

¹ Moscow Research Institute of Psychiatry, Brain Pathology, Moscow, Russia

² Lebedev Physical Institute, High energy, Moscow, Russia

³ Federal Research and Clinical Center of Physical-Chemical Medicine, Biophysical methods of diagnostics, Moscow, Russia

⁴ Moscow Research Institute of Psychiatry, Affective disorders, Moscow, Russia

* Corresponding author.

Introduction The last years it is became clear that disturbances in molecular processes in pathological conditions can be connected with conformational changes in protein structure.

Aim Investigation of blood albumin conformation in patients with melancholic depression.

Material and methods There were investigated 19 patients with melancholic depression (12 women and 7 men) and 25 health volunteers. Patient's state according to ICD-10 criteria was defined as a depressive episode in the frame of bipolar depressive disorder (type 2) (F32) and in the structure of recurrent depressive disorder (F33). Subnanosecond laser time resolved fluorescence spectroscopy (SLTRFS) (subnanosecond diapason) with K-35 fluorescent probe was used for the investigation of albumin conformation.

Results and discussion There were revealed 3 binding sites in albumin molecule with fluorescent decay time of 1, 3 and 9 nanoseconds (A1, A3 and A9 sites, respectively) in healthy volunteers using SLTRFS approach. There were found significant differences between albumin binding sites of volunteers and patients with melancholic depression, respectively, A1–117 ± 7 n 142 ± 10; A3–358 ± 14 n 420 ± 26; A9–371 ± 16 n 433 ± 29.

Conclusion These findings point out that melancholic depression is followed by conformational changes of albumin molecule that can affect its functional properties. We can hypothesized that albumin binding properties can serve as a biomarker of the efficacy of psychopharmacotherapy.

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EW196

Differential profile amongst patients with depressive disorder (DD) and adjustment disorder (AD)

J. Martínez Arnaiz^{1,*}, B. Vallejo-Sánchez¹, C. García Blanco¹, A.M. Pérez-García²

¹ Santa Barbara Hospital, Mental Health Unit, Puertollano- Ciudad Real, Spain

² UNED, Psychology Faculty, Madrid, Spain

* Corresponding author.

Introduction Adjustment disorder (AD) is a condition that includes both emotional or/and behavioral symptoms and occurs when individual is unable to cope with stress. It is a common diagnosis but few studies have been done due to controversial diagnosis related to their diagnostic criteria definition. It is often difficult to establish differential diagnosis with condition such as depressive and anxiety disorders or even normal reaction to stressful situations. There are limited tools to evaluate such condition and its definition is focused or based on lack of severity.

Objectives Study objective target is to analyse the differences between two groups, a first group with AD and another one with Major Depressive Disorder (MDD) (with different sociodemographic, clinical and triggering individual factors such as vulnerability or coping management).

Aims We try to have a better comprehension and management of depressive conditions.

Methods Two groups that belongs to Mental Health Community Team are compared. The first one with a diagnosis of AD, and another group with the diagnosis of MD. They have been diagnosed through a structured clinical interview and standard

questionnaires to evaluate personality coping management. Other pathologies (such as psychotic, organic...) were excluded through a structured clinical interview. We analyzed variables considered through variance analysis.

Results Significant differences between groups were found in some of the variables considered.

Conclusions This study have important implications regarding evaluation, differential diagnosis and psychotherapeutic approach to patients with AD and MD.

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

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EW198

Anhedonic brain while attending sexual and emotional pictures

F. Von Duering

Heiligenthal, Germany

Anhedonia is defined as the inability to gain pleasure from normally pleasurable experiences and reduced sexual desire. Rees et al. (2007) showed that limbic and paralimbic areas are responsible for sexual arousal and that anhedonia is associated with frontolimbic inhibition. In major depression, reduced ventral striatum and increased ventral prefrontal cortex areas was associated with anhedonia (Gorwood, 2009). Walter et al. (2009) indicated that there is a deviation in the neuronal activation pattern of the pregenual anterior cingulate cortex in anhedonic depression which is related to a glutamergic deficit. Glutamate was suggested to play a relevant role in reward system (Birgner et al., 2005). ACC is a key involved in affective state and glutamate mediates ACC activation to sexual attraction (Wu et al., 2009). Thus, a glutamatergic deficit might be related to reduced hedonic effect specific to major depression. Using an attention modulation of emotional and sexual pictures, we investigate the role of anhedonia on the ventral and dorsal systems in healthy volunteers and patients with major depression. They undergo an expectancy task in a 7T scanner and passively view sexual and emotional photographs and are asked to expect either high salient pictures or high erotic pictures. Half of the pictures are announced by an expectancy cue, whereas the other half are preceded by a fixation cross. Snaith-Hamilton-Pleasure-Scale and Hamilton Depression Rating Scale are employed to assess anhedonia and depressive symptom severity. Brain metabolites in the dorsal and pgACC are measured using MRS. We will show how anhedonia modulates the neural response to sexual arousal.

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Eating disorders

EW199

Oxytocin secretion in anorexia nervosa and bulimia nervosa: Investigation of its relationships to temperament personality dimensions

M. Nigro^{1,*}, A.M. Monteleone¹, L. Steardo¹, G. Patriciello¹, V. Di Maso¹, M. Cimino¹, U. Volpe¹, P. Monteleone²

¹ Department of Psychiatry, University of Naples SUN- Naples- Italy, Naples, Italy

² University of Salerno, Neuroscience Section- Department of Medicine and Surgery, Salerno, Italy

* Corresponding author.

Introduction Some temperament characteristics of personality seem to be modulated by oxytocin. Patients suffering from eating disorders (EDs) display aberrant personality traits.

Objectives and aims We investigated the relationships between plasma oxytocin levels and personality dimensions of patients with anorexia nervosa (AN) and bulimia nervosa (BN) and compared them to those of healthy controls.

