



16th Annual Conference

Date: 14 & 15 November, 2023

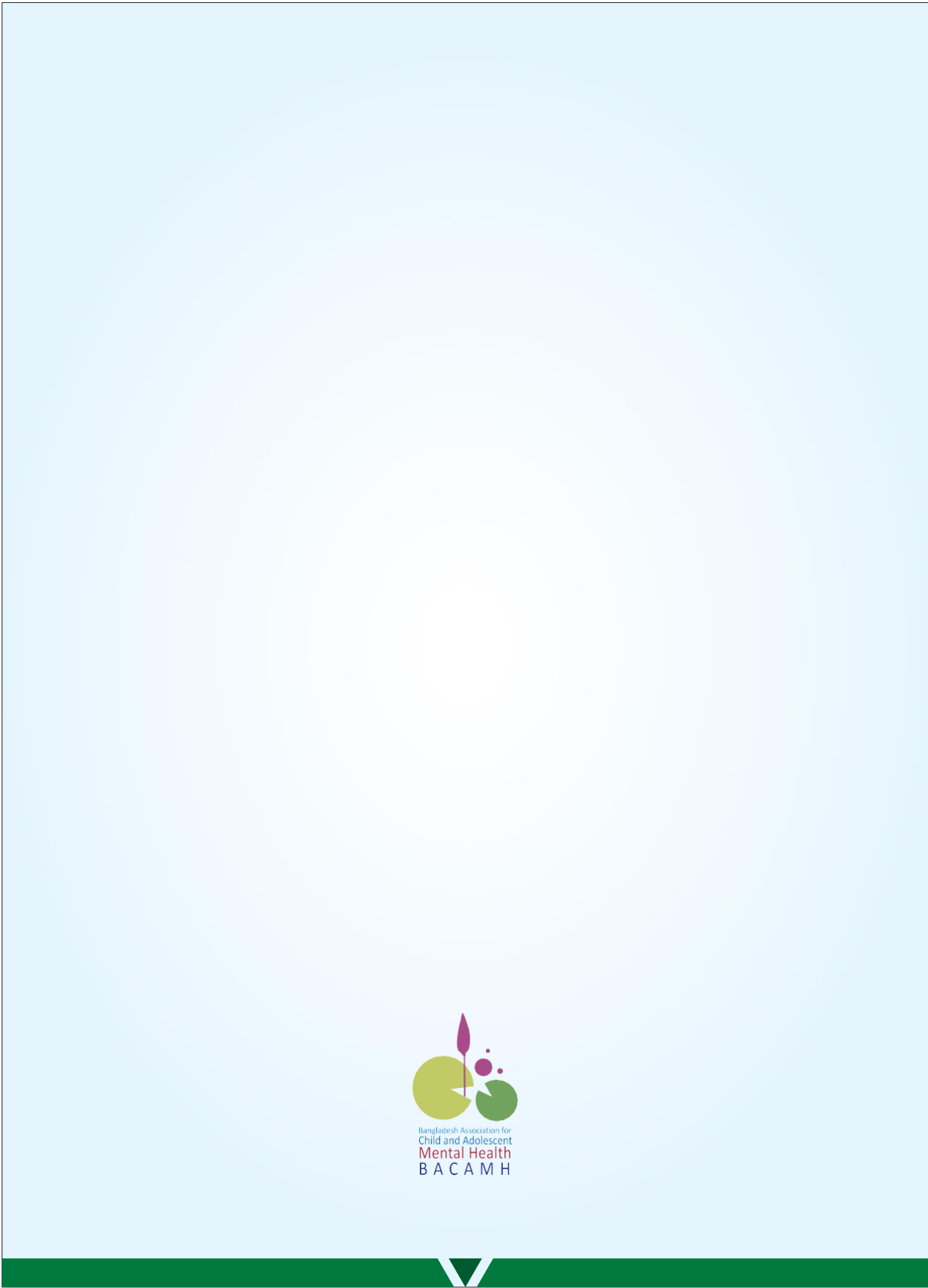
Venue : Krishibid Institute of Bangladesh, Farmgate, Dhaka

**Child & Adolescent Mental Health: Focus on
Family**



Bangladesh Association for Child and Adolescent Mental Health

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16th Annual Conference

Date: 14 & 15 November, 2023

Venue : Krishibid Institute of Bangladesh, Farmgate, Dhaka

**Child & Adolescent Mental Health: Focus
on family**



Bangladesh Association for
Child and Adolescent
Mental Health
B A C A M H

Bangladesh Association for Child and Adolescent Mental Health

PROGRAM AT A GLANCE



Bangladesh Association for Child & Adolescent Mental Health (BACAMH)
15th Annual Conference 14 & 15 November 2023

Theme: Child and Adolescent Mental Health: Focus on family
Venue: Krishibid Institute of Bangladesh, Farmgate, Dhaka

Date: 14 November 2023, Tuesday

08:00	Reception & Kits Collection
09:00	<p style="text-align: center;">Plenary Session (PS1)</p> <p>Chair:</p> <ol style="list-style-type: none">1. Prof. Dr. Mizanur Rahman, Professor (Rtd.), Dept of Paediatric Neurology, BSMMU2. Prof. Dr. Md. Faruq Alam, Professor (Rtd.), Ex-Director, NIMH <p>Speakers:</p> <ul style="list-style-type: none">◆ Prof. Gopen Kumar Kundu, Chairman and Professor, Department of Pediatric Neurology, BSMMU- Topic: Management of Neurologic Wilson disease: Challenges & opportunity◆ Prof. A A Mamun Hossain, Professor (Rtd.) and Head, Dept of Psychiatry, Rajshahi Medical College Topic: The Game of Death: Effects of the war on our children and the looming mental health crisis <p style="text-align: right;">Session Co-Ordinator: Dr. Shabnam Saba</p>
10:00	<p style="text-align: center;">Keynote Presentation (KNP)</p> <p>Chair:</p> <ol style="list-style-type: none">1. Prof. Mohit Kamal, Professor of Psychiatry, Ex Director (NIMH)2. Prof. Jhunu Shamsun Nahar, Professor of Psychiatry (Rtd.), BSMMU <p>◆ Child and Adolescent Mental Health: Focus on family</p> <p>Speaker: Dr. Helal Uddin Ahmed, Associate Professor, Dept. of child, adolescent and family psychiatry, NIMH, Dhaka & President, BACAMH</p> <p style="text-align: right;">Session Co-Ordinator: Dr. Nusrat Jahan Tanjila</p>

10:30	Tea break
10:45	<p style="text-align: center;">Syed Kamal Uddin Ahmed Memorial Oration</p> <p style="text-align: center;">Gaps and Options in Child Mental Health in Bangladesh Speaker: Prof. Md. Faruq Alam, Ex- Director, NIMH</p> <p style="text-align: right;">Session Coordinator: Dr. Fatema Tuj Johora Joti</p>
11:30	<p style="text-align: center;">Plenary Session (PS2)</p> <p>Chair: 1. Prof. Mohsin Ali Shah, Professor of Psychiatry, BSMMU 2. Brig. Gen (Rtd.) Azizul Islam, President, Bangladesh Association of Psychiatrists (BAP)</p> <p>Speakers:</p> <ul style="list-style-type: none"> ◆ Prof. MMA Shalahuddin Qusar Biplob. Professor of Psychiatry, BSMMU- Gudeless media use by adolescents leading to addiction and age inappropriate cognition ◆ Dr. Saiful Islam Bhuiyan, Asso. Professor of Dermatology, BSMMU- Psychosocial Impact of Chronic Childhood Skin Diseases <p style="text-align: right;">Session Co-Ordinator: Dr. Ashik Al Mahmud</p>

Opening Ceremony

12:30

Welcome Address:

Dr. Niaz Mohammad Khan
Secretary General, BACAMH.

