

Conflict of interest: No

Keywords: exercise addiction; narcissism; self-esteem

EPV0083

The role of different game-genres in predicting internet gaming disorder (IGD)

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Introduction: Internet gaming disorder (IGD) is a new diagnosis in DSM 5 worth of research. New potentially addictive features are emerging in pay- and free-to-play videogames, involving different at-risk populations of gamers. However, few studies have examined whether and how different game-genres can contribute to the risk of IGD.

Objectives: This study aimed to investigate how game-genres can predict IGD, accounting for alexithymia scores, time-related playing habits, and other predictors.

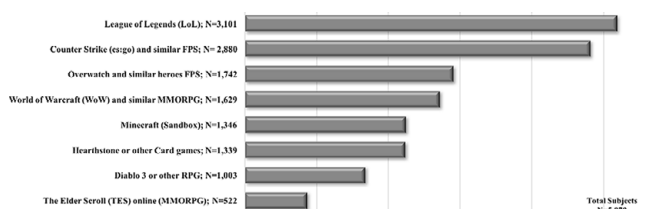
Methods: Participants were gamers joining online communities, surveyed about which games they played more than 20 hours in their lifetime, time-variables, other stressors and alexithymia scores. A six-steps linear regression with IGD scores and a post hoc logistic regression (outcome: IGD>=21) were performed.

Results: 5,979 subjects (88.7% males, 14-18 years), playing at different games (Figure-1). The game-genre explained the 1% of variation only. WoW and similar MMORPGs confirmed their potentiality in promoting IGD, regardless of alexithymia features (B=0.50, p=0.005). However, time-variables completely absorbed the WoW effect (B=0.01, p=0.951). LoL resulted addictive, even if considering time-variables and alexithymia (B=0.88, p<0.001). Minecraft emerged when time-variables were inserted (B=0.359, p=0.041) and stayed significant if removing alexithymia scores (B=0.48, p=0.010). Playing at Diablo3 and similar RPG did not increase IGD (B=-0.99, p>0.001). None of the different game-genres was able to push the subject over the threshold of IGD, because other characteristics interacted as additive risk-factors.

Conclusions: Alexithymia traits and time-related playing habits mostly moderated the effect of different games in increasing IGD risk. A videogame could engage people with specific characteristics that may, in turn, differentially predispose to IGD.

Conflict of interest: No

Keywords: MMORPG; MINECRAFT; playing time; Alexithymia



EPV0084

Differences between female and male gamers and gender-specific risk-factors for internet gaming disorder (IGD)

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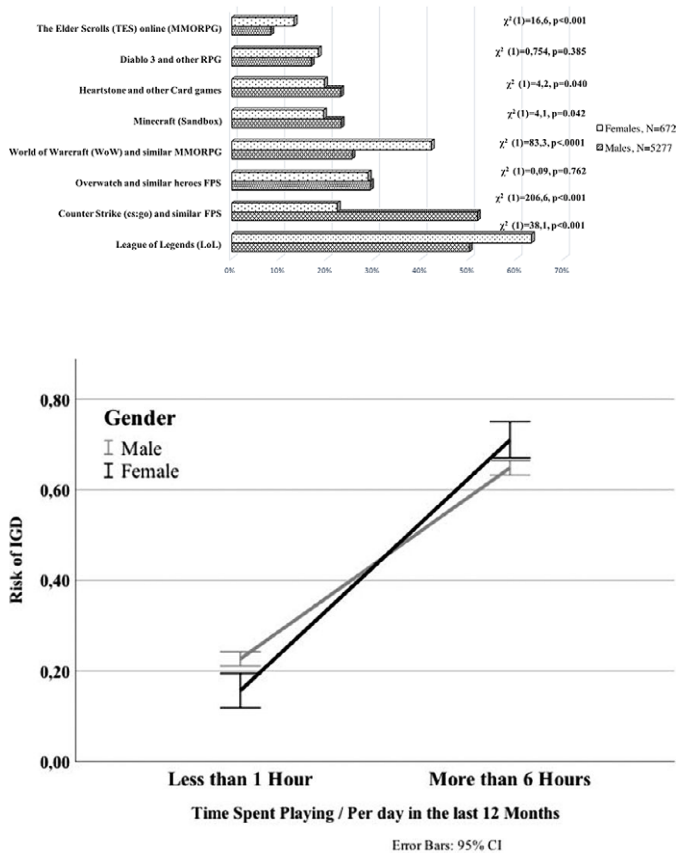
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Introduction: Videogames have become more popular across females, although their widespread diffusion among males. However, few studies have examined differences between female and male gamers and gender-specific risk factors for Internet Gaming Disorder (IGD).

