

P-560 - EATING DISORDERS AND AMENORRHEA: PSYCHOPATHOLOGICAL AND ENDOCRINOLOGICAL CORRELATIONS

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Hypothalamic amenorrhea is one of the necessary criteria for a diagnosis of anorexia nervosa (AN) and has been interpreted as secondary to weight loss rather than to a primitive hypothalamic dysfunction. According to our experience, amenorrhea may occur in normal-weight subjects with eating disorders as well as it may persist in subjects with AN despite of weight recovery. Amenorrhea can be also present in women without AN affected by functional hypothalamic amenorrhea (FHA). The aim of this study is to define if psychopathological factors can play a role in the amenorrhea together with hormones and/or leptin and if there are psychopathological and/or endocrinological correlations between FHA and AN.

Our sample included 20 subjects with AN, 15 with FHA and 20 eumenorrhoeic controls. All subjects underwent BMI, endocrine (17 β estradiol, IGF1, TSH, FT3, FT4, basal and after GnRH stimulation of FSH and LH, leptin) and psychiatric (clinical interview, EDI2, BUT, TAS) investigations.

Hormonal profile resulted in a decreased gonadic function in both amenorrhoeic groups. "Low T3 syndrome" was only present in AN. Low leptin levels were BMI-related. Both AN and FHA groups had some impaired psychopathological functions such as low interoceptive awareness and high level of alexitimia even if AN patients showed a more severe psychopathological profile.

Our data seem to confirm an impaired ability in cognitive regulation of high emotional levels in FHA and AN patients.