

addiction and impulsivity relations biological rhythms differences and insomnia in university students.

**Method** One thousand and five hundred students planned to participate who studies in Konya Selcuk University central campus. Participants were to fill out the test during their classes under physician supervision. The volunteers completed a package of psychological instruments including the Morningness–Eveningness Questionnaire, Yale Food Addiction Scale, Insomnia Severity Index, and Barratt Impulsiveness Scale administered by two investigators in their classrooms.

**Results** In total, 1323 forms were suitable for statistical analysis. The mean age was 20.83, mean BMI was 22.02. Food addiction prevalence was 18.2%. Our study showed that association between the eveningness type and food addiction ( $P < 0.045$ ). Also, the eveningness type and insomnia were in positive correlation in impulsivity ( $P < 0.001$ ).

**Conclusion** This study has explored the association between eveningness type of biological rhythms, food addiction, insomnia and impulsivity.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0526

### Are low body weight and psychological symptoms associated with cognitive function in children and adolescents with anorexia nervosa?

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**Introduction** Despite an increasing focus on cognitive functions in eating disorders, only limited and contradictory knowledge regarding the relationship between cognitive functions and anorexia nervosa symptomatology currently exist.

**Objectives** The aim of this study was to investigate potential associations between cognitive functions and anorexia nervosa symptomatology in children and adolescents.

**Method** Eating disorder symptoms and cognitive functions were examined in this cross-sectional, multi-centre study. Diagnostic scores i.e. BMI, psychological symptoms, and global EDE-16 were stratified on cognitive function. Children and adolescents suffering from severe recent-onset anorexia nervosa ( $n = 94$ ) and healthy controls ( $n = 94$ ), between the age 10.6 and 17.9 years (mean age 14.9 years, SD 1.8), participated in the study. The patients were divided into two groups, respectively above and below the median of cognitive functions.

**Results** The study findings revealed that Global EDE score significantly increased with age ( $P = 0.002$ , CI 0.08–0.36). Besides this, no significant associations between low body weight or psychological symptoms and cognitive functions were found. However, a large variability in cognitive functions was found on all measure in patients with anorexia nervosa than healthy controls.

**Conclusion** While age seems to be significantly correlated to symptom burden the study results indicate that patients with anorexia nervosa is a much more heterogeneous group with regard to cognition than healthy controls. However, cognitive functions and anorexia nervosa symptomatology does not appear to be associated.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0527

### Comparative assessment of cognitive function and mood dynamics in patients with depression and eating disorders in the process of treatment

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Eating disorders of bulimic type are among the most common comorbidities with depression. The objective is to evaluate cognitive function and mood dynamics in patients with depression and eating disorders in pharmacotherapy. In total, 52 outpatients, who met criteria for "major depressive episode" (ICD-10), participated. The level of depression was estimated with Hamilton Depression rating scale (HAM-D) and cognitive function–Montreal Cognitive Assessment (MoCa). Sample was divided into two groups. Patients of group 1 also met criteria for eating disorder of bulimic type and patients of group 2 did not have any eating disorder. Treatment included standard doses of SSRI. Assessments were performed after 2, 4 and 8 weeks (D14, D30, D60). The level of HAM-D was significantly greater ( $P < 0.05$ ) in eating disorders group ( $16.75 \pm 2.83$  in group 1;  $13.04 \pm 1.93$  in group 2 at screening) and significance was preserved till D60 ( $9.39 \pm 2.54$  in group 1;  $6.32 \pm 1.27$  in group 2 at D60). Clinically significant antidepressive effect was revealed faster in group 2 (at D7) compared to group 1 (at D14). Overall score of MoCA was significantly lower ( $P < 0.05$ ) in eating disorders group ( $20.33 \pm 0.54$  in group 1;  $23.43 \pm 2.32$  in group 2 at screening) at all stages of treatment ( $23.39 \pm 0.78$  in group 1;  $26.96 \pm 3.27$  in group 2 at D60) and it reached normal range (25 and more) only in group 2 at D60. Significant change from screening was revealed at D30 at group 2 and at D60 at group 1.

**Conclusion** Eating disorder have an impact on SSRI treatment efficacy including antidepressive and procognitive effects. It is necessary to reveal eating disorders as a co-morbidity in patients with depression.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0528

### Is there an association between body uneasiness and aberrant salience in anorexic patients? A preliminary study

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The process whereby objects and representations come to be attention grabbing and capture thought and behaviour is called salience, and it is defined as aberrant when a significance is allocated to neutral stimuli. The Aberrant Salience Inventory (ASI) is a scale to measure aberrant salience, characterized by 29 dichotomic items. By now, a correlation between aberrant salience and eating disorders is unknown. Aim of this study is to evaluate an alteration of salience in patients with anorexia nervosa, to estimate the existence of a correlation between aberrant salience and the experience of body shape.