Methods Plasma oxytocin levels were measured in 23 women with AN, 27 women with BN and 19 healthy controls and assessed their personality traits by means of the Cloninger's Temperament and Character Inventory-Revised (TCI-R).

Results AN patients showed plasma levels of the hormone significantly lower than BN and healthy controls. In healthy women, plasma oxytocin levels resulted significantly correlated negatively with novelty seeking scores and positively with both harm avoidance (HA) scores and the attachment subscale scores of the reward dependence: these correlations explained 82% of the variability in circulating oxytocin. In BN patients, plasma oxytocin resulted negatively correlated with HA, whereas no significant correlations emerged in AN patients.

Conclusions These findings confirm a dysregulation of oxytocin secretion in AN but not in BN and show, for the first time, that the association of circulating oxytocin to patients' temperament traits is totally lost in underweight patients with AN and partially lost or even inverted in women with BN. These findings suggest a role of oxytocin in certain deranged behaviours of ED patients, which are influenced by the subjects' personality traits.

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EW200

Attachment style and salivary cortisol awakening response in eating disorders

F. De Riso^{1,*}, R. Giugliano¹, A.M. Monteleone¹, M. Nigro¹, F. Pellegrino¹, M. Calvanese¹, G. Patriciello¹, V. De Stefano¹, U. Volpe¹, P. Monteleone²

¹ University of Naples SUN, Department of Psychiatry, Naples, Italy

² University of Salerno, Neuroscience section- Department of Medicine and Surgery, Salerno, Italy

* Corresponding author.

Introduction Early life experiences can influence hypothalamus-pituitary-adrenal (HPA) axis regulation and adult attachment styles. Furthermore, several studies showed that in patients with eating disorders (EDs) there is a prevalence of insecure attachment. However, the relationship between adult attachment style, HPA axis functioning and onset of EDs is largely unknown.

Objectives and aims In order to evaluate possible associations between attachment styles and HPA axis functioning in EDs, we investigated Cortisol Awakening Response (CAR) in ED patients with different attachment styles.

Methods Twenty adult patients with EDs were classified in three groups, according to the Experience in Close Relationship questionnaire (6 with secure attachment, 6 with anxious attachment and 8 with avoidant attachment). Saliva samples were collected at awakening and 15, 30 and 60 minutes after.

Results There was a significant difference among the groups in both awakening and post-awakening cortisol concentrations. In particular, compared to secure and avoidant groups, the anxious group exhibited lower cortisol concentrations at awakening and post-awakening with a preservation of the timing of the CAR.

Discussion Present findings demonstrate that anxious attachment style is linked to flattened CAR in EDs. This pattern has been associated with other psychiatric disorders. Therefore, attachment style could influence the HPA functioning and it could play, although not specifically, a role in pathophysiology of EDs.

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EW201

Obesity: The influence of expressed emotion, anxiety and life events

E. Di Tullio^{1,*}, E. Gattoni¹, C. Gramaglia¹, V. Ruggiero¹, G. Biroli², F. D'andrea², S. Gili¹, M.R. Gualano³, R. Siliquini³, P. Zeppegno⁴

¹ Università del piemonte orientale, medicina traslazionale, Novara, Italy

² Azienda ospedaliero universitaria maggiore della carità, dipartimento dei servizi, Novara, Italy

³ Università degli studi di torino, Dipartimento di Scienze della Sanità Pubblica e Pediatrica, Torino, Italy

⁴ Università del piemonte orientale, translational medicine, Novara, Italy

* Corresponding author.

Background Expressed Emotion (EE) can be described as a measure of the emotional temperature of the family climate and plays a role in disease course and outcome, especially in chronic illnesses. Overweight and obesity are severe problems with serious implications as far as health risks are concerned. The literature suggests having a high EE caregiver correlates with a worse treatment compliance in obese patients.

Objectives To measure level of EE, stressful events and anxiety in obese patients and their caregivers; to investigate the possible correlations between treatment compliance and EE.

Methods We recruited 190 obese patients and 125 caregivers. Socio-demographic features were recorded. Assessment included: Level of Expressed Emotion Scale (LEE), one version for patients and one for relatives in order to evaluate 4 dimensions: Intrusiveness, Emotional Response, Attitude toward Disease, Tolerance and Expectation; the Paykel's Interview for Recent Life Events; STAI Y1 concerning state anxiety and STAI Y2 concerning trait anxiety; BMI (Body Mass Index) was measured at T0 and after 3,6 and 9 months. **Results** We have found a correlation between gender and trait anxiety, and an inverse correlation between age and trait anxiety both in patients and caregivers. The decrease of BMI during follow-up is statistically significant and this reduction seems to be affected by tolerance and expectation perceived by patients and the emotional response on behalf of caregivers.

Conclusions Levels of EE should be considered when planning treatment interventions to enhance compliance in obese patients and to support change in their life-style.

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EW202

How do obese people eat?

M.P. Felix-Alcantara^{1,*}, J. Perez-Templado², C. Banzo-Arguis¹, R. Martínez de Velasco¹, E. Ruiz-Velasco¹, J. Quintero³

¹ Hospital Universitario Infanta Leonor, Psychiatry, Madrid, Spain

² Fundación Psiformación, Psychiatry, Madrid, Spain

³ Hospital Universitario Infanta Leonor & Fundación Psiformación, Psychiatry, Madrid, Spain

* Corresponding author.

Introduction The recently published DSM-5 defines Eating Disorders (ED) as "a persistent alteration in the food supply or food-related behavior leading to an alteration in the consumption or absorption of food and cause a significant deterioration in health or psychosocial functioning" and, nevertheless, it does not include obesity as an ED due to the lack of enough evidence to include it.