

**Objective** Vestibular assessment:- Electronystagmography showed central vestibular abnormalities in 18 (14.5%), 66 had normal vestibular function and 41 had vestibular hypofunction. Seventeen had bilateral vestibular failure.

**Implications and relevance of results** In children, numerous aetiologies of dizziness and balance problems may have a similar clinical picture. The symptoms of non-vestibular disorders can masquerade those of vestibular disorders and vice-versa. Close multispecialty working is vital for positive clinical outcome.

**PS-349 TELL ME HOW YOU SLEEP: SLEEP HABITS AND DISTURBANCES IN PORTUGUESE PRE-SCHOLAR AND SCHOLAR CHILDREN**

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**Background and aims** Given the risk of significant medical and behavioural morbidity, it is crucial to evaluate sleep disorders in clinical practice. We aimed to evaluate sleep habits and disturbances in pre-scholar and scholar children from a Northern region of Portugal and compare the results with other studies.

**Methods** Children's Sleep Habits Questionnaire Portuguese version (CSHQ-PT) was applied to parents of healthy children (4–10 years old) attending daycare centres and elementary schools in our city.

**Results** 107 pre-scholar and 122 scholar children were included (n = 229), mean age 6.3 years. 54,1% were boys. Prevalence of co-sleeping was 37,3%. Mean bedtime was 9:41 pm and mean wake-up time was 7:20 am. Mean sleep duration was 9.7 h, being longer in pre-scholars (p < 0.001). 75,7% of children suffered from global sleep disturbances and the mean CSHQ-PT total score was 47,05, being higher in pre-scholars (p = 0,001). Pre-scholars also scored higher on bedtime resistance (p < 0,001), sleep onset delay (p = 0,046) and night waking (p < 0,001). Bedtime resistance and sleep anxiety scores were higher in only children (p = 0.003). The prevalence of enuresis was 7,7%, restless sleep 52,7% and bruxism 22,2%. Pre-scholars scored higher in night terrors (p = 0,04). It was hard to get the children out of bed in 56.7% and the children seemed tired during the day in 22.9%.

**Conclusion** Included children tend to fall asleep later and sleep less than in other studies. A high prevalence of sleep disturbances was found, specially in pre-scholar children, which claims a different approach of this subject in our clinical practice.

**PS-350 WITHDRAWN**

**PS-351 A GROWING PAINS (GP) QUESTIONNAIRE : VALIDATION AND RELIABILITY CONTROL**

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**Background** Growing pains (GP) is a common cause for visiting the paediatrician. Their prevalence remains obscure and a screening questionnaire is not available.

**Aim** To develop a questionnaire, appropriate for the estimation of GP prevalence in the general children's population aged 4–7 years old.

**Material and methods** After review of the literature, a 27-closed type questions with two-answer options (yes-no) questionnaire was developed, including the parameters of localization, duration, intensity and heredity of growing pains. Content validity and test-retest have been examined in a pilot study preceding the present study. The validity of the questionnaire was further studied in a parental population of children aged 4–7 years old, sourced from a randomly selected elementary school in Athens. The reliability was examined by repeated parents response over 3 weeks.

**Results** 83 questionnaires were filled out. The final version of the questionnaire comprised 21 questions. The mean test-retest reliability was 75.4%, ranging from 0.33–100% (p < 0.001, Cronbach alpha coefficient was equal to 0.68 for total scale, ranging from 0.62–0.82 for the subscales). Construct validity evaluation defined 9 fields incorporating the 21 questions. After excluding low reliability questions, nine items remained in the scale. A cut-off point of ≥8 was finally proposed for the detection and diagnosis of growing pains.

**Conclusions** We report the development of a reliable and valid questionnaire for GP based on the existing publications. This questionnaire focused on the domains of pain localization, intensity of growing pains and their 24 h temporal distribution.

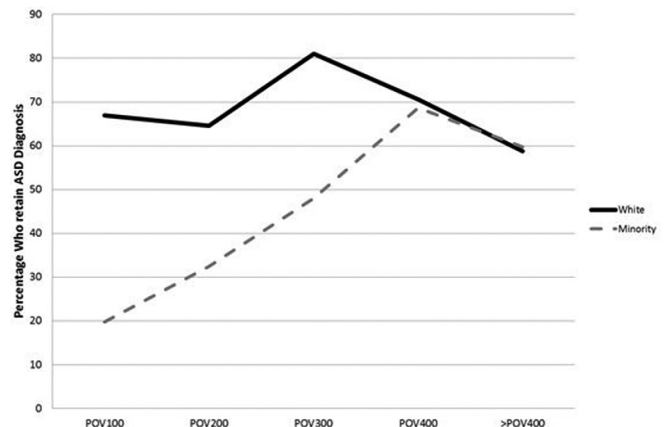
**PS-352 CHARACTERISTICS OF U. S. CHILDREN WHOSE PARENTS REPORT THEY NO LONGER HAVE AUTISM SPECTRUM DISORDER (ASD)**

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**Background/aims** Our objective was to determine the characteristics of children who do not retain an autism diagnosis.

**Methods** The National Survey of Children's Health 2007, a nationally representative survey, asked parents whether a doctor or other health professional had ever told them their child had ASD. Thirty eight percent of those who responded affirmatively also reported that the child did not have ASD currently. We inspect the differences between the ASD-now and no-longer-



**Abstract PS-352 Figure 1** Percentage of children who retain ASD diagnosis by income level and race