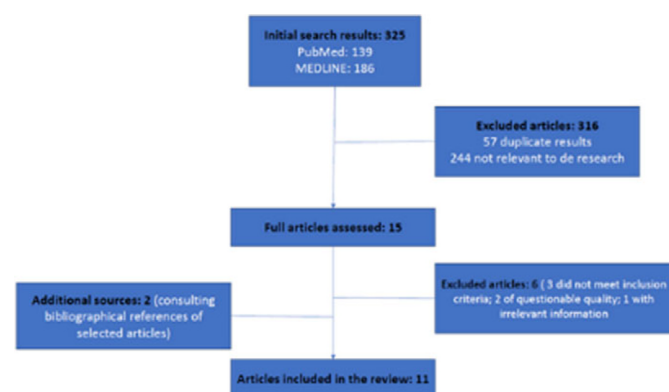


Image 1:



Conclusions: The final conclusions will be included in the full version of the systematic review, once all sociodemographic variables have been thoroughly evaluated. This detailed analysis will also assess the extent of these variables' involvement, along with how the different diagnostic criteria used may influence the prevalence of Borderline Personality Disorder (BPD) observed in the samples from the various countries included in the study.

Disclosure of Interest: None Declared

EPV1386

Navigating the Storm: Understanding Affective Instability and Its Implications

A. F. Reis¹

¹Psychiatry and Mental Health, Unidade Local de Saúde da Arrábida, Setúbal, Portugal

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Introduction: *Affective instability* (AI) is a psychophysiological symptom reported in many neurological and psychiatric conditions. It has assumed more relevance in the psychiatric literature as a criterion for borderline personality disorder (BPD). Although extensively clinically used, its definition remains vaguely defined, and it ends up being used interchangeably with *affective lability* or *emotional dysregulation*, and it is often mistaken for *mood lability*, as described in bipolar disorders. To accurately diagnose this symptom and document variations in emotional experiences, it is essential to identify the factors associated with AI.

Objectives: We aim to review the current definitions and conceptualizations of AI to provide more accurate use of the term.

Methods: Narrative literature review.

Results: Current definitions of AI highlight the oscillation of emotions, often described as a series of intense emotional highs and lows that can shift within hours or even minutes, making it challenging for individuals to maintain a stable emotional baseline, significantly affecting an individual's relationships, self-identity, and coping mechanisms. It is a complex construct, encompassing affective valence, affect amplitude, affective shifting with random patterning, reactivity thresholds to environmental triggers, and affective dyscontrolled modulation. Neurobiological research suggests that dysregulation in emotional processing areas of the brain,

such as the amygdala and prefrontal cortex, may contribute to these rapid emotional shifts.

Conclusions: AI is a multifaceted construct with significant implications for mental health. The current definitions and conceptualizations underscore the complexity of emotional regulation and the need for a holistic approach to understanding and treating individuals experiencing these emotional fluctuations. Continued research into the neurobiological, psychological, and environmental underpinnings of affective instability will enhance the understanding of this phenomenon and improve treatment strategies for affected individuals.

Disclosure of Interest: None Declared

EPV1388

Alexithymia is associated with submissive behavior in a public goods game

A. Carvallo¹, J. Gonzalez¹, V. V. Orozco¹, J. Hanna¹, J. A. Fernandez¹, J. Ayala¹, A. Barros¹, M. F. Aguirre¹, K. Arroyo², P. Campodonico^{3,4}, F. Munoz-Rubke⁵ and M. E. Riveros^{6,7*}

¹Facultad de Medicina CAS, Universidad del Desarrollo; ²Facultad de odontología y Ciencias de la Rehabilitación, Universidad San Sebastian;

³Centro de Química Médica, Universidad del Desarrollo; ⁴Facultad de Medicina UDD (FM, UDD), Instituto de Inovacion en Medicina (ICIM), Santiago; ⁵Instituto de Psicología, Universidad Austral de Chile, Puerto Montt; ⁶Centro de Fisiología celular e Integrativa, Universidad del Desarrollo and ⁷Facultad de Medicina (FM, UDD), Instituto de Inovacion en Medicina (ICIM), Santiago, Chile

*Corresponding author.

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Introduction: Alexithymia is a relatively stable personality construct that reflects the difficulty in distinguishing and describing one's own emotions along with a concrete and externally directed style of thinking. Alexithymia increases the risk of development and worsens the course of several psychiatric illnesses, such as depression or addiction. It is also associated with the development of eating disorders and psychosomatic illnesses. Additionally, it has a negative impact on the ability to regulate emotions and is also associated with a reduced empathic capacity, interpersonal problems and even violent behaviors. Interestingly, in intimate partner violence, it has been observed that alexithymia is associated with both exercising and receiving abuse. However, social behavior, in dynamics of cooperation within pairs and groups of several individuals, has not been studied much in relation to alexithymia.

Objectives: We evaluated the impact of alexithymia in social behavior in three aspects: generosity, trust and submission.

Methods: After completing an online survey that evaluated their levels of alexithymia using the TAS-20, as well as depression and loneliness, 67 participants (27 men), aged 19 to 46, attended our laboratory. There, after answering the PANAS survey, they played three economic games using tiles: the Dictator game, the Trust game, and the Public Goods game. Each participant played in a group of four, with three of the group members being confederates whose contributions were pre-established and consistent across all sessions and participants. In the Public Goods game, confederates initially contributed a significant percentage (80-95%) of their endowment in the first round, but in subsequent rounds, they drastically reduced their contributions to nearly nonexistent levels.

After playing all three games, the PANAS was reassessed. Finally, on the same day as the face-to-face session, participants completed a second online survey that assessed cognitive and emotional empathy, early life adversity, resilience and perceived stress.

