

stress and psychiatric illness are factors known to reduce immune function and thus increase level of cytokines.

Aim: The purpose of the present study was to examine a possible raise in cytokines as measured by IL-6 and TNF- α in ED patients, further the aim was to analyze relations between cytokines and personality traits.

Methods: Female patients with eating disorders (N=28) recruited consecutively from an inpatient clinic, were compared to age-matched healthy females (N=12). Quantikine[®] HS, Human TNF- α /TNFSF1 was used to detect levels of TNF- α in patient and control sera whereas Quantikine[®] Human IL-6 immunoassay was used to estimate IL-6. Personality traits were measured by using the Karolinska Scales of Personality (KSP).

Results: A one-tailed t-test showed that the patient group had tendencies to increased levels of cytokines TNF- α ($t=-1.61, df=38, p=0.057$), while their mean IL-6 level was not higher than controls ($t=-1.19, df=38, p=0.12$). The correlation between TNF- α and IL-6 were non-significant ($r=-0.04$). Patients with high levels (1 SD above norm mean) of Monotony Avoidance ($t=2.34, df=22, p<0.02$), Verbal Aggression ($t=3.13, df=22, p<0.01$) and Irritability ($t=2.50, df=22, p<0.02$) displayed significantly higher levels of IL-6 than the other ED patients.

Conclusion: Results indicated a tendency of increased levels of cytokines in patients with EDs. Personality traits reflecting impulsivity and aggression were found to be related to high levels of cytokines in the present study.

P0332

Subthreshold eating disorder in child psychiatry

J. Balazs, J. Gadoros. *Vadaskert Child Psychiatric Hospital, Budapest, Hungary*

Aims: There are few data on the prevalence of subthreshold pediatric psychiatric disorders, when the child/adolescent doesn't qualify for any mental disorder according to the classification systems (Diagnostic and Statistical Manual of Mental Disorders Fourth Edition (DSM-IV) and International Classification of Mental and Behavioral Disorders 10th Edition (ICD-10)), however the symptoms cause difficulties in the everyday life of the child/adolescent. The aim of the present study was to estimate the prevalence of subthreshold eating disorders among hospitalized children.

Methods: We examined 106 hospitalized children/adolescents aged under 18 in the Vadaskert Child and Adolescent Psychiatric Hospital and Outpatient Clinic, Budapest, Hungary. Threshold (DSM-IV) and subthreshold disorders were evaluated with the Mini International Neuropsychiatric Interview Kid (M.I.N.I. Kid).

Results: There was no single child hospitalized due to threshold eating disorder during the study period, but 7.5% of them had the diagnoses of current subthreshold eating disorder. In all cases it was subthreshold bulimia nervosa. Subthreshold bulimia nervosa was always a comorbid condition with a threshold disorder.

Conclusion: Our findings indicate, that clinicians should think about the presence of subthreshold eating disorder as a comorbid condition among hospitalized children.

P0333

Temps-a scale in patients after surgery operation because of pathological obesity

A. Borkowska¹, M. Jaracz¹, W. Drozd¹, M. Tomaszewska¹, M. Wilkosc¹, N.K. Surya¹, S. Dabrowiecki², A. Tretyn⁴, H. Akiskal⁵, R. Junik³. ¹ *Clinical Neuropsychology Unit, Nicolaus Copernicus University Torun, Collegium Medicum, Bydgoszcz, Poland* ² *Department of Biology, NicDepartment of Endocrinology, Nicolaus Copernicus University Torun, Collegium Medicum, Bydgoszcz, Poland* ³ *Department of Endocrinology, Nicolaus Copernicus University Torun, Collegium Medicum, Bydgoszcz, Poland* ⁴ *Department of Surgery, Nicolaus Copernicus University Torun, Collegium Medicum, Bydgoszcz, Poland* ⁵ *International Mood Centre, Department of Psychiatry, University of California, la Jolla, CA, USA*

The purpose of this study was to assess the temperament and in patients with pathological obesity using computer version of TEMPS-A scale. Also the intensity of depressed symptoms using Beck Depression scale were used. The TEMPS-A scale is a self-evaluation measure to assess five affective temperaments: depressive, cyclothymic, hyperthymic, irritable and anxious. The polish version of the scale was used. 89 patients 52 female and 37 male) aged 18-56 years with BMI > 40 after operation with Mason method (VGB) because of pathological obesity.

