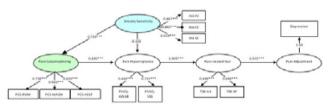


Model 9:  $S - B\chi^2(40) = 122.24$ , CFI = 0.95, RMSEA = 0.08, SRMR = 0.05.



Model 10:  $S - B\chi^2(40) = 154.49$ , CFI = 0.93, RMSEA = 0.09, SRMR = 0.06

Full models testing pain hypervigilance as a mediator in the link of both anxiety sensitivity and pain catastrophizing with pain-related fear which predicts disability (Model 9) and depression. Anxiety Sensitivity was indexed by the Anxiety Sensitivity Index (ASI). PC: ASI Physiological Concerns subscale; CC: ASI Physiological Concerns subscale; SC: ASI Social Concerns subscale. Pain catastrophizing was indexed by the Pain Catastrophizing scale (PCS). RUM: PCS Rumination subscale; MAGN: PCS Magnification subscale; HELP: PCS Helplessness subscale. Pain hypervigilance was indexed by the Pain Vigilance and Awareness Questionnaire (PVAQ). AWAR: PVAQ Passive Awareness subscale; VIG: PVAQ Active Vigilance subscale. Pain-related fear was indexed by the Tampa Scale for Kinesiophobia (TSK). AA: TSK Activity Avoidance subscale; SF: TSK Somatic Focus. Disability was indexed by the Chronic Pain Grade Disability score. Depression was indexed by the Depression subscale of the Hospital Anxiety and Depression scale.  $S-B_X^2$ : Satorra and Bentler scaled Chi<sup>2</sup> statistic; CFI: comparative fit index; RMSEA: root mean square error of approximation; SRMR: standardized root mean square residual. \*\*\*P < 0.001.

Methods The estimates were produced using data from the integrated monitoring system for chronic disease of Quebec. It provides annual and life prevalence, mortality rate, years of and healthcare utilization profile Quebec inhabitants.

Results A total of 7,995,963 people were included in the study. The life prevalence of cluster B PD is 2.6%. The mean years of lost life is 13 for men and 9 for women when they are compared to general population. The 3 most important causes of death are: suicide (20.4%), cardiovascular diseases (19.1%) and cancers (18.6%). The standardized mortality ratio (SMR) for each medical condition is superior in cluster B personality disorders than general population. The most important SMR is for suicide (male: 10.2 and female: 21). In the year 2011–2012, 78% had consulted a general practitioner, 62% a psychiatrist, 41% were admitted in an emergency department and 21% were hospitalized.

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## FC51

## Correlation between attachment and personality dimensions and their association to the catechol-O-methyltransferase Val158Met polimorphism

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Introduction Both attachment style and personality traits are closely related to individual's interpersonal patterns. Association between these constructs has been widely studied, but variability in results makes it difficult to reach definite conclusions. Similarly, dopaminergic pathways are considered to underlie some personality traits and to be related to attachment styles, but evidence, hitherto, remain inconclusive.

Aims To assess the correlation between personality and attachment dimensions and to study whether a common association to the catechol-O-methyltransferase (COMT) Val158Met polymorphism exists.

Methods One hundred and three Caucasian controls (mean age  $39.6\pm6.4$ ; 65% women) were recruited in the province of Biscay, Spain. DAPP-BQ and ECR-Spanish scales were administered to assess personality and attachment dimensions respectively. DNA was obtained from saliva and the COMT Val158Met polymorphism was determined. Pearson's correlation coefficient and ANOVA were calculated using R statistical software.

Results High positive correlation is observed between inhibition personality dimension and attachment avoidance (r=0.75). Besides, both inhibition and avoidance dimensions' scores are significantly higher in the COMT ValMet genotype than in the other genotypes. MetMet: 63.1  $\pm$  13.6; ValMet: 71.0  $\pm$  13.9; ValVal: 63.0  $\pm$  16.7 (ANOVA F=3.75, P=0.027) for inhibition and MetMet: 3.44  $\pm$  0.17; ValMet: 3.82  $\pm$  0.2; ValVal: 3.33  $\pm$  0.23 (ANOVA F=3.83, P=0.025) for avoidance.

Conclusions Attachment patterns are rooted in early interactions with parental figures, and according to our results they could be linked to self-perceived personality traits in adulthood. Our study also suggests that genetics may predispose individuals to certain interaction styles. Our findings, linking ValMet individuals to avoidant attachment, are similar to Luijk's (2011) results, and would support a genetic-environmental model of both attachment and personality.

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

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