

## EPP0825

**Alexithymic traits in adolescents with Anorexia Nervosa**

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**Introduction:** Alexithymia is a construct which has been described in persons under the autistic spectrum. Besides Autistic Spectrum Disorders, alexithymia nowadays is highly correlated with several psychiatric disorders, among them being Eating Disorders. Several studies suggested a “cognitive-affective” division in the inner experience of patients with Anorexia Nervosa, because of their difficulty in describing, identifying and recognising their own emotions as well as others

**Objectives:** This study aims to identify how many adolescents diagnosed with Anorexia Nervosa meet the characteristics of alexithymic personality traits and in which domain of these traits they had the most struggles with.

**Methods:** The study lot includes 34 adolescents diagnosed with Anorexia Nervosa evaluated by a self report survey: Online Alexithymia Questionnaire-G2 (OAQ-G2). The cut-off scores are: 113 and above - correlated with alexithymia, 95-112 - correlated with possible alexithymia and under 94 - insignificant clinical score. We analyzed the result of every subcategory of the questionnaire in order to determine whether there is an area affected more than others.

**Results:** The sample included 34 patients, female to male ratio 31:3, evaluated in the Department of Child and Adolescent Psychiatry, “Prof. Dr. Alexandru Obregia” Psychiatry Hospital. 29,41% had clinically semnificative scores for alexithymic traits, while 52,94% scored for possibile alexithymia according to the OAQ-G2.

**Conclusions:** In 82,35% of patients from the lot we identified alexithymic personality traits. The F1 subcategory (difficulty identifying feelings) and F5a (problematic interpersonal process) were the ones that distinguished the alexithymic group from the possible alexithymic one.

**Disclosure:** No significant relationships.

**Keywords:** Anorexia nervosa; alexithymia; eating disorder; adolescence

## EPP0824

**ADHD in a patient with eating disorder. Case report**

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**Introduction:** 15-year-old female referred to outpatient unit after COVID lockdown for binge eating and purging with depressive symptoms and anxiety.

**Objectives:** To show the importance of a correct diagnosis in an impulsive patient with eating disorder

**Methods:** case report and literature review

**Results:** The patient presents emotional instability with interpersonal difficulties with high fear of rejection. She suffered from fear of gaining weight and desires to lose weight with rejection of her body image. Fluoxetine and lorazepam are started together with low doses of olanzapine. During the follow up she presented a worsening of mood, onset of self-injuries and an episode of suicidal attempt. A biographical examination was performed, expressing a feeling of academic failure with difficulty concentrating and performing simple tasks. As a child she is described as impulsive, with frequent arguments with classmates. CPT III was performed with a high probability of ADHD. Treatment was started with lisdexamfetamine up to 50 mg with good tolerance. From the beginning of the treatment the patient expressed a feeling of improvement in the control of emotions as well as in the management of her impulsivity. There was an improvement in her academic performance with a decrease in self-injury episodes. The patient was able to express improvement in the sense of incapacity she felt.

**Conclusions:** This case shows how marked emotional dysregulation and impulsive symptoms improves after diagnosis and subsequent treatment of ADHD, also improving eating symptoms. ADHD is present in eating disorders, especially in those with impulse dyscontrol such as binge eating disorder or bulimia nervosa.

**Disclosure:** No significant relationships.

**Keywords:** ADHD; eating disorder; impulsivity; dysregulation

## EPP0825

**The impact of nasogastric tube feeding on Drive for Thinness and Body Dissatisfaction in children and adolescents with Anorexia Nervosa**

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**Introduction:** The use of nasogastric-tube feeding (NGT) in the treatment of Anorexia Nervosa (AN) in children and adolescents is recommended by current guidelines. Nonetheless, the literature lacks studies assessing prognostic factors for modifications of AN-specific psychopathology treated with NGT.

**Objectives:** To assess potential prognostic affecting improvement in AN-specific psychopathology in children and adolescents hospitalized for AN, treated with NGT.

**Methods:** Retrospective study assessing young inpatients with AN, treated with NGT. Considered outcomes (admission vs discharge) were AN-specific psychopathology (Eating Disorder Inventory-3 (EDI-3): Drive for Thinness (DT); Body Dissatisfaction (BD); Eating-Disorders Risk (EDRC)) and body-mass index (BMI). Considered potential predictors were demographics, duration of untreated illness (DUI), severity (admission BMI), diagnoses, early

vs late (0-7 vs 8+ days after admission) start of NGT, drugs). Models for specific contributions of predictors related to outcomes were assessed with analysis of covariance (ANCOVA).