Address by Special Guests:

Prof. Dr. Waziul Alam Chowdhury, Former President, Bangladesh Association of Psychiatrists (BAP)

Brig. Gen (Rtd.) Azizul Islam, President, Bangladesh Association of Psychiatrists (BAP)

Prof. Nahid Mahjabin Morshed, Chairman, Department of Psychiatry, BSMMU.
Immediate past president, BACAMH

Prof. Dr. Avra Das Bhowmik, Director, National Institute of Mental Health, Dhaka

Dr. Md. Tariqul Alam, General Secretary, Bangladesh Association of Psychiatrists (BAP)

Address by Guest of Honour:

Prof. Md. Golam Rabbani, Chairperson, Neurodevelopmental Disability Protection
Trustee Board, Dhaka

Speech by Chief Guest:

Prof. Dr. Md. Sharfuddin Ahmed
Vice Chancellor, BSMMU

Address by Chairperson:

Dr. Helal Uddin Ahmed
President, BACAMH.

Vote of Thanks:

Prof. Shalahuddin Qusar Biplob
Vice-President, BACAMH

Session Co-Ordinator: Dr. Sifat E Syed, Treasurer, BACAMH

14:00	Lunch								
15:00	<p style="text-align: center;">Scientific Debate</p> <p style="text-align: center;">Topic: <u>Eastern style of Parenting is better than Western</u></p> <p style="text-align: center;">Judges Panel</p> <p>Prof. Nahid Mahjabin Morshed, President, BACAMH. Chairman, Department of Psychiatry, BSMMU</p> <p>Dr. Mekhala Sarkar, Asso. Professor, National Institute of Mental Health</p> <p>Lt. Col Dr. Jesmin Akhter, Associate Professor, Classified Specialist in Psychiatry, CMH, Dhaka</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; background-color: #d9e1f2;">For (Team Dopamine)</th> <th style="text-align: left; background-color: #d9e1f2;">Against (Team Serotonin)</th> </tr> </thead> <tbody> <tr> <td>Dr. Md. Bahar Hossain</td> <td>Dr. Naeemur Rahman</td> </tr> <tr> <td>Dr. Touhida Ferdousi</td> <td>Dr. Sadia Afrin Shampa</td> </tr> <tr> <td>Dr. Sumaiya Bente Jalil</td> <td>Dr. Fahima Tamanna</td> </tr> </tbody> </table> <p style="text-align: right; background-color: #fff2cc;">Session Co-Ordinator: Dr. Zubir Mahmud Kamal</p>	For (Team Dopamine)	Against (Team Serotonin)	Dr. Md. Bahar Hossain	Dr. Naeemur Rahman	Dr. Touhida Ferdousi	Dr. Sadia Afrin Shampa	Dr. Sumaiya Bente Jalil	Dr. Fahima Tamanna
For (Team Dopamine)	Against (Team Serotonin)								
Dr. Md. Bahar Hossain	Dr. Naeemur Rahman								
Dr. Touhida Ferdousi	Dr. Sadia Afrin Shampa								
Dr. Sumaiya Bente Jalil	Dr. Fahima Tamanna								
16:00	<p style="text-align: center;">Oral Presentation (OP1):</p> <p>Chair: 1. Prof. Shah Alam, Professor (Rtd.) of Psychiatry</p> <p style="text-align: center;">2. Prof. Md. Mahmudur Rahman, Clinical Psychologist, Pro-VC, IUBAT</p> <p>Speakers:</p> <ul style="list-style-type: none"> ◆ Dr. Fatima Zohra, Assistant Professor, Department of psychiatry, BSMMU- Factitious disorder: a case report ◆ Dr. Sharmina Afrin Sheemu, MD Phase B Resident (Pediatric Neurology & Neurodevelopment), BSMMU- Identification of Early Clinical Features of Autism Spectrum Disorders in Bangladeshi Children- A Cross Sectional Study ◆ Andalib Mahmud, Counselling Psychologist and Trainer of NLP, Educational and Counselling Psychology, University of Dhaka-Case study on the efficacy of Neuro-Linguistic Programming in enhancing an adolescent's academic performance and well-Being ◆ Dr. Moumita Paul, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU- PTSD Followed by a brutal sexual abuse presented with behavioral problems: a pediatric case report <p style="text-align: right; background-color: #00a0e3; color: white;">Session Co-Ordinator: Dr. Sutapa Banik</p>								
04									

17:00	Tea Break
18:00	Cultural Program & Raffle Draw
21:00	Dinner

Date: 15 November 2023, Wednesday

09:00	<p style="text-align: center;">Worskshop 1</p> <p>◆ Topic: Empowering Families Through Applied Behavior Analysis Therapy: Building Stronger Bonds and Brighter Futures in Bangladesh</p> <p>◆ Facilitator: Thuji Grace, Head of Clinical Services, Applied Behavior Analysis Therapy, Inner Circle Pvt Ltd</p> <p style="text-align: right;"><i>Session Coordinator: Dr. Ananya Karim</i></p>
10:30	Tea Break
10:45	<p style="text-align: center;">Worskshop 2</p> <p>Topic: <u>Dialectical Behavior Therapy</u></p> <p>Facilitator: Prof. Dr. Jhunu Shamsun Nahar</p> <p>Associate Coordinators:</p> <ol style="list-style-type: none">Asst. Prof. Dr. Sadia AfrinDr. Fatema Tuj Johora Joti <p style="text-align: right;"><i>Session Coordinator: Dr. Touhida Ferdousi</i></p>
12:15	<p style="text-align: center;">Oral Presentation 2 (OP2)</p> <p>Chair:</p> <ol style="list-style-type: none">Prof. Sultana Algin – Professor, Department of Psychiatry, BSMMUProf. Kaniz Fatema – Professor and Chairman, Department of Paediatric Neurology, BSMMU <p>Speakers:</p> <p>◆ Dr. Fatema Tuj Johora Joti, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU- Factitious Disorder: Uncovered aspects of unexplained bleeding (Case Report)</p> <p>◆ Dr. Ishrat Zahan Nigar, MD Phase B Resident (Pediatric Neurology & Neurodevelopment), BSMMU- Effectiveness of Risperidone in Children with Attention Deficit Hyperactivity Disorder: Comparison with Methylphenidate</p> <p>◆ Dr. Mahabuba Rahman, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU- Cross-Cultural Adaptation and Psychometric Validation of the Columbia</p> <p>◆ Dr. Munim Reza, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU- Levels of insight in child and adolescent with obsessive-compulsive disorder: a cross sectional study</p> <p>◆ Niger Sultana, Family Therapy Practitioner and Student Counselor, Department of Educational and Counseling Psychology, University of Dhaka- Investigating the Role of Family Therapy in Addressing Adolescent Crisis: A Qualitative Case Study Integrating Multiple Therapeutic Strategies</p> <p style="text-align: right;"><i>Session Coordinator: Dr. Sumaiya Bente Jalil</i></p>

13:30	Annual General Meeting and declaration of Election result
14:00	Lunch and Closing



Bangladesh Association for Child & Adolescent Mental Health (BACAMH)