Results: In the Public Goods game, the number of rounds in which participants contributed more than their initial contribution in the first round was used as a measure of submissive behavior. This variable correlated with the participants' level of alexithymia ($\beta=0.544$). Additionally, this same index was also negatively associated with empathy and positively related to reported loneliness. A similar pattern was observed between alexithymia and empathy ($\beta=-0.323$) and loneliness ($\beta=0.473$). In contrast, total contributions made in the Public Goods game, the Dictator game (generosity), and the Trust game did not correlate with alexithymia. **Conclusions:** Our results suggest that alexithymia is connected to greater submissive behavior in group interactions. It is possible that its link to reduced empathy and increased loneliness contributes to this behavior.

Disclosure of Interest: None Declared

EPV1389

Using the big five inventory to evaluate the personality traits of medical staff

N. Rmadi^{1*}, A. Hrairi¹, I. Ben Hnia¹, O. walha², N. Kotti¹, M. Hajjaji¹ and K. Jmal Hammami¹

¹Occupational medicine department, Hedi chaker university hospital, University of Sfax and ²familiy medicine department, University of Sfax, Sfax, Tunisia

*Corresponding author.

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Introduction: Personality traits are enduring and stable characteristics that reflect an individual's behaviour, thoughts and feelings. Research indicates that specific traits can affect not only the well-being of healthcare professionals but also their interactions with colleagues and patients.

Objectives: This study aims to assess the personality traits of healthcare professionals using the Big Five Inventory (BFI).

Methods: A descriptive cross-sectional study was conducted among healthcare personnel who consulted the department of occupational medicine of Hedi Chaker Hospital of Sfax to September 2024. The survey was conducted through a self-questionnaire that included sociodemographic data, lifestyles. We also used BFI which measures the Big Five personality traits through five key dimensions: extraversion, agreeableness, conscientiousness, neuroticism and openness.

Results: The study involved 41 consultants (12 men and 29 women) with an average age of 31.2 ± 7.4 years. An urban origin was identified in 87.8% of the cases. Medical staff scored 3.36 ± 0.52 for extraversion, 3.21 ± 0.56 for agreeableness, 3.22 ± 0.61 for conscientiousness, 3.01 ± 0.78 for neuroticism and 3.2 ± 0.65 for openness. A significant association was found between neuroticism and urban versus rural origin ($p=0.001$). Moreover, associations were found between BFI dimensions: agreeableness with extraversion ($p=0.007$, $r=0.41$) and openness ($p=0.002$, $r=0.46$).

Conclusions: This study highlights the importance of assessing personality traits among healthcare professionals. Understanding these personality dimensions can provide valuable insights for

improving workplace dynamics, enhancing team collaboration, and ultimately fostering better patient care outcomes.

Disclosure of Interest: None Declared

EPV1390

Investigating the Impact of Alexithymia and Dissociation on the Severity of Symptoms in Severe Personality Disorders

L. Ghidetti¹, S. Costantini², D. Salmaso³, M. Benassi¹, R. P. Sant'Angelo^{4*} and M. Pacetti³

¹Psychology, University of Bologna; ²Mental Health, Ausl Romagna, Cesena; ³Mental Health Department, Ausl Romagna, Forlì and ⁴Mental Health Department, Ausl Romagna, Cesena, Italy

*Corresponding author.

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Introduction: Severe personality disorders are characterized by deeply ingrained patterns of thought, behavior, and emotional functioning, along with impaired mental functioning in the areas of self-stability and identity formation. The challenges in interpersonal relationships and overall functioning result in a significant reduction in the capacity to adapt to social roles.

Objectives: In this context, the present study aims to explore the severity of symptoms (SPrDP) in correlation with alexithymia (TAS-20) and dissociation (DES II) in individuals under the care of the Department of Mental Health of Forlì-Cesena.

Methods: The sample was selected using the SCID PD (Structured Clinical Interview for DSM-5), followed by the administration of the following scales: SPrDP (Parma's Scale), TAS-20 (Toronto Alexithymia Scale), and DES II (Dissociative Experiences Scale). Multivariate analyses were applied, including non-parametric correlations (Spearman's Rho) between variables using SPSS software.

Results: The sample consists of 55 individuals ($F=38$; $M=17$), of whom 42 have borderline personality disorder (BPD), 3 have narcissistic personality disorder (NPD), 6 have histrionic personality disorder (HPD), 3 have obsessive-compulsive personality disorder (OCPD), and 1 has dependent personality disorder (DPD). The analysis did not reveal a significant correlation between SPrDP and the TAS-20 and DES II scales, although a trend was observed that could correspond to more compromised personality functioning in the presence of high scores on these scales. Furthermore, a statistically significant correlation was found between TAS-20 and DES II. Higher marginal means for TAS-20 were observed in individuals with OCPD. For DES II, the highest estimated marginal means were found in individuals with OCPD and BPD.

Conclusions: The symptom severity measured by SPrDP was not statistically significant in relation to TAS-20 and DES II. However, the presence of a trend between the scales suggests the possibility of further investigation with a larger sample. Additionally, the statistically significant correlation between alexithymia and dissociation may indicate that difficulties in identifying and managing intense emotions lead to the use of dissociative defense mechanisms. The higher average alexithymia scores in individuals with OCPD suggest a possible emotional rigidity with a tendency to control or suppress emotions. The frequency of dissociative symptoms observed in individuals with BPD and OCPD may indicate the centrality of alexithymia and dissociation in the impairment of emotional and relational functioning in severe personality disorders. Further studies are necessary.