The results obtained shows the highest prevalence of depressed symptoms in subjective assessment in investigated patients is high, the medium or serious intensity of depression was found in 50% patients. The results of TEMPS-A scale show the high prevalence of irritable and depressive temperament in investigated group. The comparison of the results obtained by male and female patients show highest prevalence of depressive and anxious temperament in women, while the irritable and hyperthymic temperament in men. The intensity of depressed symptoms in Beck scale were correlated with depressive temperament in female.

The results show that TEMPS-A scale may be useful tool for assessment of temperament in pathological obesity.

P0334

Eating attitudes of adolescent females

M. Burgic - Radmanovic¹, Z. Gavric², D. Strkic³. ¹ *Psychiatric Clinic, Clinical Center, Banja Luka, Bosnia-Herzegovina* ² *The Public Health Institute, Banja Luka, Bosnia-Herzegovina* ³ *Medical Faculty, Banja Luka, Bosnia-Herzegovina*

Introduction: Adolescence is a period of significant physical, emotional and intellectual changes, as well as changes in social roles, relations and expectations. Adolescent females, often preoccupied with physical appearance, express discontent with their figure, body weight and want to lose weight.

Objective: Our objective was to inquire eating attitudes among adolescent females.

Method: Sample was consisted of adolescent females, age of 16 - 17, first grade Economic and Medical Secondary School pupils. Survey questionnaire is self-esteem scale of eating disorders designed by the author. Response rate was 389 out of 419 (92.8%).

Results: Body Mass Index (BMI) less than 18.5 has 8.7 % female adolescents. More than half want to be thinner, while 1/3 of adolescents find themselves whether thin or obese. Forty-seven percent (47%) of adolescents exercise sometimes, 15.4% exercise often while 1/5 goes on a diet sometimes or regularly. About 43% adolescents are sometimes or often terrified about being overweight, while 60% sometimes or often lose weight. About 2/3 adolescents are not

satisfied with figure. One-half adolescents are terrified with increasing in weight.

Statistically significant number in both schools does not have control in eating ($p < 0.5$).

Conclusion: There is high level of discontent and dissatisfaction with figure among adolescent females.

Discussion: This research indicate necessary education of adolescents to help them in accepting healthier nutrition and lifestyle in an earlier period of life, also developing programs for prevention which will encourage youth in adopting healthy lifestyles and related behavior.

Key words: adolescent females, eating attitudes, eating disorders

P0335

Psychiatric comorbidity with night eating disorder

Y. Cengiz, O.K. Karamustafalioglu, S. Gonenli, B. Ozcelik, B. Bakim. *Sisli Etfal Teaching and Research Hospital, Psychiatry Clinic, Istanbul, Turkey*

Objective: purpose of the study to asses the relationship between psychiatric disorders and night eating syndrome.

Method: subjects were recruited from psychiatric outpatient clinic at The Sisli Etfal Teaching and Research Hospital ($n=384$). Night Eating Syndrome Questionnaire and Structured Clinical Interview for DSM-IV diagnosis (SCID) researchers version were used as screening tools.

Results: 304 patient were female (%79,2), 80 were male (%20,8). Mean age of patients were $37,5 \pm 13,7$.

Two hundred seven participants (%54) scored ≥ 20 on the Night Eating Syndrome Questionnaire. 168 of these were female, 39 were male.