Executive Council

President	: Dr. Helal Uddin Ahmed	
Vice-President	: Prof. MMA Shalahuddin Qusar Biplob	
Immediate Past President	: Prof. Nahid Mahjabin Morshed	
Secretary-General	: Dr. Niaz Mohammad Khan	
Treasurer	: Dr. Sifat E Syed	
Joint Secretary	: Shelina Fatema Binte Shahid Dr. Shahana Parvin	
Academic Secretary	: Dr. Tumpa Indrani Ghosh	
Office Secretary	: Dr. Sadia Afrin	
Councilors	: Prof. Md. Faruq Alam Prof. Gopen Kumar Kundu Prof. Susmita Roy Dr. Hafizur Rahman Chowdhury	Dr.AHM Kazi Mostofa Kamal Dr. Md. Shibly Sadiq Dr. Shahriar Faruque Dr. Rubina Hossain

Organizing Committee

Chair : Prof. MMA Shalahuddin Qusar Biplob
Co-chair : Dr. Niaz Mohammad Khan

Members : Dr. Md. Tariqul Alam
Shelina Fatema Binte Shahid
Dr. Shahana Parvin
Dr. Shibly Sadiq
Dr. Shafqat Osman

Dr. Naeemur Rahman
Dr.Nusrat Jahan Tanjila
Dr. Mostofa Kamal Saikat
Dr. Al-Imran Meem

Program Committee 2023

Chair : Prof. Gopen Kumar Kundu
Co-chair : Dr. Sifat E Syed

Members : Prof. Nahid Mahjabin Morshed Dr. Touhida Ferdousy
Dr. Helal Uddin Ahmed Dr. Faisal Rahat
Dr. Mohtasham Hasan Dr. Fatema Tuj Johora Joti
Dr. Sadia Afrin

Constitution and By-laws Committee 2023

Chair : Prof. Md. Faruq Alam
Co-chair : Dr. Md. Tariqul Alam

Members : Prof. Nahid Mahjabin Morshed
Dr. Helal Uddin Ahmed
Dr. Niaz Mohammad Khan
Dr. Sifat E Syed

Election committee 2023

Chair (CEC) : Prof. Dr. Md. Faruq Alam
Co-chair : Dr. Tariqul Alam

Members : Prof. Nahid Mahjabin Morshed
Dr. Helal Uddin Ahmed
Dr. Niaz Md. Khan
Dr. Sifat E Syed

ABOUT BACAMH

Visit: www.bacamh.org



About BACAMH

Bangladesh Association for child and adolescent mental health (BACAMH) is the national organization for professionals working in the area of child and adolescent mental health since 2008. The mission of the association is the promotion of mentally healthy children and adolescents and families through training, service, research, advocacy, prevention, peer support and collaboration.

BACAMH has received organizational membership of Asian Body-Asian Society for Child and Adolescent Psychiatry and Allied Professions (ASCAPAP) and also received full membership of International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP).

The Objectives of BACAMH

- Promote the study, treatment, care and prevention of mental disorders and deficiencies of children and adolescents, and their families
- Adopt the concept of continuing education as a means of maintaining competence in child and adolescent mental health
- Promote national and international collaboration among professionals in the fields related to child and adolescent mental health
- Focus on the practice and research in child and adolescent mental health and to make the knowledge available to the professionals and public through various scientific activities
- Facilitation, advocacy and integration of child and adolescent mental health services
- To promote positive mental health in children and adolescents with concern for laying a foundation for better adulthood and future society
- To take up charitable work and all such matters that are incidental and conducive to the attainment of above.

BACAMH Activities

- Annual Conference in a variety of formats include institutes, seminars, workshops, lectures, oral presentations, posters presentation of new studies, interactive special interest study featuring experts on different child and adolescent psychiatric disorders
- Series of Continuous Professional Development programmes, Seminar, Workshops, Master Class Lectures and other scientific programmes on regular basis
- Training Courses on need based modules for the people who work with children and adolescents
- Providing, facilitating and advocacy for establishing and developing Child and Adolescent Mental health Services
- Collaborative activities and mutual exchange program at local, regional and international level
- Awards to honour a range of activities, from original research to outstanding papers to innovative community programmes
- Fellowship programmes to encourage outstanding medical students to pursue carrier in child and adolescent psychiatry and allied disciplines
- Child and adolescent mental health education and awareness activities
- Publishing " Bangladesh journal of Child and Adolescent Mental Health", BACAMH E-News bulletin, a wide variety of books, monographs, brochure, fact sheets, videos, and resource kits.

Membership Regulation

Membership shall comprise of two categories: Members and Fellows:

Members will be:

- (i) Psychiatrists who are interested in the field of child and adolescent mental health and agree with the aims and objectives of the Association and have at least one year of work experience in the field of child and adolescent mental health.
- (ii) Pediatricians, clinical psychologist, psychiatric social worker, child development experts, psycho therapist or other allied professionals holding Masters or Postgraduate degree who are interested in the field of child and adolescent mental health and agree with the aims and objectives of the Association and have at least two years of work experience in the field of child and adolescent mental health.
- (iii) Postgraduate students in child and adolescent Psychiatry.
- (iv) Postgraduate students in Psychiatry who agree with the aims and objectives of the Association and have at least one year training in the field of child and adolescent mental health.
- (v) Physicians who have at least 3 year of work experience in the field of child and adolescent mental health with the evidence of continuously working in this field.

Fellows will be:

- (i) Child and Adolescent Psychiatrists who have obtained additional qualification in Child and Adolescent Psychiatry recognized by the BMDC
- (ii) Psychiatrists who have obtained additional qualification in Child and Adolescent Psychiatry recognized by the BMDC.
- (iii) Psychiatrists holding postgraduate qualifications such as FCPS, MRCPsych, MD, MPhil and MCPS in Psychiatry, DPM in Psychological Medicine or any degree recognized by BMDC with minimum of 3 years of experience of working in the field of Child and Adolescent Psychiatry.
- (iv) Graded psychiatrist of Army Medical Core run by AFMI with minimum of 3 years of experience of working in the field of Child and Adolescent Psychiatry.
- (v) Physicians/Pediatricians with 5 years of experience as such who have made significant contribution to the field of child and adolescent mental health.
- (vi) Child psychologists, child and family psychotherapists, child and family social worker, clinical psychologist and other allied professionals holding Masters degree recognized by the competent authority that are directly related to child and adolescent mental health with either 10 years of work experience in the field of child and adolescent mental health after obtaining Master's degree or five years of such experience after obtaining PhD degree or equivalent, who have made a significant contribution to the field of child and adolescent mental health.

International Members

- a) Election of the **International Membership** may upon **application**, be extended to any professionals outside Bangladesh who would otherwise qualify for election to membership as described in membership classes in the above mentioned regulation.
- b) **International Members** of the Association shall be eligible to participate in all of the activities of the Association except that they
 - (i) Shall not have right to vote
 - (ii) Shall not be eligible to hold office in the Association, and
 - (iii) Shall not be eligible to serve as Chairperson of the committees of the Association

All types of Membership are subject to the approval of the Executive Council and application must be supported by two Existing Fellows of the Association.

The Association has taken all necessary measures to assure the success of the upcoming 15th Annual Conference and General Meeting, which will be held on November 14–15, 2022. The conference's theme for this year is "Child and adolescent mental health: prioritizing service needs." The meeting will likely draw roughly 350 attendees from a range of professions, including psychiatrists, child and adolescent psychiatrists, pediatricians, clinical psychologists, and psychologists and social workers. We can only hope that the conference will be fruitful and interesting.

Organizational activities:

Last year, there were several Executive Council meetings. With the assistance of the honorable members, the BACAMH has provided mental health care throughout the Post-COVID-19 scenario. For the purpose of commemorating various significant days, BACAMH has collaborated with the WHO, DGHS, MOHFW, NIMH, BSMMU, Bangladesh, and the IACAPAP. A variety of expert meetings from both domestic and international locations have been held by BACAMH to raise awareness about how we can support our children and adolescents during a pandemic.