**Results:** Fifty-three inpatients ( $F=53$ , mean age  $15.1 \pm 2.0$  years) were enrolled. Both higher DT ( $F(1,22)=15.07$ ,  $p<0.001$ ) and BD improvement ( $F(1,22)=7.73$ ,  $p=0.011$ ) were predicted by lower admission BMI. Higher BMI improvement was predicted by lower admission BMI ( $F(1,47)=10.39$ ,  $p<0.001$ ) and age ( $F(1,47)=6.12$ ,  $p=0.011$ ). AN subtypes, comorbidities, antidepressants, and different antipsychotics did not predict any outcome.

**Conclusions:** In this study, greater improvement in AN-specific psychopathology (DT and BD) and weight in patients treated with NGT was predicted by lower admission BMI. These results suggest that young patients with greater severity may highly benefit from NGT. These findings, if confirmed in wider and controlled samples, could help in optimizing the treatment with NGT in young inpatients with AN.

**Disclosure:** No significant relationships.

**Keywords:** Anorexia nervosa; children and adolescents; Nasogastric tube feeding

## EPP0826

### Impact of COVID19 Lockdown in Eating Disorders: A Multicenter Collaborative International Study

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**Introduction:** COVID19 lockdown is having a significant impact on mental health, patients with eating disorders (ED) are particularly vulnerable.

**Objectives:** 1) To explore changes in eating and other psychological features due to confinement in patients with ED from various European and Asian countries; and 2) to assess differences related to diagnostic subtypes, age and geography.

**Methods:** The sample comprised 829 participants, diagnosed with an ED according to DSM-5 criteria from specialized ED units in Europe and Asia. Participants were assessed using the COVID19 Isolation Scale (CIES).

**Results:** On one hand, patients with Binge Eating Disorder experienced the highest impact on weight and ED symptoms due to confinement. Together with subjects diagnosed with Other Specified Feeding and Eating Disorders (OSFED), they also experienced a deterioration in general psychological state. On the other hand, there was less symptomatic impact on people with Bulimia Nervosa or Anorexia Nervosa and asian and younger individuals appeared to be more resilient in this situation.

**Conclusions:** The impact of COVID varied by cultural context and individual variation in age and form of illness. Services may need to target preventive measures and adapting therapeutic approaches for the most vulnerable patients.

**Disclosure:** No significant relationships.

**Keywords:** COVID Isolation Eating Scale (CIES); Eating Disorders; Covid-19; lockdown

## EPP0827

### Attention-deficit/hyperactivity disorder (ADHD) in adult obese patients referred to bariatric surgery

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**Introduction:** Attention-deficit/hyperactivity disorder (ADHD) is a neurodevelopmental condition characterized by symptoms of inattention, hyperactivity, and impulsivity, which only rarely remits in adulthood<sup>[1]</sup>. A positive association between ADHD and obesity has been repeatedly observed, especially in adult samples<sup>[2]</sup>. However, only a few studies investigated the prevalence and correlates of ADHD in obese patients seeking bariatric treatment<sup>[3,4]</sup>.

**Objectives:** Our study was aimed to examine the prevalence of probable ADHD comorbidity in a sample of obese patients referred for bariatric surgery. Secondly, we sought to characterize differences in eating behaviour between obese subjects with and without probable ADHD.

**Methods:** The study sample was composed of 110 adult obese patients ( $BMI \geq 30$  kg/m<sup>2</sup>) consecutively referred for bariatric surgery to the Obesity Center of the Endocrinology Unit in Pisa University Hospital between November 2010 and May 2012. Probable ADHD was identified using a recently developed screening scale based on items selected from Symptom Check-List-90-R (SCL-90-R)<sup>[5]</sup>. The extent of binge-eating/purging and night-eating behaviours were respectively estimated using the Bulimic Investigatory Test, Edinburgh (BITE)<sup>[6]</sup> and the Night-eating Questionnaire (NEQ)<sup>[7]</sup>. Wilcoxon test was used for statistical comparisons, with a significance level of  $p<0.05$  set for all tests.

**Results:** Probable ADHD was found in 14 subjects (12.7%, 95% CI=7.1-20.4%). Patients with probable ADHD showed significantly higher BITE symptom score ( $20.4 \pm 9.3$  vs.  $12.1 \pm 7.5$ ,  $r=0.31$ ,  $p=0.001$ ) and NEQ total score ( $16.1 \pm 9.2$  vs.  $9.5 \pm 3.9$ ,  $r=0.27$ ,  $p=0.005$ ).

**Conclusions:** ADHD is a relatively common comorbidity in obese patients seeking bariatric treatment, which is positively associated with disordered eating habits, such as binge-eating/purging and night-eating behaviours.

**Disclosure:** No significant relationships.

**Keywords:** Eating Disorders; obesity; adhd; bariatric surgery