(for both boys and girls 8.1 years, SD 0.15). When compared with the general population, children with DS had more emotional and behavioral problems ($p < 0.001$), except for the anxious/depressed scale on which they scored more favorable ($p < 0.001$). Significantly lower HRQoL scores for the TACQOL scales gross motor skills, autonomy, social functioning and cognitive functioning were found (p -values < 0.001). Hardly any differences were found with regard to the scales physical complaints, positive and negative emotions.

Conclusions: Eight-year-old children with DS have an average developmental delay of four years, more emotional and behavioral problems, and a less favorable HRQoL compared to children from the general population.

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HIGH FREQUENCY OF LOW SEVERITY DISABILITIES IN VERY PREMATURE INFANTS AT AGE FIVE

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Background: Children born preterm run an increased risk of problems on multiple domains. The co-existence of these problems needs more attention.

Aim: To find out how many preterm born children have disabilities in comparison with term controls.

Methods: Children (N = 127) born at < 30 weeks GA or BW < 1000 g, born in our hospital, reaching the corrected age of 5 in a 18 month period were eligible. Healthy term born children, mostly recruited via the school of each preterm child, served as controls. Motor development was assessed using the M-ABC II, neurological functioning using the Touwen neurological examination, cognitive functioning (total, verbal and performat IQ, and processing speed quotient) using the WPPSI-III-NL, and behaviour using the SDQ. (parents and teachers). Scores > -1 SD below mean were defined as disability.

Results: 104 preterm born children (mean GA 28.8 weeks (SD 1.6), mean BW 1043 grams (SD 250)) and 91 term controls (mean GA 39.8 weeks (SD 1.8), mean BW 3224 (SD 528) participated. In the preterm group, 50% had one or more abnormal IQ score and 44% had minor neurological dysfunction, while 5% had CP. In the term controls this was 22%, 7% and 0% respectively. In the preterm group, 75% had ≥ 1 disability and 52% ≥ 2 disability and this was 27 resp. 10% in the term controls.

Conclusions: Of very premature children, able to undergo an age appropriate IQ test, only 25 % compared to 73% of term controls is without disability on all domains.

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PARENTAL EDUCATION DOES NOT INFLUENCE OUTCOME OF VERY PRETERM CHILDREN ON ALL DEVELOPMENTAL DOMAINS

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Background: Children born preterm run an increased risk of problems on multiple domains. It is not clear how SES influences these different outcomes.

Aims: To study the relation between parental education and multiple domain outcomes at age five in very preterm born children in comparison with term controls.

Methods: 104 children born < 30 weeks infants GA and/or < 1000 gr at birth and 95 term controls were assessed at the (corrected) age of five years. Motor, neurological cognitive (total, verbal and performat IQ, and processing speed quotient) and behavioural functioning were assessed using the M-ABC II, the Touwen examination, the WPPSI-III-NL, and the SDQ. (parents and teachers). The differences between preterm and term children were studied in three strata of parental education level (high, medium, low).

Results: The mean difference in IQ score between 104 preterm and 95 term children was 10 points.