International Relations

Excellent ties exist between the Association and the Asian Society for Child and Adolescent Psychiatry and Allied Professions (ASCAPAP) and the International Association for Child & Adolescent Psychiatry and Allied Professions (IACAPAP).

Others

Excellent networking and communication have been developed with the help of the many regional and international organizations concerned with child and adolescent mental health. BACAMH has received offers of support in a variety of forms, including the collaboration on research projects, the partnership with educational programs, and the interchange of professionals undergoing training. We value the support and guidance the patron and advisors for the Association have given us. Every single member of the Executive Council deserves our gratitude for their extraordinary work and commitment to realizing the objectives of the Association. The Association appreciates the hard work and passion of all the members of the several standing Committees for successfully accomplishing their duties. We congratulate all fellows and Association members for participating actively in organization events. In order to strengthen child and adolescent mental health services in Bangladesh, we are grateful to the individuals and organizations involved in child and adolescent mental health who took part in our programs. We would especially like to thank the pharmaceutical businesses and organizations for your kind support of our activities. Finally, I have the utmost respect for those who contribute to the organization without thinking about recognition or compensation.

Dr. Niaz Mohammad Khan
Secretary General, BACAMH

Keynote Presentation (KNP)

◆ **Child and Adolescent Mental Health: Focus on family**

Dr. Helal Uddin Ahmed, Associate Professor, Dept. of child, adolescent and family psychiatry, NIMH, Dhaka & President, BACAMH



Abstract:

Biography:

Syed Kamal Uddin Ahmed Memorial Oration

Gaps and Options in Child Mental Health in Bangladesh
Prof. Md. Faruq Alam, Ex- Director, National Institute of Mental Health(NIMH), Dhaka



Abstract:

Studies in Bangladesh show there are huge load of neurodevelopmental disorders (NDDs), mental disorders, epilepsy and substance use among children in the society. About 94% of sufferers are still out of treatment. Majority of the treatment gap is contributed by neurodevelopmental and minor mental disorders. Proper perinatal and neonatal care, ideal , reducing academic stresses, encouraging recreational and social activities and increasing child mental health service facilities nearer to the living places of the children are among the principle issues to address this high treatment gap. Developing child mental health services in schools, primary, secondary and tertiary level of health care is required. Involvement of family, teachers and non-health sectors is essential for effective intervention. Protecting rights of children and conducting need based research are important elements for the success. This paper discusses study findings and proposes evidence based options for developing child mental health services in the country.

Biography:

Biography of Professor Syed Kamal Uddin Ahmed



(1953 - 2011)

Prof. Syed Kamal Uddin Ahmed was born on the 19th of March, 1953 in Meherpur. He passed his matriculation in 1969 from Barisal Zilla School. After passing HSC from Chittagong College he entered the Chittagong Medical College from where he graduated in 1978. He obtained his fellowship FCPS in Psychiatry from Bangladesh College of Physicians and Surgeons in July 1982. He further received fellowship training at different reputed academic institutes abroad, including National Institute of Mental Health and Research (NIMHANS) India, University of Colombo, Sri Lanka, and World Health Organization (WHO) Collaborating Centre for Research in Mental Health at the McGill University in Montreal, Canada. He received fellowship (FRCP) from Royal College of Physicians of Edinburgh in 2005.

In his long career in psychiatry Prof. Ahmed worked for Bangladesh Health Services for about 18 years. He became a faculty member at the Institute of Post-Graduate Medicine Research (now Bangabandhu Sheikh Mujib Medical University) in 1984 and then an Associate Professor in 1989. Later he became the Chief Consultant and Director of Central Drug Addiction Treatment Centre of Government of Bangladesh and continued his office there till 1996. Subsequently, Prof. Ahmed worked for United Nations Drug Control Programme (UNDCP) and United Nations Development Programme (UNDP) at home and abroad as drug demand reduction and behavior change specialist. He led a UNDCP mission to Maldives in 1998 to develop their drug demand reduction programme. Prof. Syed Kamal Uddin Ahmed was actively working as Professor of Psychiatry at Holy Family Red Crescent Medical College, Dhaka, when he was diagnosed quite unexpectedly with stomach cancer. He died soon after on 1st of December, 2011 at the age of 58 years.

Prof. Ahmed was involved in developing need based under-graduate and post-graduate courses in psychiatry, developing training materials for community based services, and coordinating community extension projects sponsored by World Health Organization. His contribution during UN employment was multidimensional and included development of country policy and strategy documents for drug demand reduction and HIV prevention. Prof. Ahmed was an ardent researcher and his main research interest was in biological psychiatry, behavioral intervention and drug misuse. He was also an expert in rapid assessment studies and GIS mapping. He authored and coauthored several publications on

psychiatry and psychopharmacology both in local and internationally reputed journals. There are so far more than 50 publications to his credit. He was one of the principal investigator of the first ever epidemiological study on substance abuse in Bangladesh, sponsored by WHO. Prof Ahmed was also an expert in medical ethnography and his work on pattern of buprenorphine use in Bangladesh was a landmark investigation in drug abuse research in this region. This research was sponsored by National Institute on Drug Abuse(NIDA), USA. He developed and validated the 'Bangla' version of Present State Examination (PSE), which is very often used by local researchers. Prof. Ahmed was on the Editorial board of a number of scientific journals and was Editor-in-Chief of Journal of Bangladesh college of Physicians and Surgeons for three consecutive terms. He was also the Editor-in-Chief of Journal of Medical Science and Research and member of the international advisory board of International Journal of Addiction Sciences. Besides his professional work Prof. Ahmed regularly contributed a column in national dailies on different social issues.

Prof. Ahmed joined Bangladesh Association for Child & Adolescent Mental Health (BACAMH) since its inception as Life Fellow. He served the Association in different positions namely, Academic Secretary, Executive Council Member and played critical role in advancing the Association. He was the Chair of the Programme Committee for the subsequent 2nd and 3rd Annual Conference of the Association that was fabulous and exemplary Conference Programme. Prof. Ahmed contributed his best in developing child and adolescent psychiatry in Bangladesh and is one of the key sources of spirit and motivation for all the professionals in child and adolescent mental health of the Country. The Association is highly honored to introduce State of Art Oration on Child and Adolescent Mental Health "Syed Kamal Uddin Ahmed Memorial Oration" in every Annual Conference of the Association.

With his death the world of Psychiatry has lost one of its most distinguished figures. He was outstanding in his field in Bangladesh and enjoyed a very high stature among his peers. Honesty and integrity were the hallmarks of his character and those who knew him, knew that he never compromised with his principles. He firmly adhered to medical ethics and pushed for higher professional standard in training programs and clinical practice. Prof Ahmed also had a great sense of humor and was always very kind, gentle and caring to all those who came across him. These qualities set him apart as an exemplary icon that was highly inspirational. He was rewarded with great reverence, love and admiration from his students, trainees, colleagues and above all his patients. May Allah grant him eternal peace and a place in heaven for all the good deeds that he did in this world.

Plenary session (PS1)



◆ Management of Neurologic Wilson disease: Challenges & opportunity

Prof. Gopen Kumar Kundu, Ex- Chairman and Professor, Department of Pediatric Neurology & Neurodevelopment, BSMMU

Abstract:

Wilson disease is an inherited autosomal recessive disorder of copper metabolism leading to hepatic damage and neurological disturbance of variable degree. The defective gene, *ATP7B*, encodes a hepatic copper-transporting protein, which plays a key role in human copper metabolism. It usually manifests within the first three decades with liver dysfunction, extrapyramidal, neuropsychiatric, or Osseo-muscular symptoms and has marked inter- and intra-familial clinical heterogeneity.

