

towards chronicity of this disorder leading to a better quality of life in these patients.

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#### EV840

### Koro syndrome in an obsessive-compulsive disorder patient

L. Silva<sup>1</sup>, C. Raposo-Lima<sup>2</sup>, C. Soares<sup>1,2</sup>, J.J. Cerqueira<sup>2</sup>, P. Morgado<sup>1,2,\*</sup>

<sup>1</sup> Hospital de Braga, Departamento de Psiquiatria e Saúde Mental, Braga, Portugal

<sup>2</sup> Life and Health Sciences Research Institute ICVS, University of Minho, Braga, Portugal

\* Corresponding author.

**Introduction** Koro syndrome is a culturally related disorder characterized by intense anxiety that the penis (vulva or nipples in females) is shrinking or retracting and will recede into the body. Usually it occurs in epidemics in Southeastern Asia, being extremely rare in western countries. The condition is more common in males and is classified within Obsessive Compulsive and Related Disorders.

**Case report** A 27-year-old single man was referred to the psychiatric department. By the age of 23, he began worrying that his penis was shrinking and retracting into the abdomen. He described these thoughts as intrusive, ridiculous and repetitive. During the first months the thoughts were not very disturbing but he progressively developed an urge to verify the length of his penis several times a day. To diminish the anxiety provoked by the obsessive doubts on penis length, he started to have repetitive thoughts and mental images about sexual acts, to consume pornography compulsively and to increase his masturbatory behaviors (from some times a week to several times a day). He described those thoughts and behaviors as unpleasant and uniquely driven to reduce anxiety provoked by obsessions.

He was prescribed fluvoxamine 200 mg/day and initiated cognitive behavioral therapy with good response. Y-BOCS score decreased from 30 at initial evaluation to 18 after 3 months of treatment.

**Conclusions** Koro syndrome is a very rare condition in psychiatry in western countries, usually presenting secondarily to other psychiatric disorders. Awareness of this diagnosis and knowledge on its management are critical to provide optimal care to patients.

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#### EV841

### Exploring the role of dissociation dimensions in obsessive compulsive disorder

A. Pozza<sup>1,\*</sup>, N. Giaquinta<sup>2</sup>, D. Dèttore<sup>3</sup>

<sup>1</sup> University of Florence, Department of Experimental and Clinical Medicine, Florence, Italy

<sup>2</sup> Centre of Cognitive and Behavioural Therapy CTCC, Centre of Cognitive and Behavioural Therapy CTCC, Florence, Italy

<sup>3</sup> University of Florence, Department of Health Sciences, Florence, Italy

\* Corresponding author.

**Introduction** In the last decade, accumulating evidence has been produced on the role of dissociation in Obsessive Compulsive Disorder (OCD). Understanding which dissociation dimensions are specific to OCD could suggest the integration of therapeutic strategies for dissociation in the treatment of patients with OCD.

**Objectives** The current study explored the role of dissociation in a sample of patients with OCD, patients with anxiety disorders and healthy controls with the aim to understand which dissociation dimensions could be specific to OCD.

**Method** One hundred seventy-one participants were included in the study (56% females, mean age = 35.96, SD = 12.61), of which 52 were patients with primary OCD, 59 were patients with Anxiety Disorders (AD), and 60 were healthy controls. The Dissociative Experiences Scale (DES), Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI), Yale-Brown Obsessive Compulsive Scale (Y-BOCS) were administered.

**Results** Patients with OCD had significantly higher dissociative amnesia symptoms than patients with AD and health controls ( $F = 6.08, P < 0.01$ ) and higher depersonalization/derealization symptoms than healthy controls but not than patients with AD. Patients with OCD did not report significantly higher dissociative absorption than healthy controls and patients with AD.

**Conclusions** Strategies targeting dissociative amnesia and depersonalization/derealization symptoms in OCD are discussed. Future studies should examine which OCD subtypes are more strongly associated to dissociation dimensions.

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#### EV842

### Mindfulness skills deficits in pathological skin picking behaviours

A. Pozza<sup>1,\*</sup>, D. Dèttore<sup>2</sup>

<sup>1</sup> University of Florence, Department of Experimental and Clinical Medicine, Florence, Italy

<sup>2</sup> University of Florence, Department of Health Sciences, Florence, Italy

\* Corresponding author.

**Introduction** Pathological Skin Picking (SP) is a psychiatric condition with a 2–5% prevalence in the community and consists of repetitive picking behaviours associated to marked distress, which can cause significant skin damage. Research has evidenced a Focused SP subtype, typically occurring in response to negative emotions, an Automatic subtype, occurring without awareness during activities not related to the picking behavior, and a Mixed one. Mindfulness skills have been studied as a protective factor involved in the treatment of several psychiatric disorders. Studying Mindfulness deficits in SP might help to identify interventions tailored for specific subtypes of SP behaviours.

**Objectives** The current study examined the relationship between Mindfulness skills and pathological SP behaviours.

**Aims** The study aimed to investigate whether Mindfulness skills deficits uniquely predicted SP subtypes behaviours after controlling for general distress in a community sample.

**Methods** Ninety-seven community individuals (mean age = 39.71, SD = 16.37, 59% females) completed measures of SP, Mindfulness skills and general distress (anxiety and depression).

**Results** Lower Mindfulness skills of Describing Internal Experiences ( $B = -0.12, P < 0.05$ ) and higher anxiety ( $B = 0.08, P < 0.05$ ) predicted more severe Automatic SP. Lower Mindfulness skills of Non-judging Inner Experiences ( $B = -0.12, P < 0.05$ ), higher anxiety ( $B = -0.12, P < 0.05$ ) and higher depression ( $B = -0.12, P < 0.05$ ) predicted more severe Mixed SP. Focused SP was not associated to Mindfulness skills and general distress.

**Conclusions** Mindfulness skills deficits could be associated to Automatic and Mixed but not Focused SP. Future studies should investigate whether Mindfulness programs are effective for individuals reporting Automatic or Mixed SP behaviours.

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