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EV0438

An expressive group approach to borderline personality disorder in patients with bulimia nervosa: A clinical case

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Introduction It is widely known comorbid Bulimia Nervosa (BN) with Borderline personality disorders (BPD). This is associated with worse prognosis and resistance to pharmacological and psychotherapeutic treatments. In integrated treatment, both disorders are addressed, not being frequent psychotherapy groups that address only the personality traits. Some studies have proposed the brain basis of psychodrama intervention in both pathologies.

Objectives To highlight the clinical effectiveness of adding a non-verbal orientation (psychodrama) to the treatment of BN patients; to specifically address personality traits, by presenting a clinical case. We rely on studies.

Methods Clinical case: 42-year-old woman patient with BN (DSM-5) severe degree, BITE: Symptoms scale = 28; S. Severity = 13; and BPD (7 DSM-V); MCMI-III: BPD = 115 She is incorporated into a day hospital with integrated and multidisciplinary approach: psychotropic drugs, individual, group and family psychotherapy. This patient is added to an open psychodrama group; where he works exclusively personality pathology, during one year.

Results Improvement was observed in BN (she switched to intermediate grade); BITE: Symptom scale = 23, S. Severity = 8; also improves BPD criteria of DSM-V = 4 (minimum = 5) MCMI-III: BPD = 104.

Conclusions (1) Psychodrama psychotherapy groups to treat Bulimia and BPD could provide an added clinical improvement in both pathologies.

(2) Insufficient RCTs compared to other models of psychotherapy (mentalizing, interpersonal, dialectical behavior) do not allow to speak even scientific evidence of psychodrama.

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EV0439

A cognitive and behavioural group therapy for binge eating disorder: An original 12 sessions design

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The Binge Eating Disorder (BED) consists in binge eating with a loss of control and guilty feeling. Weigh excessive preoccupation, psychiatric comorbidities and psychosocial impairment are associated to BED. BED prevalence is 3 to 5%, which is the more frequent eating disorder. The efficacy of CBT is well-known with several publications.

Method We have proposed 12 sessions of 1.30 hours for a 6 to 8 patients group, managed by a psychiatrist trained to CBT. Each session approaches a different topic (eating behavioural,

self-esteem, problem resolution, stigmatization, emotion coping, cognitive therapy. . .).

Assessment Patients are evaluated before and after therapy with Eating Disorder Inventory version 2 and Rathus Scale for self-esteem. Thirty patients were included.

Results Patients improve eating behavioural and other topics like self-esteem, social functioning, problem resolution and emotion coping. It appears that 12 sessions group CBT could be effective with patients who suffer of BED. Others studies are needed to evaluate the long-term outcome.

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EV0440

Avoiding refeeding syndrome in anorexia nervosa

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The term refeeding syndrome has been used to describe the adverse consequences that can occur in all malnourished patients in the early stages of nutrition repletion whether the method of refeeding is oral, enteral or parenteral. Those consequences include acute thiamine deficiency resulting in Wernicke's encephalopathy and Korsakoff syndrome, with the potential for permanent cognitive impairment; hypophosphatemia, hypokalemia, hypomagnesemia and fluid overload resulting in cardiac failure. Adaptive changes in metabolism occur during a period of starvation or fasting: levels of glucose fall within 24 to 72 hours, as response, glucagon levels rise and insulin concentrations decrease. Glucose levels are maintained by glycogenolysis at first and gluconeogenesis latter. The reintroduction of nutrition leads to a switch from fat to carbohydrate metabolism and an increase of insulin concentration. Insulin stimulates the movement of potassium, phosphate, and magnesium into the cell leading to its depletion in extracellular compartment. Reactivation of carbohydrate metabolism increases degradation of thiamine, a cofactor required for cellular enzymatic reactions in Krebs's cycle. Deficiency in all these nutrients can then occur. Patients with anorexia nervosa are at risk of suffering from refeeding syndrome. This psychiatric disorder causes potentially life-threatening, physical complications and has the highest mortality rate among psychiatric disorders. The purpose of this review is to clarify recommendations for prevention and treatment of refeeding syndrome in anorexia nervosa.

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EV0441

Merycism – A case report about rumination syndrome

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Introduction Rumination is a common phenomenon among ruminant animals but in humans, it is always regarded as a symptom indicative of abnormal function of the upper gastrointestinal track. It is characterized by recurrent regurgitation of recently ingested food into the mouth. This syndrome was previously described in children and adults with mental retardation, but this entity is becoming increasingly recognized in children, adolescents and adults with normal mental capacity.

Objectives/aims The authors describe a clinical case of a 51-year-old woman with rumination syndrome and bulimia nervosa.