WD is rare with an estimated prevalence of 1 in ~30,000 with a heterozygous *ATP7B* mutation carrier frequency of 1:90 (almost 1% of a population). Mutations in *ATP7B* result in impaired biliary copper excretion with consecutive copper overload primarily in the liver and later in the brain causing hepatic and neuro-psychiatric symptoms.

Clinical manifestations are related to copper accumulation predominantly in the liver and brain. Hepatic diseases are ranging from mild hepatitis to acute liver failure or cirrhosis and neurological symptoms are dysarthria, dystonia, tremor, and psychiatric disturbances. Early recognition of neurologic Wilson disease is prime important because untreated neurologic Wilson disease is fatal. It can be diagnosed by means of clinical manifestations (neurologic and neuropsychiatric), biochemical, neuro-radiological or genetic examination.

Chelation therapy is usually given as first line treatment in symptomatic wilson disease. Two groups of drugs are currently used: chelating agents such as, d-penicillamine, tetrathiomolybdate, and trientine, which increase urinary copper excretion, and zinc salts, which inhibit copper absorption in the digestive tract. Overall prognosis of neurologic manifestation is not good but, early diagnosis and early initiation of treatment with penicillamine for WD has a good outcome.

Biography:

Plenary session (PS1)

◆The Game of Death: Effects of the war on our children and the looming mental health crisis

Prof. A A Mamun Hossain, Professor (Rtd.) and Head, Department of Psychiatry, Rajshahi Medical College



Abstract:

The multilevel-complexity between the military industrial complex, war industry and the very 'death instinct' of mankind has led to a long history of war from the very beginning of our civilization.

Today nearly 1/5 th children worldwide --- 420 million children are living in a conflict zone, a rise of nearly 30 million children from 2016. The numbers of 'grave violations' of children's rights in conflict, reported and verified by the UN have almost tripled since 2010. Increasingly the brunt of armed violence and warfare is being borne by children. A growing body of research highlights how the children suffer from long term mental and psycho-social illness.

The present paper would address the long-term impact that the current escalating war in different part of globe will have on child and adolescence mental health and social wellbeing , with a proposal for setting out some practical agenda for action.

Biography:

Professor A A Mamun Hussain, former Head of Department of Psychiatry , Rajshahi Medical College, is currently a practicing psychiatrist at Rajshahi. He had M.Phil. and FCPS in psychiatry in the year of 2009 and 20 11 consecutively.

He had his PhD, entitled --- 'Santal psychiatric patients : a study in a suburban district of Bangladesh,'---- which was later published by LAP LAMBERT academic publishing, Germany 2011. He attended several national and international psychiatric conferences as a speaker and chairperson. He has around 30 scientific papers, published in country and abroad.He is life member of BAP, BMA, BCPS, BACAMH, and Bangla Academy. He is also a Bangla academy Laureate on fiction in 2017. His present field of interests are cultural psychiatry, refractory depression, suicide, non drug addiction behaviour and interface of psychiatry and social sciences.

Plenary session (PS2)

◆ Guideless media use by adolescents leading to addiction and age inappropriate cognition

Prof. MMA Shalahuddin Qusar Biplob. Professor of Psychiatry, BSMMU



Abstract:

Adolescence is a bridging period from child to adult journey where there is abrupt changes occur on biological, psychological, emotional & social level. During this tumultuous years, they experienced a lot of stress, worry with simultaneously rushing a lot of information about surroundings. In this digital era, internet constitutes an important tool for work, communication & entertainment, specially during SARS-COV-2 pandemic, but sometimes this leads to fail to control over internet use. Despite numerous benefits, it's now a growing concern about problematic internet use. International telecommunication Union (ITU) estimates 51% of world population is now online (ITU, 2020), among young people aged 15-24 years this rises to almost 70%. Most of them don't follow the minimum media guidelines. Day by day they are losing control over social media use. According to latest data, Bangladesh Telecommunication regulatory commission (BTRC) estimates over 12.61 crore internet users in Bangladesh. In our country, a study showed that about 63% moderate & 22% excessive problematic internet uses among 15 to 24 years adolescents attending a tertiary care hospital. Research suggests that adolescents are very much misdirected about the proper media usage which leads to negative health behaviour such as gambling, alcohol abuse or other psychoactive substances, migraines, back pain, insufficient rest, decreased productivity, decrease academic performance, hampered social relationship, poor time management & missed opportunities, which may further develop low mood, difficulty in sleeping & concentration, low energy levels, poor appetite. Now it's high time for addressing this guideless internet use & age inappropriate cognitive behaviour to prevent the burden on future generations. Youth group is specially vulnerable to such situations. It is very much important at first to understand guideless media use & to identify the inappropriate behaviour. To overcome this situation, what would be a minimum guideline for the proper media use & how can we implement these strategies for saving our future generations?

Biography:

Plenary session (PS2)

◆ Psychosocial Impact of Chronic Childhood Skin Diseases

Dr. Saiful Islam Bhuiyan, Asso. Professor of Dermatology, BSMMU



Abstract:

Skin and nervous systems develop alongside each other in the fetus and remain interconnected throughout life. The skin is the most noticeable part of our body, and skin diseases could be impacted by psychological factors. Children with chronic skin diseases like atopic dermatitis, psoriasis, vitiligo, alopecia areata, acne, and different genodermatoses experience itching, pain, oozing, exfoliation, oozing, and cutaneous and systemic complications. These discomforts, disfigurements, and disabilities in infants, children, and adolescents impose significant adverse psychosocial effects that may negatively impact their long-term development and wellbeing. Children with different visible skin lesions may encounter teasing, bullying, and stigmatization socially, which may impact their self-esteem and relationships with peers throughout childhood. Many of these skin diseases increase rates of depression, anxiety, and QoL impairment in children, as well as the risk of person with OCD spectrum disorder (OCD) and specific phobias. Obsessive-compulsive disorder, impulse control disorder, dermatitis artefacta, psychogenic pruritus, and many other primary psychiatric disorders can also involve the skin either directly or indirectly and can be presented as acne excoriee (picking acne), neurodermatitis, dermatophagia, trichotillomania, and onychotillomania. Many childhood dermatological conditions have been documented to be made worse by stress, including acne, rosacea, psoriasis, itching, eczema, pain, and hives. So, identifying the psychosocial effects and background psychiatric conditions of childhood skin diseases is important for management and minimizing long-term consequences.

Biography: Dr. Mohammed Saiful Islam Bhuiyan MD

Associate professor, Dept. of Dermatology, Bangabandhu Sheikh Mujib Medical University (BSMMU) & General Secretary, Bangladesh Academy of Dermatology (B.A.D.)

Workshop 1

◆ Empowering Families Through Applied Behavior Analysis Therapy: Building Stronger Bonds and Brighter Futures in Bangladesh

Thuji Grace, Head of Clinical Services, Applied Behavior Analysis Therapy, Inner Circle Pvt Ltd



Abstract:

Background and Objectives:

The positive impact of Applied Behavior Analysis (ABA) therapy on families, highlighting its role in strengthening family relationships and facilitating the growth and development of individuals receiving ABA interventions. It suggests that ABA therapy not only addresses individual behavior challenges but also contributes to the overall well-being and cohesion of the family unit.

Methods:

The Approach used for the ABA is a verbal behavior approach with a standardized assessment tool called Assessment for Basic Language and Learning Skills - Revised. The experiment used in this research is a single-subject design. In this study, three families who have been taking ABA: VB therapy from Inner Circle for more than one year participated. The age group of the clients is 2 to 13 years old. Each client is taking more than 10 to 15 hours of services in a week. Each family is part of the therapy process for 3 to 5 hours a week.

