Image:

"Maladjustment" in the first, fifth, and eighth grades and needed supports in preschool

Grade	Needed supports in preschool		Maladjustment in the first grade	Maladjustment in the fifth grade	Maladjustment in the eighth grade
	Yes	No			
1st to 8th	5	0	◯	◯	◯
1st to 5th	6	0	◯	◯	
Only 1st	8	9	◯		
Only 5th	0	6		◯	
Only 8th	0	5			◯
5th to 8th	1	3		◯	◯
Other	0	1	◯		◯
No maladjustment	10	52			
Total	30	76	29	21	15

Conclusions: Since maladjusted children with developmental disabilities are identified in early childhood, support can be provided before they reach school age. Many children with developmental disabilities improve their adjustment as they grow up. It is thus advisable to take a long-term perspective in dealing with problematic behaviors.

From late school age to adolescence, problems unrelated to developmental disabilities emerge. By listening to the child's upbringing, it may be possible to ascertain whether or not the problem stems from a developmental disability.

Disclosure of Interest: None Declared

EPP0339

Substance Use among youths in Uganda during the COVID-19 pandemic: Associated factors and prevalence:

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Introduction: Although studies have demonstrated that younger people are at high-risk of instigating alcohol, substance use and development of related disorders, the trend is gradually changing. An observed gradual initiation and substance use among older persons, especially during the COVID-19 pandemic. However, there is dearth of data on about the prevalence and determinant of substance use during COVID-19 pandemic in Uganda.

Objectives: Determine the prevelence and determinants of susbstance use during COVID-19 pandemic in Uganda

Methods: A cross-sectional design and probability based sampling was applied. Data was collected among 474 older persons aged 50 years and above, that resided in the central region of Uganda. A multivariate logistic regression was used to assess the socio-economic, demographic and health related correlates of alcohol and tobacco use.

Results: 9.2% and 5.4% of older persons were taking alcohol and smoking before the COVID-19 pandemic. However, an observed increase of 14% of smoking and alcohol intake among older persons during the pandemic. Being male had higher odds of substance use than their female counterparts. Older persons with tertiary education and low (poor) wealth quantile, had lower odds of substance use than their counterparts.

Conclusions: Our finding highlights increased substance use among older persons during the COVID-19 pandemic. Designing targeted measures and policies to deter the substances use among older persons is critical to address this vice, especially during the pandemic and possible future disease outbreaks.

Disclosure of Interest: None Declared

Neuroscience in Psychiatry 01

EPP0340

NAA and BOLD dynamics after single short stimulus in motor cortex of schizophrenia patients

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Introduction: Endogenous psychoses, e.g. schizophrenia, are a pressing problem of modern medicine and biology. Among various neurobiological models of schizophrenia, much attention is paid to disturbances in the brain neural activity and metabolism.

Objectives: The aim of this study was to analyze dynamics of motor cortex metabolites in the norm and in early stage of schizophrenia in period of BOLD response to event related single stimulus using MRI methods (fMRI and NMR).

Methods: Study was performed on clinical Phillips Achieva 3.0 T MRI scanner. Volume of interest in motor cortex was localized on the base of fMRI study (EPI FFE, TR = 3000 ms, TE = 30 ms) as the zone of activation (Fig 1) caused by bottom push with the forefinger in response to single auditory stimuli transmitted with the 18 s periodicity. The BOLD signal was measured each 3 sec. 1H MR spectra (PRESS, TE = 30 ms TR = 3000 ms) were run; FID signals for time points t = 0, 3, 6, 9, 12, 15, 18 s after stimulus were summarized (Fig 2). Thus, the synchronization of BOLD and metabolic responses to single stimulus was achieved. The same method was applied for spectra accumulation in resting state. For FID processing custom made software was used (with apodization filtering (LB = 20, GB = -5), FT and manual phase correction). NAA, Cho, Cr signal intensities for each time point were normalized to their values at t = 0 and to the volume of activated cells