cases per 100,000 children aged under 1 year. Sixty-one chil-
dren met the study case definition (51% girls; 41% born <37
weeks gestation; 56% white, 26% Asian, 18% other/unknown
ethnicity). Neurodevelopmental abnormalities were reported
for 46 (75%) children, including seizures, vision, hearing, and
motor abnormalities. The most common identified causes of
microcephaly were genetic conditions (n=5) and congenital
infections (CMV, toxoplasmosis, and herpes; n=8), however
the cause was unknown for 69% infants. No cases of Congen-
tal Zika Syndrome were identified.

Conclusions The number of children with confirmed severe
microcephaly was fewer than estimates based on European
genetic anomaly registers. Infants of Asian ethnicity and
those born preterm were over-represented. Most children were
still under investigation for the cause of the microcephaly.
Over three-quarters of children already demonstrated neu-
rodevelopmental abnormalities; further follow-up will capture later neu-
rodevelopmental outcomes.

G37 PARENTAL NEEDS FOR PSYCHOLOGICAL SUPPORT
FOLLOWING A DIAGNOSIS OF PERINATAL STROKE

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Background Parents of infants with conditions such as perina-
tal stroke (PS) often experience feelings of guilt and blame
and are at risk of experiencing negative outcomes in terms of
psychological wellbeing. This has the potential to adversely
affect parent-infant interaction, impacting on the infant. Pro-
viding psychological support from an early stage is critically
important.

Aims To identify key areas of parental expressed need for sup-
port (both met and unmet) following a diagnosis of PS.

Methods Data for the current study was obtained from pri-
mary research considering the feasibility of an early parent-
delivered therapy intervention (Basu et al. 2018). Eligible
participants were recruited from 8 hospitals acting as identifi-
cation centres. Parents/carers of potential infant participants
were identified by clinical staff and their details forwarded
to the research team. Secondary analysis of 11 in-depth inter-
views, exploring parental experiences of delivering the ther-
apy intervention, was carried out using thematic analysis,
modelled on the inductive approach by Braun & Clark

Results Four overarching themes were identified: ‘Lack of
information’ (due to uncertainty about the future and lack of
understanding of clinical terms) was a stressor. ‘Need for
reassurance’ related to wanting information, support, and a
sense of purpose. ‘Emotional processing’ reflects changes in
the nature and extent of difficulties experienced in process-
ing the initial stage, coming to terms with the diagnosis and
long term adjustment. ‘Emotional sensitivity’ relates to addi-
tional factors related to caring for the infant including
social stigma, worrying about developmental discrepancies
and the marital relationship, which can act as triggers fur-
ther distress.

Conclusion The diagnosis of PS led to psychological distress
in parents which could be characterised in specific themes. Uncertainty following diagnosis was responsible for significant emotional difficulties. Psychological adjustment to diagnosis

was affected by cognitive strategies – but this is a long term
and emotionally sensitive process. Findings are discussed in
relation to the literature. Recommendations for practice
include timely provision of information and resources, restor-
ing self-efficacy, promoting coping strategies to facilitate
adjustment, and the compassionate support of healthcare pro-
fessionals at a time of high vulnerability.

G38(K) KNOWLEDGE, ATTITUDES AND PRACTICE TOWARDS
EPILEPSY AMONG PRIMARY SCHOOLS’ TEACHERS IN
KHARTOUM LOCALITY, SUDAN 2016

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Methods and Materials This is a cross sectional study that was
conducted using structured questionnaire; self administered
to 202 teachers selected through multistage-clustered sampling
technique, in Khartoum locality, Khartoum state, Sudan.

Knowledge scoring was done by adding (causes variables+
treatment options risk of transmission + symptoms and signs)
\( =15 \) [less than 5out of 15 >>poor knowledge. 5–10 out of
15 >>average knowledge. more than 10 out of 15 >>good
knowledge]. Attitude score answering correctly to 5 different
items and scoring was done [less than 2 out of 5 negative
attitudes. 2–3 out of 5 neutral attitudes, more than 3 out of
5 positive attitudes]. Practice scoring was done using 7 items
[>3 out of 7 =poor practice, 3–4 out of 7 average practice
<4 out of 7 good practice).

Result A total of 202 teachers participate in this study. All
respondent have heard about epilepsy, (83.2%) from their
nearby community. About (27.7%) considered evil spirit as
a cause for epilepsy and (20.3%) answered traditional remedy
by herbs and sheikhs as best treatment option. (85.6%) con-
sidered epilepsy as non-contagious disease and (67.8%) consid-
ered epilepsy presentation as convulsion only. About (73.7%)
of the participant have an average knowledge regarding initial
procedure for seizures management and report removing sharp
and maintain patient safety as a major practice.

Total of (71.8%) of teachers have an average knowledge
about epilepsy, (59.5%) have average practice toward epileptic
and a percentage of (66.3%) have a positive attitude toward
epilepsy.

Conclusion and Recommendation Teachers had a relatively
average knowledge about epilepsy, positive attitudes toward
students with epilepsy and their practice toward student dur-
ing seizure was generally average. Education campaigns of
the general public on epilepsy should be encouraged. The need
for a well-structured educational and evidence-based interven-
tion for teachers about epilepsy is essential.

G39(P) FEATURES OF PHYSICAL DEVELOPMENT OF CHILDREN
WITH CEREBRAL PALSY

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Abstracts