Results:

The ABA: VB therapy, backed by scientific evidence, demonstrated an impressive 80% enhancement in clients' social cooperation and the effectiveness of reinforcers during the transition from baseline to treatment phases. Additionally, it resulted in an 80% improvement in family relationships and engagement, notably in client communication. Moreover, successful school collaboration between paraprofessionals and educators facilitated the seamless integration of clients into mainstream educational environments.

Conclusion:

In summary, this study underscores the immense potential of ABA: VB therapy in Bangladesh. Beyond addressing individual behavioral hurdles, it cements familial bonds and contributes to the holistic development and well-being of individuals undergoing these interventions. This research portends a brighter future for individuals facing behavioral challenges and their families in Bangladesh.

◆ **Biography:**

Thuji is a highly experienced professional with over a decade of dedicated service, focusing on advocating for neurodivergent individuals. With a Master of Applied Behavior Analysis from Caim University, Pennsylvania, and a Master of Social Work specializing in Medical and Psychiatry from Madras Christian College, India. Her extensive career has spanned multiple countries, including the US, Australia, Singapore, Bhutan, and India. Thuji holds certifications as a Board-Certified Assistant Behavior Analyst (US), an International Behavior Analyst (US), and a Certified Counselor (Bhutan). Notably, Thuji plays a vital role as a member of the Professional Advisory Board of the International Behavior Analysis Organization, contributing to the global advancement of behavior analysis.

Workshop 2

Dialectical Behavior Therapy

**Prof. Dr. Jhunu Shamsun Nahar,
Asst. Prof. Dr. Sadia Afrin ,
Dr. Fatema Tuj Johora Joti**



Abstract:

Introduction:

In late 1970s, Marsha M. Linehan developed Dialectical Behavior Therapy (DBT). Dialectics allows opposites to coexist, you can be weak and you can be strong; you can be happy and you can be sad. Dialectics is the process of seeking the truth in the moment, drawing on a synthesis of opposites, e.g., "I want to be with you, and I want time alone." Or, "You forgot to pick me up at the ferry, and you still love me."

Dialectical Behavior Therapy (DBT) is derived from cognitive behavioral therapy and eastern mindfulness practice that was originally developed to treat chronically suicidal individuals diagnosed with borderline personality disorder (BPD) and it is now recognized as the gold standard psychological treatment for this population.

There are four components of DBT: skills training group, individual treatment, DBT phone coaching, and consultation team. DBT includes four sets of behavioral skills: Mindfulness, Distress Tolerance, Interpersonal Effectiveness, and Emotion Regulation.

Workshop design:

In the workshop, main focus will be given on skill training section. Coordinators will give short theoretical introduction about DBT. After that, at least two items from each skill will be practiced among the coordinators in order to demonstrate how to exercise those. Later the participants will be divided into groups so that they can exercise other skills. Coordinators will help them to workout the skills.

At the end of the workshop at least four participants will present the summary of their exercises.

Biography:

Oral Presentation (OP1)

◆ **Factitious disorder: a case report**

Dr. Fatima Zohra, Assistant Professor, Department of psychiatry, BSMMU



Abstract: Factitious disorder (FD) is a psychiatric condition characterized by the deliberate development of physical or psychological symptoms by individuals, with the aim of assuming the role of a patient, without any apparent tangible benefit. The wide spectrum of presentation makes the diagnosis and management challenging. This case report presents the clinical profile of a 22-year-old female patient who was referred to the Psychiatry department of Bangabandhu Sheikh Mujib Medical University (BSMMU). The patient's medical history includes episodes of recurrent bleeding from the oral cavity in childhood, which have recently worsened and now involve bleeding from the nose, eye, ear, and umbilicus. Notably, no physical or laboratory abnormalities have been identified thus far. She has a history of mental trauma from her early years. After receiving a referral and conducting a comprehensive assessment that included a thorough medical history, physical examination, and psychiatric evaluation, the individual was diagnosed with Munchausen syndrome. Pharmacotherapy and psychotherapy were suggested, but she refused treatment and got discharged on a risk bond.

Biography:

Oral Presentation (OP1)



◆ Identification of Early Clinical Features of Autism Spectrum Disorders in Bangladeshi Children- A Cross Sectional Study

Dr. Sharmina Afrin Sheemu, MD Phase B Resident (Pediatric Neurology & Neurodevelopment), BSMMU

Abstract: Background: Attention Deficit Hyperactivity Disorder (ADHD) is the most common neurodevelopmental disorder of childhood which is characterized by persistent inattention and hyperactivity-impulsivity, impacting academic and social functioning. Methylphenidate is the recognized first-line treatment, but there's growing interest in the off-label use of risperidone. Since there's no comparative study between these two drugs, this study aims to evaluate the effectiveness and safety of risperidone in comparison to methylphenidate in children with ADHD.

Objectives: To determine the effectiveness and safety of risperidone in comparison to methylphenidate among the children with ADHD.

Methods: This prospective, quasi-experimental study was conducted in OPD, Department of Pediatric Neurology, BSMMU. Total 45 children aged 3-15 years with ADHD were selected by purposive sampling and assigned to either methylphenidate or risperidone treatment. Follow up was done using CPRS-R at 3rd and 6th months. One patient was lost to follow-up, and four had adverse effects and discontinued treatment. 20 patients remained in each group. A p value <0.05 was regarded statistically significant.

Results: In our study, most participants were 3-7 years old (95%) and predominantly male (80%). 50% had Oppositional Defiant Disorder (ODD) and Conduct Disorder in 2.5%. Majority (67.5%) had combined-type ADHD and 45% children had severe ADHD. Both medications effectively reduced ADHD symptoms with no significant difference between them. Risperidone led to somnolence (75%), increased appetite (40%), and weight gain (70%), while methylphenidate caused decreased appetite (90%), insomnia (60%), and headaches (10%). Serious side effects of risperidone included nocturnal enuresis and extrapyramidal symptoms, while methylphenidate led to tics and irritability. These side effects significantly differed between the two groups ($P < 0.05$).

Conclusion: Our study showed both risperidone and methylphenidate effectively reduced ADHD symptoms with risperidone showing more favorable response. Most common adverse effects of risperidone were weight gain and somnolence and in methylphenidate, anorexia and insomnia.

Biography:

Dr. Sharmina Afrin Sheemu is MD phase B resident of Department of Pediatric Neurology, IPNA, BSMMU. She passed MBBS from Sir Salimullah Medical College in January, 2009. She joined 33rd BCS as Assistant Surgeon in August, 2014. She started her journey of Doctor of Medicine (MD) in Pediatric Neurology and Neurodevelopment in BSMMU in March, 2018. She has recently completed her thesis and is preparing for phase B final examination of January, 2024 session.

Oral Presentation (OP1)

◆ **Case study on the efficacy of Neuro-Linguistic Programming in enhancing an adolescent's academic performance and well-Being**
Andalib Mahmud, Counselling Psychologist and Trainer of NLP,
Educational and Counselling Psychology, University of Dhaka



Abstract:

This case study provides a comprehensive psychological intervention analysis for a female adolescent, BI, who displayed significant challenges, including diminished attention in academic pursuits, suboptimal academic performance, and familial stressors. These factors negatively impacted both her scholastic engagement and overall well-being. An evaluative assessment was conducted employing the Neuro Linguistic Programming (NLP) framework, focusing on six core components: environment, behavior, resources-skills, values-beliefs, identity, and purpose. Utilizing NLP's neurological levels for assessment revealed that BI harbored unresourceful cognitions and self-identity, adversely affecting her daily functioning. Subsequently, BI underwent six NLP therapy sessions to foster resourceful cognitive processes and reinforce a constructive self-identity. This in-depth case analysis elucidates the therapeutic interventions employed, emphasizing shifts in BI's cognitive architecture through anchoring and visual-kinesthetic restructuring techniques. The study's findings, grounded in both the client's experiential feedback and the therapist's clinical assessments, lend empirical support to the case conceptualization and demonstrate the efficacy of NLP as a therapeutic strategy for adolescents grappling with academic and familial pressures.

