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CHICKEN? NO WAY...

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Background and aims: Food phobia is a rare condition that can significantly affect the well-being of adolescents. Usually the diagnosis is suspected after a good anamnesis and the behavioral intervention is the most effective approach.

Methods: Case report.

Results: Female 14-years old adolescent. previously healthy. She was sent to the consultation because of food refusal and a weight loss of 14kg in the past 9 months. This situation started after a choking while eating chicken meat that caused a phobia for solid foods. Since then, she started to feed herself only with small quantities of liquid soup, liquid yoghurts and milk, which caused the weight loss and a secondary amenorrhea in the last 3 months, without body distortion. Her body mass index was 18kg/m² and the physical exam was normal. The blood analysis showed a mild anemia (hemoglobin 12g/dl) with a normal biochemistry. including thyroid function and lipid profile. With this picture, we started a behavioral training, reinforcing the importance of healthy eating habits, introducing gradually the solid foods, with progressive tolerance. She recovered the lost weight in 8 months and, since then, she had normal eating patterns, except for the difficulty in eating chicken meat, which persisted for almost 18 months.

Conclusions: With this case, the authors want to highlight the importance of a good anamnesis, which is crucial for this diagnosis. It is important to have a good follow-up of this adolescent, because the relapses are frequent and it is important to detect it as soon as possible.

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FAMILIAL FACTORS OF CONDUCT DISORDER IN IRANIAN ADOLESCENTS: A PILOT STUDY

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Introduction: Conduct disorder is a repetitive and persistent pattern of behavior in which the basic rights of other or major age-appropriate societal norms or rules are violated.

Children and adolescents with conduct disorder may be show several different antisocial behaviors. Any single etiological factors could not describe antisocial behavior or conduct disorder in child and adolescent.

Family is the most important factor in development and continuance of conduct disorder.

Objective: Determination of familial characteristics in 12-18- year-old adolescents with conduct disorder diagnosis who referred to two child and adolescent centers.

Method: This is a case-control study. 20 adolescents in ages 12-18-year-old choice from all persons who referent to two child & adolescent centers. They have diagnosis of conduct disorder (according to DSM-IV) by psychiatrist. After description of this study purpose & consent of them and their parents, inventories completed. Control group included of 20 adolescents in ages 12-18-year-old who had not any psychiatric disorder and their parents.

Instruments: familial studies inventory for adolescents and for parents (separately) [researcher-induced]- and SADS for parents.

Results: In this study, there was meaningful statistical relationship between adolescents conduct disorder and psychiatric disorder (psycho pathology) in their father (p=0.0009), & mother (p= 0.011), family income (p< 0.0001), remarriage of father (p=0.013), educational level of father (p=0.0003), & moter (p=0.004) and history of previous divorce in father (p=0.02) and family size (p=0.04).

Conclusion: some of familial characteristics are effective in development of adolescents conduct disorder.