

## EPP0487

**Borderline personality disorder and attention deficit/hyperactivity disorder in adolescence: overlap and differences in a clinical setting**O. F. Akca<sup>1\*</sup>, K. Wall<sup>2</sup> and C. Sharp<sup>2</sup><sup>1</sup>Child and Adolescent Psychiatry, Necmettin Erbakan University Meram School of Medicine, Konya, Türkiye and <sup>2</sup>Psychology, University of Houston, Houston, TX, United States

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**Introduction:** With increased consensus regarding the validity and reliability of diagnosing Borderline Personality Disorder (BPD) in adolescents, clinicians express concern over the distinction between BPD and Attention-Deficit/Hyperactivity Disorder (ADHD), and its co-morbidity in clinical settings.

**Objectives:** The goal of this study was to evaluate differences between BPD, ADHD and BPD + ADHD in terms of co-morbid psychiatric disorders and a range of self-reported behavioral problems in adolescents.

**Methods:** Our sample consisted of N = 550 inpatient adolescents with behavioral and emotional disorders that have not responded to prior intervention. We took a person-centered approach (for increase clinical relevance) and compared adolescents with ADHD, BPD and ADHD+BPD in terms of co-occurring psychiatric disorders and behavioral problems. We performed a regression analysis to test whether BPD symptoms make an incremental contribution to the prediction of psychiatric symptoms over ADHD symptoms.

**Results:** The severity of almost all co-occurring disorders, aggression, self-harm, suicidal thoughts, and substance use, were higher in the ADHD+BPD group. Borderline symptoms made an incremental contribution to the prediction of psychiatric symptoms beyond the contribution of ADHD.

**Conclusions:** The findings of this study demonstrated that ADHD and BPD have different psychiatric symptomatology. In addition, subjects who meet criteria for both the BPD and ADHD diagnoses may have more severe psychiatric and behavioral problems compared to individuals with only ADHD or BPD.

**Disclosure of Interest:** None Declared

## EPP0488

**Divergent Mentalization Types in Adolescent Borderline Personality Disorder and Attention Deficit/Hyperactivity Disorder**O. F. Akca<sup>1\*</sup>, K. Wall<sup>2</sup> and C. Sharp<sup>2</sup><sup>1</sup>Child and Adolescent Psychiatry, Necmettin Erbakan University Meram School of Medicine, Konya, Türkiye and <sup>2</sup>Psychology, University of Houston, Houston, TX, United States

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**Introduction:** Attention Deficit/Hyperactivity Disorder (ADHD) and Borderline Personality Disorder (BPD) have several similarities and it is difficult to distinguish these disorders in adolescents.

**Objectives:** We aimed to identify the unique correlates of mentalization abilities that may distinguish these two disorders, and to

investigate the mentalization abilities of adolescents with ADHD, BPD and ADHD+BPD in an inpatient sample (n=550) to determine the effect of co-morbidity on mentalization abilities.

**Methods:** We have explored the relationship between Child Eye Test (CET) scores, Movie for the Assessment of Social Cognition (MASC) subscales, and ADHD and BPD symptoms in adolescent inpatients. In addition, we compared ADHD, BPD and ADHD+BPD groups in terms of their mentalization abilities.

**Results:** Correct MASC scores were negatively associated with both ADHD and BPD symptoms in girls, and negatively associated with ADHD symptoms in boys. In addition, hypermentalization scores were associated with BPD symptoms in girls, and hypomentalization and no mentalization scores were associated with ADHD symptoms in girls. CET scores were negatively associated with ADHD symptoms in girls, but no relations with BPD were found. Group comparisons revealed no significant difference among groups.

**Conclusions:** We found that while ADHD symptoms are related to hypomentalization, BPD symptoms are rather related to hypermentalization. We believe that these findings make significant contributions to literature aimed at understanding the differences between two disorders which have great commonalities in terms of clinical appearance and developmental course.

**Disclosure of Interest:** None Declared

## EPP0489

**Socially Aversive Personality and the symptoms of Body Dysmorphic Disorder in the Korean Young Adult population**S. Han<sup>1\*</sup> and H.-S. Chee<sup>1,2</sup><sup>1</sup>Psychiatry, Chungnam National University Hospital and <sup>2</sup>Institute of Brain Research, Chungnam National University, Daejeon, Korea, Republic Of

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**Introduction:** Body dysmorphic disorder (BDD) is defined in DSM5 as a preoccupation with one or more perceived defects or flaws in physical appearance causing significant distress or impairment in social and occupational functioning. Despite many studies on mental health disorders related to BDD, the diagnosis is still frequently overlooked.

**Objectives:** Previous studies have examined the general personality characteristics of BDD. The objective of this study is to find out how socially aversive personality traits are related.

**Methods:** Total of 86 mentally and physically healthy adults participated. BDD was assessed by BDDE-SR, and aversive personality was assessed by Short Dark Triad (SD3: Machiavellianism, narcissism, psychopathy), Assessment of Sadistic Personality (ASP), and paranoid (PAR), borderline (BOR), and antisocial (ANT) features of the clinical subscales of Personality Assessment Inventory (PAI). Correlations between the reported scores were investigated using Pearson's and regression was performed on relevant scales.

**Results:** Thirty seven males and 49 females (mean age 23.8 years) showed no statistically significant difference in total BDDE-SR was reported based on sex (p=0.18) or BMI (underweight, normal, overweight, p=0.236). BDDE-SR, SD3 and ASP were not statistically correlated, but all of the subscales of PAR (PAR-H, PAR-P, PAR-R), BOR (BOR-A, BOR-I, BOR-N, BOR-S) and ANT (ANT-A, ANT-E,