Biography: Andalib Mahmud is a Counselling Psychologist and Trainer of Neuro Linguistic Programming. She has exposures in Transactional Analysis (TA) and EMDR (Eye Movement Desensitization and Reprocessing) therapy. Her expertise areas are dealing with trauma, relationship issues, stress and anxiety, increasing motivation, dealing with frustration, grief and loss. Her experiences working with refugees, tuberculosis patients, trauma victims, and COVID-19 frontline workers made her stronger and more knowledgeable. She develops modules and arranges trainings on Neuro Linguistic Programming for individuals, groups and institutes in Bangladesh, India, Nepal and Australia. She is a trainer member and international ambassador of ANLP International CIC, UK.

Oral Presentation (OP1)



◆ PTSD Followed by a brutal sexual abuse presented with behavioral problems: a pediatric case report

Dr. Moumita Paul, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU

Abstract:

Background: In the past few years, there has been increased recognition that children, who have faced traumatic incidences, can develop post-traumatic stress disorder (PTSD), just like adults. Prevalence of CSA ranged from 2.2% - 94% for girls and 1.7% - 49.5% for boys. One in four girls and one in six boys will be sexually abused before they turn 18 years old. Pediatric PTSD can play an important role in legal settings, and requires that an expert witness be well versed in advances in clinical and conceptual models of this diagnosis. We present a case of PTSD in a 5-year-old male child who had been gone through brutal penetrating sexual abuse more than once by his neighbor. He has been presented with multiple healed bite marks, lower abdominal pain, fearfulness, aggression, impulsivity, sleep disturbance and later diagnosed as PTSD by presence of recurrent distressing memories, startle response, hypervigilance, sleep disturbances. It also raised a legal issue which made a psychosocial impact on him and his family.

OBJECTIVE: Is to present a very young onset PTSD in Bangladesh perspective, its treatment and outcome

Method: It's a descriptive study which include Clinical examination supplemented by a symptom based on DSM-5

Result: After taking a detailed history from his grandmother and thorough physical and mental state examination the case diagnosed as PTSD

Intervention: Low dose risperidone was given to manage his aggression and impulsivity; response rate was 50% by one month. Other psychological approach could not be done.

Conclusion: In the context of current turmoil prevalent worldwide, no age group is immune from exposure to trauma, and its consequences. PTSD can become chronic and have an impact on normal psychosocial development and functioning in adulthood. Therefore, there is a need for action and a public health approach with regard to children's traumatic exposure. The role of child and adolescent psychiatrist and general pediatricians is important

Biography: Dr. Moumita Paul is currently pursuing her Post Graduation degree in Child and Adolescent Psychiatry under the residency program of session 2018 of Bangabandhu Sheikh Mujib Medical University. She completed her graduation in 2015 from Jalalabad Ragib-Rabeya Medical college affiliated to Shahjalal university of Science and Technology.

Oral Presentation (OP2)

◆ Factitious Disorder: Uncovered aspects of unexplained bleeding (Case Report)

Dr. Fatema Tuj Johora Joti, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU



Abstract:

Background:

Factitious Disorder (FD) is a rare psychiatric disorder in which patients deliberately produce or imitates physical or psychological symptoms, or inflict injury on themselves for the primary purpose of assuming the sick role. Factitious disorder was first reported as Munchausen syndrome (MS) in 1951 by Richard Alan John. Overwhelming stress and unresolved conflict can trigger factitious disorder. Cyber-bullying is one of them. Though factitious bleeding is an uncommon condition in adolescent population but increasing factitious patients in recent days, suggest the contrary.

Case Description:

In this case report, we present an adolescent, who was immediately exposed to cyber-bullying, presented with recurrent unexplained bleeding from multiple sites, admitted in BSMMU, a tertiary care hospital in Bangladesh.

Method:

After thorough physical and psychological evaluation, patient was diagnosed as a case of factitious disorder based on of DSM-5 criteria.

Result:

Based on the diagnosis of FD, approach was proper psychological intervention without direct confrontation, with focusing on symptoms reduction, assessing family dynamics, uncovering the conflict area and behavioral modification. During psychological intervention, patient confronted herself and did not present any factitious bleeding further.

Conclusion:

In case of patients with unexplained bleeding symptoms, Physicians should always consider this rare disorder to avoid misdiagnosis and unnecessary use of medical resources. We recommend after exclusion of all possible etiologies, emphasis should be given on collateral history taking, detailed briefing of family members as it plays a vital role to reduce the mental sufferings of the patient.

Biography: Dr. Fatema Tuj Johora Joti, completed MBBS from Kumudini Women's Medical College and Hospital in 2015, Joined in 39th BCS (health), currently working as a MD Resident, Phase B, Child & Adolescent Psychiatry, Bangabandhu Sheikh Mujib Medical University, Dhaka, Bangladesh.

Oral Presentation (OP2)

◆ Effectiveness of Risperidone in Children with Attention Deficit Hyperactivity Disorder: Comparison with Methylphenidate

Dr. Ishrat Zahan Nigar, MD Phase B Resident (Pediatric Neurology & Neurodevelopment), BSMMU



Abstract: Background: Attention Deficit Hyperactivity Disorder (ADHD) is the most common neurodevelopmental disorder of childhood which is characterized by persistent inattention and hyperactivity-impulsivity, impacting academic and social functioning. Methylphenidate is the recognized first-line treatment, but there's growing interest in the off-label use of risperidone. Since there's no comparative study between these two drugs, this study aims to evaluate the effectiveness and safety of risperidone in comparison to methylphenidate in children with ADHD.

Objectives: To determine the effectiveness and safety of risperidone in comparison to methylphenidate among the children with ADHD.

Methods: This prospective, quasi-experimental study was conducted in OPD, Department of Pediatric Neurology, BSMMU. Total 45 children aged 3-15 years with ADHD were selected by purposive sampling and assigned to either methylphenidate or risperidone treatment. Follow up was done using CPRS-R at 3rd and 6th months. One patient was lost to follow-up, and four had adverse effects and discontinued treatment. 20 patients remained in each group. A p value <0.05 was regarded statistically significant.

Results: In our study, most participants were 3-7 years old (95%) and predominantly male (80%). 50% had Oppositional Defiant Disorder (ODD) and Conduct Disorder in 2.5%. Majority (67.5%) had combined-type ADHD and 45% children had severe ADHD. Both medications effectively reduced ADHD symptoms with no significant difference between them. Risperidone led to somnolence (75%), increased appetite (40%), and weight gain (70%), while methylphenidate caused decreased appetite (90%), insomnia (60%), and headaches (10%). Serious side effects of risperidone included nocturnal enuresis and extrapyramidal symptoms, while methylphenidate led to tics and irritability. These side effects significantly differed between the two groups (P<0.05).

Conclusion: Our study showed both risperidone and methylphenidate effectively reduced ADHD symptoms with risperidone showing more favorable response. Most common adverse effects of risperidone were weight gain and somnolence and in methylphenidate, anorexia and insomnia.

