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E-PP1002

Attention deficits in adolescents after traumatic brain injury of mild severity

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Background and aims.– The effect of the traumatic brain injury of mild severity (mTBI) on the attention deficits affects the educational activities of adolescents in school.

To study of attention deficits in adolescents after mTBI in acute period (3–5 days after trauma).

Methods.– The study is based on the original set of techniques designed by A.R. Luria. We used the technique of «Schulte table» for the evaluation of 3 parameters: “average execution time”, “average number of digits found in 10 seconds” and “execution profile”.; 31 patients with mTBI (mean age was 11,5 + 1,3) and 20 healthy subjects (mean age was 12 + 1,5) took part in the study.

Results.– Analysis of the results showed that significant differences were obtained for all three parameters ($p < 0.05$).

By the parameter “average time of completion”, 71.3% of patients exceeded the standard time of completion ($p = 0.001$).

“The average number of digits found in 10 seconds” by adolescents with BTWT was 4.6, while healthy adolescents were 5.3 ($p = 0.011$). In 77.4% of subjects with TBI, the performance profile was with explicit fluctuations in attention. The representatives of the control group have mostly uniform profile ($p = 0.000$).

Conclusions.– Further study of the features of attention and its disorders after traumatic brain injury of mild severity in adolescents contributes to the creation of rehabilitation programs in order to improve the quality of life.

Disclosure of interest.– The authors have not supplied a conflict of interest statement.

E-Poster Presentation: Rehabilitation and Psychoeducation - Part II/Sleep Disorders & Stress

E-PP1003

Overcoming stroke-related disability through rehabilitation: the usefulness of neuropsychological methods

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Background and aims.– Stroke leads to massive brain damage and dramatically affects the quality of life. Efficacy of behaviorally-oriented rehabilitation is limited. Neurophysiological methods can be utilized both for the goal of objectivization of the state (quantitative EEG, qEEG) and to enhance brain functional state (neurofeedback). To illustrate the effectiveness of these techniques in rehabilitation, we represent a case report.

Methods.– Patient A., 30 years old, was admitted for rehabilitation six month after hemorrhagic stroke due to rupture of an aneurism of anterior communicating artery. Before the injury he was a successful dentist, but after was unable to cope with any employment and showed no motivation for daily activity.

Results.– Neuropsychological assessment revealed regulatory apraxia, memory impairment, executive dysfunction. QEEG showed decreased functional activity of anterior frontal areas, especially on the left side. Treatment was started with neurofeedback sessions in order to activate the frontal lobes and increase initiative. It allowed

further rehabilitation: transfer of care over daily life, including transportation on public transport and housekeeping, from relatives to patient with the use of cognitive and external compensatory strategies. At the end of the program, a plan for stepwise return to employment was developed in cooperation with the patient.

Conclusions.– This complex approach for rehabilitation resulted in dramatic change in patients behavior: he took an active position, started to manage his own life and returned to part-time work. Research is supported by the Russian Foundation for Basic Research, project No. 17-29-02169.

Disclosure of interest.– The authors have not supplied a conflict of interest statement.

E-PP1004

Intra-individual effect of community-based mental health rehabilitation services for schizophrenia: findings from a retrospective cohort study

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Background and aims.– Deliberative efforts are constantly made to provide community-based mental health rehabilitation services to people with mental health disabilities nationwide. In this study we aimed to assess the effectiveness of rehabilitation services in Israel by assessing the impact of utilization of rehabilitation services on hospitalization rates among a cohort of patients diagnosed with schizophrenia.

Methods.– Data derived from the Clalit Health Services were crossed with the Ministry of Health rehabilitation and psychiatric hospitalization case registries. Patients utilizing rehabilitation services were assessed for rates and durations of hospitalizations before and after the utilization of the rehabilitation services, and were compared to patients who did not use these services ($n = 185$). Mixed-model analyses of covariance (ANCOVA) were conducted to assess changes in rates and durations of hospitalizations at the beginning and end of the cohort period.

Results.– Patients who used rehabilitation services showed higher rates and durations of hospitalizations prior to utilization of rehabilitation services, as well as higher decreases in number and duration of hospitalizations after utilizing their rights to rehabilitation services, as compared to patients who did not receive these services.

Conclusions.– Schizophrenia patients tend to show a decreasing trend in number and duration of hospitalizations over time. Yet the utilization of rehabilitation services offers larger gains in hospitalization prevention, primarily to schizophrenia patients who experience high rates and durations of hospitalizations at the beginning of illness. These findings provide additional support for the necessity of rehabilitation services, primarily for patients with severe onset.

Disclosure of interest.– The authors have not supplied a conflict of interest statement.