Methods A detailed report of the clinical case was made as well as a literature review of articles published in Pubmed/Medline on the topic “Rumination syndrome” and “Merycism”.

Results The authors describe a clinical case of a 51-year-old woman who began ruminative behavior when she was 10 years old, describing the regurgitation of the swallowed food back to her mouth shortly after eating and the re-chewing of it. She states that the regurgitated food tastes the same as when she ate it and she denies any pleasure associated with this behavior. When she was 17 years old, by the time she was pregnant, she started bulimic behavior and, as the rumination, it never ceased. Her medical history is significant for chronic gastritis and type 2 diabetes mellitus.

Conclusions Although rare, merycism is an entity in the clinical practice of eating disorders. With this work, the authors share this case report as well as information concerning this topic.

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EV0442

Non-invasive brain stimulation treatment in a group of adolescents with anorexia

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Introduction Anorexia nervosa (AN) is characterized eating behaviors and body image disturbances. Given poor treatment outcomes are available for AN, treatment innovations are urgently needed. Recently, non-invasive neuromodulation tools have suggested having potential for reducing AN symptomatology targeting brain alterations.

Objectives The objective was to verify whether an excitatory transcranial direct current stimulation (tDCS) over the left prefrontal cortex may aid in altering/resetting inter-hemispheric balance in AN patients, re-establishing control over eating behaviors.

Aims Research is aimed to evaluate the potential of tDCS treatment in determining a more rapid improvement compared to classical treatments in adolescents with AN.

Methods Twenty-two adolescents with AN, underwent the treatment as usual (AU) plus the tDCS treatment (TDCS+AU: $n=8$, age $M 13.7 \pm 1.9$ years) or a family therapy (FT+AU: $n=14$, age $M 15.1 \pm 1.75$ years), for six weeks. Psychopathological scales (EDI-III, EAT 26, BUT, MASC, CDI) and anthropometric indicator of nutritional status (BMI) were assessed before and after treatment.

Results BMI improved only in the TDCS+AU group ($P<0.01$). Mean BMI percentage of improvement was $14.43\% \pm 10.8$ in the TDCS+AU and $4.83\% \pm 5.4$ in the FT+AU. Both groups improved in the total scores of the EDI, EAT-26, MASC and CDI scales (all $P<0.01$).

Conclusions tDCS treatment improved BMI values more than classical treatment and determined comparable to the classical treatment improvement in the psychopathological scales. This results may be an important starting point to further explore the beneficial effect of brain based treatments for AN.

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EV0443

Body Image in Bariatric surgery candidates

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Introduction Body image is a multidimensional concept that has assumed a significant role in eating disorders in which affective and perceptual distortions have been documented. Obesity is not a psychiatric disorder according to DSM-5 but several studies highlighted the presence of body image diseases in obesity.

Objectives The aim of this work is to evaluate the presence of body uneasiness in obese seeking for Bariatric surgery and to correlate it with psychopathological symptoms, psychosocial and anamnestic variables.

Methods From June 2014 to June 2016, we enrolled 537 Bariatric surgery candidates. Body image was investigated using the Body Uneasiness Test (BUT-A), a 34-item self-report questionnaire which measures weight phobia (WP), body image concerns (BIC), avoidance (A), compulsive self-monitoring (CSM), detachment and depersonalization (D). Psychopathological symptoms and personality traits have been evaluated using SCL90R and MMPI-2.

Results Descriptive analyzes showed that BUT subscales were altered in most of our sample. Correlations of Pearson underlined significant associations between BUT subscales and SCL90R subscales. No correlation was found between BMI, marital status and BUT scores, while young, female and unemployed people had more difficulties with body.

Conclusions Our data highlight the presence of considerable body uneasiness in obese, correlated with the severity of psychiatric symptoms but independent from the severity of obesity. This seems to reflect the mind-body split detected both in obesity and in eating disorders. Therefore, a multidisciplinary integrated approach including psychological work on cognitive, emotional and perceptual aspects of body image will help patients to improve coping with corporeal changes achieved through surgery.

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EV0444

Sex-specific issues in eating disorders: A clinical and psychopathological investigation

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Introduction Gender is crucial in many aspects of life, including attitude towards body image perception. Although the well-known female preponderance, recent studies demonstrate an increasing Eating Disorders (EDs) incidence in males but scant literature attention.

Aims This study aims to highlight the growing phenomenon of EDs in males and shed light on sex-related clinical features and psychiatric co-morbidities.

Method Out of 280 persons aged 18–74, consecutively referred to Bologna's outpatients EDs clinic, 267 were included in this retrospective observational study.