Biography:

Dr. Ishrat Zahan Nigar is MD phase B resident of Department of Pediatric Neurology, IPNA, BSMMU. She passed MBBS from Dhaka Medical College (K-64) in January, 2012. She joined 33rd BCS as Assistant Surgeon in August, 2014. She started her Doctor of Medicine (MD) journey in Pediatric Neurology and Neurodevelopment in BSMMU in March, 2018. She has recently completed her thesis and is preparing for phase B final examination of January, 2024 session.

Oral Presentation (OP2)



◆ Cross-Cultural Adaptation and Psychometric Validation of the Columbia-Suicide Severity Rating Scale (C-SSRS) (Lifetime/Recent-Clinical Version) into Bangla

Dr. Mahabuba Rahman, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU

Abstract: Background: The Columbia-Suicide Severity Rating Scale (C-SSRS) Lifetime/Recent-Clinical Version is a comprehensive assessment to determine the suicide risk of an individual. The scale has been validated in 131 languages across 81 countries but yet to be validated in Bangla.

Objectives: To develop a culturally adapted and validated Bangla version of C-SSRS Lifetime/Recent-Clinical Version to measure the suicidal risk.

Methods: This was a cross-sectional validation study. Bangla adaptation of the scale was done by following a six step methodological approach. By purposive sampling, a total of 201 individuals aged 13 and more with and without suicidal behavior were included. Informed written consent and sociodemographic information were collected. Then the Bangla adapted version of the scale was applied by the researcher first and the participants were later asked to fill up the Beck Depression Inventory II (BDI-II).

Results: Content validity of the adapted C-SSRS Bangla version was 0.97. Internal consistency measured by Cronbach's alpha for severity of suicidal ideation, intensity of suicidal ideation and suicidal behavior subscales found were 0.585, 0.720 and 0.732 respectively. Principal component analysis with varimax rotation identified 3 factors for severity of suicidal ideational subscale, 2 factors for suicidal intensity subscale and 2 factors for suicidal behavior subscale. Convergent validity assessed by correlating subscales of C-SSRS Bangla with BDI-II item 9 showed statistically significant positive correlation. Similarly, the subscales showed weak correlation with unrelated items of BDI-II in respect to divergent validity. As per sensitivity and specificity, C-SSRS can predict an actual suicide attempt with 92.9% sensitivity and 40% specificity for past three months period and with 94.4% sensitivity and 81.3% specificity for a lifetime event.

Conclusions: C-SSRS Bangla Lifetime/Recent Clinical version is a valid, reliable and culturally appropriate instrument for use in clinical contexts and future research that could lead to delivery of better services for adolescents and adults with suicidal behavior.

Biography:

Dr. Mahabuba Rahman is currently pursuing her degree of Doctor of Medicine (MD) in Child and Adolescent Psychiatry under the residency program of Bangabandhu Sheikh Mujib Medical University, Dhaka, Bangladesh. She passed her MBBS in the year 2015 from Ad-Din Women's Medical College, Dhaka.

Oral Presentation (OP2)

◆ Levels of insight in child and adolescent with obsessive-compulsive disorder: a cross sectional study

Dr. Munim Reza, MD Phase B Resident (Child & Adolescent Psychiatry), BSMMU



Abstract:

Background: Obsessive-compulsive disorder (OCD) is a chronic disabling disorder that affects 1.9-3.3% of children and adolescents. It has negative impacts on patients' own lives and also on their families. Many children and adolescents with OCD have poor insight into their illness. These children and adolescents have more severe forms of disorder, are more difficult to treat, and warrant special management plans.

Objectives: Despite significance, insight is relatively unexplored in child and adolescent population in Bangladesh. So, this study aimed to assess insight and identify the correlates of insight in child and adolescent with OCD.

Methods: Forty-five 6-17 years old child and adolescent diagnosed with OCD were included in this study. The study was conducted in the OCD clinic of the Department of Psychiatry at Bangabandhu Sheikh Mujib Medical University (BSMMU). The 11th Item of the Children's Yale-Brown Obsessive-Compulsive (CY-BOCS) Scale was used to measure insight levels. The severity of OCD and symptoms were identified by using severity items and the symptom checklist of CY-BOCS. After assessing levels of insight, poor insight patients were compared with good insight concerning severity, symptoms, clinical characteristics, and socio-demographic profile. The relationship of poor insight with these variables was also determined.

Result: Among the 45 participants, poor insight was found in 17 (37.8%) and good insight was present in 28 (62.2%) cases. The poor insight group exhibited more severe obsessions and compulsions. They had an early age of onset, more duration of illness, and longer duration of untreated illness. Contamination obsession and cleaning compulsion were associated with poor insight. Regression analysis retained the severity of obsession as a predictor of poor insight. No significant difference in age, gender, and academic qualification was found between poor and good insight.

Conclusions: Correlates of poor insight suggest insight is a significant factor in child and adolescent with OCD. Therefore, clinicians need to assess insight levels routinely while planning the management of these patients. To generate more generalizable evidence regarding insight in these patients, large-scale studies are required.

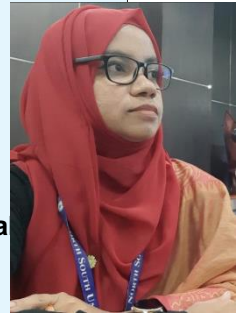
Biography:

Dr. Munim is a passionate psychiatry resident currently pursuing advanced training in child and adolescent psychiatry at BSMMU. He is committed to providing comprehensive and compassionate care to those struggling with mental health challenges. He holds an MBBS from SZMC. Dr. Munim has a particular interest in childhood development and anxiety-related disorders. With a focus on evidence-based practice and continuous learning, research, and advocacy, Dr. Munim is dedicated to making a positive change in the lives of individuals facing mental health issues.

Oral Presentation (OP2)

◆ Investigating the Role of Family Therapy in Addressing Adolescent Crisis: Qualitative Case Study Integrating Multiple Therapeutic Strategies

Niger Sultana, Family Therapy Practitioner and Student Counselor,
Department of Educational and Counseling Psychology, University of Dhaka



Abstract: This research presents a detailed qualitative case study exploring the efficacy of family therapy in mitigating adolescent crises, which encompass a range of emotional and behavioral challenges, including anxiety symptoms. Employing a diverse set of therapeutic strategies such as Structural Family Therapy's boundary-making, Cognitive Behavioral Family Therapy's behavioral contracts, Complimenting, Communication Improvement Strategies, and Solution-Focused Family Therapy's 'miracle question,' the study identifies and rigorously examines key familial elements. These include the absence of quality time, problematic communication patterns, and less-than-optimal parenting practices, all significant contributors to the adolescent crisis. Interventions are designed to enhance familial insight and improve communication methodologies, demonstrating measurable efficacy through observed cognitive and behavioral shifts within the family unit. In conclusion, the study underscores therapists' pivotal role in instigating constructive changes in familial dynamics through a multi-strategic approach. The research offers invaluable insights into the comprehensive, integrated therapeutic methodologies required for effectively addressing the complexities of adolescent crises within a familial context.

Biography:

I'm Niger Sultana, did my graduation in Psychology and Post-Graduation in Educational Psychology, Department of Educational and Counselling Psychology from University of Dhaka. From the last 6 years I'm working in mental health sector. Mostly I work with adolescents, adults and also with their family. In this purpose I took training in Systemic family and Couple therapy 101, Multilayer systemic training on Family and couple therapy, Systemic concepts from international trainer. Also completed training on Transactional Analysis 101, Cognitive behavior Therapy, Play Therapy. Moreover, I'm a certified master trainer of Addressing mental health of secondary level students of Bangladesh.

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November 14 & 15, 2023

16th Annual Conference & General Meeting

Bangladesh Association for Child & Adolescent Mental Health (BACAMH)

Theme: Child & Adolescent Mental Health: Focus on Family



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