Our sample was screened with SCID for psychiatric diagnosis and we found 51% depression (comorbid diagnosis also included); 13,5% bipolar disorder; 8,3% generalized anxiety disorder (GAD); 6,5% panic disorder; 4,7% obsessive compulsive disorder (OCD); 4,2% social phobia; 2,9 % adjustment disorder; 2,1% somatoform disorder, 1,6% schizophrenia; 0,5% eating disorders.

Statistically significant rates of bipolar disorder were found among patients diagnosed with NES ($p=0,037$). The relationship between NES and psychiatric disorders other than bipolar disorder were not statistically significant in our study.

Discussion: There are limited published data about psychiatric comorbidity with NES. These studies reported comorbidity with depression, substance use disorders and sleep disorders. In our study we found strong relationship between bipolarity and NES. Despite high rate of depression with NES in our study and in the literature, our findings didn't support the relationship between NES and depression.

P0336

Eating disorders: Twins studies

M.F. Pando, E. Benitez, C. Erausquin, M. Martin, M. Lazaro, A. Chinchilla. *Psychiatry Department, Ramon Y Cajal Hospital, Madrid, Spain*

The psychiatric morbidity – endogenous and exogenous psychoses, neurosis and abnormal personalities, psychosomatic diseases, addictions, sociopathies and so on – is studied mainly on first grade relatives in 6 cases of female patients affected with anorexia nervosa, 2

monozygotic twins; 2dizygotic twin and 2 cases of anorexia nervosa on non-twin sisters.

On both patients and their families, cathamnesic study has been made and the syndrome-shift or psychiatric polysyndrome coincidences-alterations have been estimated.

Finally, results and genetical and clinical findings are discussed in the scope of etiological theory of anorexia nervosa.

P0337

Dialectical behaviour therapy for eating disorders: A randomized control trial

C.M. Courbasson^{1,2}, L. Dixon¹. ¹ *Centre for Addiction and Mental Health, Eating Disorders and Addiction Clinic, Toronto, ON, Canada* ² *University of Toronto, Department of Psychiatry, Toronto, ON, Canada*

Background and Aims: Dialectical Behaviour Therapy (DBT), an innovative method of treatment developed to treat severe emotion deregulation, shows benefit for individuals with borderline personality disorder. The purpose of this pilot study was to evaluate the efficacy of DBT in reducing Eating Disorders (ED) symptoms.

Methods: Twenty-eight individuals with DSM- IV diagnoses of eating disorders and other concurrent disorders were randomly assigned to a DBT treatment modified to address eating disorders or treatment as usual (both one year duration). They were administered a series of eating disorders and mental health measures prior to and after treatment.

Results: Data suggested that individuals in the DBT condition had decreased bulimic behaviour, weight and shape concerns and increased interoceptive awareness, treatment retention and overall health.

Conclusions: DBT can provide improvement of some eating disorders' symptoms. Specific adaptations of DBT for individuals with eating disorders, ways to overcome challenges, and recommendations will be discussed.

P0338

Families of patients with concurrent eating and substance use disorders: what do they need?

C.M. Courbasson^{1,2}, C. O'Grady^{3,4}. ¹ *Centre for Addiction and Mental Health, Eating Disorders and Addiction Clinic, Toronto, ON, Canada* ² *University of Toronto, Department of Psychiatry, Toronto, ON, Canada* ³ *University of Toronto, Department of Nursing, Toronto, ON, Canada* ⁴ *Centre for Addiction and Mental Health, Concurrent Disorders, Toronto, ON, Canada*

Background and Aims: The increasing prevalence of concurrent eating and substance use disorders has been well documented in both the eating disorders and in substance use disorders literature. Despite evidence for the important role of families and wider social networks in addiction and eating disorder treatment, concurrent eating and substance use disorder therapy has focused on treating the concurrent disorders, and largely overlooked the needs of families. This study explores the impact of concurrent eating and substance use disorders on family members to identify the family's needs in order to direct future intervention.

Methods: A series of semi-structured interviews were completed with family members of patients with concurrent eating and substance use disorders. A qualitative grounded theory approach was