

preventable for children at increased risk if their oral disease is treated promptly and effectively. Recommendations were made to improve the referral triage process through an electronic referral management system to help shorten waiting times. A locally agreed standard operating procedure detailing a protocol for listing patients at increased risk of IE was developed and disseminated to the clinical team with the aim of ensuring patients are offered their dental surgery within 12 weeks of the original referral. Further audit cycles are planned to continue evaluating these interventions' effectiveness and identify areas for further development to ensure we meet this target and provide care to this vulnerable patient group in a timely manner.

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**Oral Presentation (Onsite)**

*Topics:* ADOLESCENT MEDICINE, PUBLIC HEALTH

*Keywords:* Emergency Department, non-suicidal self-injuries, retrospective cross-sectional study

**Admissions to Emergency Departments for non-suicidal self-injuries behaviors among adolescents in Italy: an eleven year retrospective cross-sectional study**

Borraccino, Alberto<sup>1</sup>; Onorati, Roberta<sup>2</sup>; Mamo, Carlo<sup>2</sup>

<sup>1</sup>Department of Public Health and Paediatrics, University of Torino, Italy; <sup>2</sup>Regional Public Health Observatory, Epidemiology Unit, Local Health Board TO3, Piedmont Region.

**Background:** Self-injurious thoughts and behaviour (SITB) pose a threat to adolescents' health, increasing the risk of non-conservative behaviours. SITBs can be further divided into suicidal and non-suicidal self-injuries (NSSIs), which refer to "the direct and deliberate destruction of one's own body tissue in the absence of lethal intent", [3] which are additionally recognised as competitive risk factors for suicidal behaviour. NSSIs can be caused by multiple factors, among which social contagion, interpersonal stressors, as well as emotional dysregulation and adverse experiences in developmental ages appear to be the most frequent. The most common schemes are cutting, scratching, burning, or incising and scraping. In recent years, there has been a call for improved assessment and risk management skills of injurious behaviour in emergency departments (EDs). Particularly in Italy, EDs represent the primary source of healthcare, especially for young people. Unfortunately, to date, there is a lack of longitudinal epidemiological data in Italy on trends in admissions of adolescents to the ED for NSSI.

**Aim:** The aim of this study is to describe the frequency and type of access to ED among the population between the ages of 10 and 19 years in the Piedmont region of Italy by using official administrative ED data.

**Methods:** A retrospective cross-sectional study was conducted on all available medical records of patients aged between 10 and 19 years accessing EDs in the Piedmont Region. Data were obtained from the Ministerial database of health information for the period January 2011–September 2021. All EDs accesses were included, and all records flagged to be a potential NSSI case at triage were selected. Gender and age proportion of ED hospitalisation due to NSSI was calculated for 100 thousand accesses in each year of observation, and overall methods and severity at admittance were described.

**Results:** A total of 1,417,154 ED visits occurred over the study period, with an NSSI rate of 46.1 cases per 100,000 ED accesses. NSSI events shifted from 42.6 to 22.8 between 2011 and 2013, then increased consistently to 89.1 for every 100,000 admissions in 2020 to decrease to 63.6 in the first 9 months of 2021. NSSI were more frequent in girls throughout the whole period, except in 2013 and 2015; overall, girls showed a significantly higher risk of admission (RR = 1.23; 95%CI 1.1–1.4), which was more than doubled in the year 2020. 80% of the patients accessed ED spontaneously, while 15% accessed through an ambulance. The most frequent methods reported were

coded as undefined complaints in nearly 40% of all EDs admissions and traumatic conditions (37% in males and 26% in females); intoxication or poisoning was reported in less than 4% of admissions. ED Severity was roughly similar among genders, and four-fifths of all NSSIs were non-life-threatening occurrences registered as white or green codes.

**Conclusion:** NSSIs represent a public health issue and deserve specific attention due to the dramatic increase registered in the last seven years. According to other studies, this phenomenon appears to be more frequent in girls than in boys also in Italy, and observed differences account for a higher and most alarming increase. Due to the inherent limitations of the information source used, it is credible that the observed phenomenon is likely to be underestimated.

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**Oral Presentation (Onsite)**

*Topics:* RARE DISEASES, HAEMATOLOGY/ONCOLOGY

*Keywords:* Testicular tumor, Paediatric; Orchidectomy; Testicular sparing surgery.

**Paediatric testicular tumors – A 15 year experience.**

Santos, Mafalda Ferreira<sup>1</sup>; Leite, Filipa<sup>2</sup>

<sup>1</sup>Centro Hospitalar Tondela-Viseu; <sup>2</sup>Instituto Português de Oncologia do Porto.

**Background:** Testicular tumour is a rare malignancy that demonstrates variability in histopathologic features, treatment protocols, and outcomes based on the patient's age at presentation. The objective is to report our 15-year experience highlighting management and outcome(s) of paediatric testicular tumours.

**Methods:** All males (<19 years) with an index diagnosis of testicular tumours at a tertiary center between 2006–2020 were identified. Data were collected regarding age at diagnosis, disease stage, surgical operations, tumour biology and outcome(s).

**Cases Report:** A total of 15 male patients were identified. The median age at primary diagnosis was 8,7 years (0–16 years). Five tumours were benign, and 10 were malignant. Seven cases (47%) were recorded in pre-pubertal children and eight (53%) in post-pubertal males. In the pre-pubertal group (0–11 years) (n = 7)—four cases of germ cell tumours were recorded, all yolk sac lesions. One male with sex cord-stromal tumour that included one juvenile granulosa cell tumour. One miscellaneous primary testicular tumour, notably a leiomyosarcoma and a tumour-like lesion of the testis—one case of epidermoid cyst. In the post-pubertal male cohort (>12 years) (n = 8), five cases of germ cell tumours were diagnosed, that included one teratoma and four with mixed germ cell tumours. Two males had sex cord-stromal tumours: Leydig cell tumour. One case of paratesticular tumour—rhabdomyosarcoma. Serum alpha1-fetoprotein (AFP) was clearly elevated in 3 of 4 yolk sac tumours. Human chorionic gonadotrophin was elevated in one case of mixed germ cell tumour but remained within normal limits concerning the other entities. High inguinal orchidectomy was the standard surgical method. Dependent on tumour histology, stage and the recommended treatment schedule, post-operative chemotherapy was added. Testis-sparing surgery was performed in 3 boys with primary testicular tumours. Three patients had metastatic disease at presentation (20%). Relapses were not observed. During a median follow-up of 5 years, all patients survived event free.

**Learning Points and Discussion:** To our knowledge, this is one of the largest study series of paediatric testicular tumours in Portugal. The germ cell tumours constitute the great majority of these lesions, and the other entities are rare, even exceptional. Survival for paediatric testicular tumours is generally excellent. Delayed presentation, however, with a malignant testicular tumour may be associated with poor outcome(s).