative studies and meta-analyses, which varied in sample size and methodology, were selected for detailed review.

Results Recent publications emphasise that caring for a child with complex care needs has a significant negative impact on the psychological wellbeing of parents. Several qualitative studies have shown that caregivers of children with life-limiting illness are up to twice as likely to report higher levels of parenting stress and depressive symptoms than parents of healthy children. The literature suggests that women experience greater parenting stress in caring for severely ill children than men, with one study noting an increase in maternal sick leave for psychological distress. However, women were more likely to report being the predominant caregiver, which could account for this discrepancy. Social isolation was a recurring factor contributing to the perceived burden of stress experienced by caregivers. Similar themes were evident across North America and Europe publications. We noted a paucity of research in the Irish context.

Conclusion Further research is needed to evaluate the psychological impact of caring for a child with complex healthcare needs and to guide management and prevention of parental stress and psychological illness, particularly in Ireland. Additional studies are needed to determine if increased social support reduces psychological stress and to investigate the effects of parental stress on disease progression in children with complex healthcare needs.

P413
THE USE OF CEREBROLYSIN IN PERVERSIVE DEVELOPMENTAL DISORDERS

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Introduction Pervasive developmental disorders (PDD) which has been increasingly called in the USA ‘Autism spectrum disorder’ include five chronic disorders marked by early impairment in socialization, communication, and repetitive behavior. There is no known curative therapy for PDD which include autism, Asperger syndrome, and atypical autism.

Objectives Marked improvement or disappearance of autistic features in these disorders have not been reported with any therapy before. The aim of this paper is report a retrospective observational study describing the use of a new therapeutic approach for the treatment of (PDD).

Methods During the year 2018, Six with PDD particularly autism and Asperger syndrome observed at the pediatric psychiatry clinic at the Teaching Hospital of Baghdad Medical City were treated with a new therapeutic approach which includes injectable cerebrolysin as the main therapeutic component. The patients ages ranged from 3 to 8 years.

The new approach aimed at improving the cardinal feature of PDD which is the impairment of social interaction which is mostly manifested by poor responsiveness to their name and infrequent engagement with others manifested by poor eye contact and infrequently looking to faces.

Most patient also required neuroleptics to control hyperactivity and other abnormal behaviors. Trifluoperazine andprochlorperazine were used as necessary.

Some patients also received citicoline as an adjunctive therapy to improve speech development.

It is expected that improving social interaction will contribute to improving other features especially verbal communication and speech.

Courses of intramuscular cerebrolysin were given in individualized regimen depending on the age and severity of the illness and with aim of improving social interactions including response to name, looking at faces, and eye contact.

Results All the patients with autism and Asperger syndrome treated with this new approach showed improvement and marked lessening of the autistic features with some patients showed complete disappearance of the main autistic features. No patient developed any side effects.

Patients observed during the same year who didn’t receive this treatment or were treated with other treatments such as omega-3 and risperdone didn’t show any lessening effect in the autistic features. However, one patient treated with citicoline injection showed improvement in the autistic features.

Conclusions Further studies are vital to study this new therapeutic approach.

P424
A RARE CASE OF HYPERMETHIONINAEMIC ENCEPHALOPATHY IN AN INFANT WITH CLASSICAL HOMOCYSTINURIA

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Introduction Classical Homocystinuria is an autosomal recessive disorder caused by profound cystathionine β-synthase (CBS) deficiency. CBS deficiency is a disorder of metabolism of methionine leading to accumulation of homocysteine in both blood and urine. Clinical manifestations include lens dislocation, developmental delay, skeletal anomalies and thromboembolism. Treatment is lifelong and may include pyridoxine and specialised diet; medications such as betaine may also be considered as an adjunctive treatment. Betaine functions by...