**Methods** Twenty-six female patients with AN (diagnosed using DSM-5) were enrolled at the Psychiatry Department of Florence. Psychopathological features were assessed at the time of enrollment using the following scales: SCL-90-R, BUT, EDE-Q. Salience alteration was assessed by the means of the ASI. Statistical analysis were realized using SPSS 20.0 with Spearman bivariate correlation. **Results** Mean age was (mean  $\pm$  SD)  $26.2 \pm 8.72$  and mean Body Mass Index (BMI)  $16.1 \pm 2.46$ . Global Severity Index (GSI), Positive Symptom Total (PST) and Positive Symptom Distress Symptom Index (PSDI) were estimated for BUT and SCL-90-R and compared to total value of ASI. Thus, we found a statistical significant ( $P < 0.05$ ) direct correlation between ASI and BUTpsdi and ASI and SCL-90-Rgsi (correlation coefficient of 0.446 and 0.398, respectively).

**Conclusion** In this study, we found a significant direct correlation between Aberrant Salience Inventory (ASI) values and one dimension of body uneasiness in anorexic patients. These preliminary data need further studies with a wider sample to confirm the above-mentioned data.

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#### EW0529

### Childhood emotional experiences and eating psychopathology: The mediational role of different emotion regulation processes

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Positive experiences from childhood have been consistently associated with well-being and with feelings of social safeness and connectedness. On the other hand, the lack of early experiences characterized by warmth, soothing and care may lead to the later experience of fearing to receive compassion from others, to the engagement in self-judgment, and may be associated with a large spectrum of psychopathology. The present study tested a model which hypothesized that the impact of early positive memories with family figures on the engagement in disordered eating is carried by the mechanisms of social safeness and connectedness with others, fears of receiving compassion from others, and self-judgment. The sample comprised 399 women, aged between 18 and 55 years old. The path model accounted for 33% of eating psychopathology's variance and showed excellent model fit indices. Results revealed that the impact of early affiliative memories with family figures on eating psychopathology was totally mediated by the mechanisms of social safeness, fears of compassion from others, and self-judgment. In fact, women who reported a lack of early memories of warmth and safeness with family figures seemed to present lower feelings of safeness and connectedness within

social relationships, higher tendency to fear receiving kindness and compassion from others, and more self-judgmental attitudes. These findings support the importance of developing intervention programs in the community, which target maladaptive emotion regulation processes (such as compassionate-based interventions) to promote mental health, especially in a context of early adverse experiences.

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#### EW0530

### How dissociation, temperament and character influence at the eating disorders

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**Objectives** Dissociation has been related to emotional dysregulation and eating psychopathology. Dissociation may interfere with the learning process, affecting at the therapy negatively. The aim of the study is to analyse if at the eating disorders (ED), dissociation is linked to temperamental traits or also to character traits, which are susceptible to be modulated during the therapeutic process.

**Methods** We studied 119 females that started an outpatient program for their ED. We used the Dissociative Experience Scale (DES), Temperament and Character Inventory (TCI), Eating Attitudes Test (EAT-40), and the State Trait Anxiety Inventory (STAI). We used multiple regression analysis.

**Results** Dissociation was associated with high scores on the EAT-40, even controlling the effect of anxiety traits, which also was related to dissociation. The temperament dimension "searching for novelty", has been related in an opposite way to the DES. Also, the "dimension of transcendence" "character and "self determination" influenced on the DES.

**Conclusions** This study confirms the importance of improving Self Determination levels at ED therapy, which influence on a lot of prognostic aspects, such as protecting from dissociation, which is related to anxiety and alimentary psychopathology and can interfere with the therapeutic progress.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EW0531

### Treatment in anorexia nervosa: The role of neuropsychological features in predicting response

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**Introduction** Neuropsychological impairments in anorexia nervosa (AN) have been considered both as putative risk factors and as a target for treatment. However, the role of neuropsychological variables as predictors of outcome is not clear.

**Aims** Our aim is to investigate the role of neuropsychological variables as predictors of response to treatment in a group of individuals affected by AN.

**Methods** The study sample consisted of 144 patients diagnosed with acute AN, according to the DSM-5 criteria, referred to the Eating Unit of the Hospital of Padova, Italy. All participants were assessed by means of a neuropsychological and clinical test battery