Objectives: The study aimed to describe males and females' differences in a sample of gamers, and to identify gender-specific risk-factors for IGD, accounting for alexithymia, playing habits, and other perceived stressors.

Methods: Participants were gamers joining online communities, tested by IGDS-SF9 and TAS-20 for alexithymia. To explore





risk-factors for IGD (outcome: IGD \geq 21), we set a binary logistic regression stratified by gender.

Results: 5,305 males and 674 females differed in most of the descriptive characteristics (Figure-1) and game-genres preferences (Figure-2). Higher DIF scores increased the risk of IGD in both males (OR=1.8 95% C.I. 1.6, 2) and females (OR=1.3 95% C.I. 1.1, 1.7) while higher EOT in males only (OR=1.2 95% C.I. 1.1, 1.3). Having another hobby apart from gaming was protective for males (OR=0.5, 95% C.I. 0.4, 0.6). Having started playing before their ten-years was a risk factor for females (OR=2.3 95% C.I. 1.2, 4.6). Loneliness and boredom feelings predicted IGD in males (OR=1.7 95% C.I. 1.5, 2) and, even more, in females (OR=2.7 95% C.I. 1.8, 4.2). Playing more than six hours/per day increased IGD-risk up to seven times in males (OR=7.3 95% C.I. 5.1, 10.3) and of almost sixteen times in females (OR=15.9 95% C.I. 5.4, 46.7) (Figure-3).

Conclusions: Female gamers presented specific characteristics and a greater vulnerability to the increased time spent playing as a risk-factor for IGD.

Conflict of interest: No

Keywords: gender psychiatry; DSM 5; videogames; time spent playing

EPV0085

Service evaluation of child safeguarding referral process from the drug and alcohol service in SWLSTG mental health trust

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Introduction: A child is considered abused if he or she is treated in a way that is unacceptable in a given culture at a given time. Safeguarding refers to the process of protecting children to provide safe and effective care. This includes all procedures designed to prevent harm to a child. Strengthening the approach to prevention we aimed to look at our referral process to promote safeguarding practices within professionals.

Objectives: To assess the current referrals process of child safeguarding in Engage Merton (Drugs and Alcohol Service)

Methods: Patients who were referred for new assessment during the period of September-November 2017 were identified using electronic record system. A questionnaire identified the following information: age, gender, whether the patient has children, referral to social services, was the referral followed up, reason for not referring to social services if patient had children.

Results: 43 patients were identified in this period (Mean age 42.3). Of these, 17 were identified as having children. 16 were identified as not having children. This information was not recorded for 10 cases. Of the 17 patients with children, 2 were referred for child safeguarding. Of the cases where patients had children that were not referred for safeguarding, 8 were already known to social services.

Conclusions: Professionals carrying out initial assessment in Drugs and Alcohol service need to ensure that presence or absence of children is properly documented for each service user. A safe guarding referral has been considered for each service user with children but none of the referrals were followed up.

Conflict of interest: No

Keywords: Child safeguarding; Drugs and Alcohol Service; Social Service; Parental responsibility

Anxiety disorders and somatoform disorders

EPV0092

Treatment of social anxiety disorder in a public context. About a case.

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Introduction: Social Anxiety Disorder (SAD) has considerable impact on health, especially in adolescence or young adulthood.

Objectives: To illustrate the treatment of SAD with cognitive-behavioral techniques in a public context.

Methods: Descriptive case study.

Results: A 20-year-old female referred to Mental Health in relation to anxiety with history of generalized anxiety. No relevant somatic history. She was in treatment by Clinical Psychology and Psychiatry with 12 years with diagnosis of Anxiety reactive to bullying. She refers history of night terrors and nightmares. Exploration: Coherent speech, no formal alterations, in low tone. High anxiety, facial flushing, tremor and avoidant behavior. Low mood and tendency to isolation. Frequent nightmares, insomnia, hypnagogic and hypnopompic phenomena. Denies toxic consumption. Death thoughts in context of high anxiety, there have never been attempts or structured suicidal plans. Fifty-minute sessions every 2 weeks. A total of 10 sessions in 5 months were conducted. Therapeutic objectives: reduction of anxiety symptoms, establishment of at least 2 significant interpersonal relationships and maintenance or improvement of academic performance. Relaxation techniques were trained,