

## POST TRAUMATIC STRESS SYMPTOMS AND ANXIETY AS ATTENTIONAL BIAS MODULATORS IN “CONTROL” POPULATION

O. Nachon<sup>1,2,3</sup>, M. Gindt<sup>2,3,4</sup>, R. Garcia<sup>2,3</sup>, S. Faure<sup>1</sup>

<sup>1</sup>Laboratoire d'Anthropologie et de Psychologie Cognitives et Sociales (LAPCOS, EA 7278)/Université de Nice Sophia Antipolis, Nice, <sup>2</sup>Institut de Neurosciences de la Timone (UMR 7289), Marseille, <sup>3</sup>Réseau National ABC des Psychotraumas, <sup>4</sup>Laboratoire Base Corpus Langage (UMR 7320)/Université de Nice Sophia Antipolis, Nice, France

**Introduction:** Information processing studies, such as attentional bias, help to distinguish anxious pathologies. If Vigilance and disengagement bias have been widely demonstrated in generalized anxiety and post traumatic stress disorder (PTSD), their existence has not been reported in non clinical sample with or without anxiety and/or PTSD symptoms.

**Objectives and aims:** The aim of the present study was to examine the possible presence of specific attentional bias in these populations and compare them with classical bias in PTSD patients.

**Methods:** One hundred and thirty-one students completed a visual search task with a lexical decision component, and anxiety and PTSD scales. We controlled attentional bias: vigilance / disengagement and words valence: neutral / general threat-related / trauma-related. Ten PTSD patients were assessed for PTSD with CAPS and completed the same protocol.

**Results:** Among non clinical sample, four groups were distinguished: without symptom, anxious, PTSS (Post-Traumatic Stress Symptom) and, anxious and PTSS groups. Analysis of response time and error rate show different pattern of bias in each non clinical group. Considering the PTSS group response times were higher for trauma-related words, while for threat-related words, the anxious group was characterized by lower response times. Without symptom participants showed an attentional bias for negative information. Anxious and PTSS participants were characterized by a generalization of both biases.

**Conclusions:** These data reveal the existence of different types of information processing between these four non clinical groups. A putative role of anxious symptoms, in anxiety pathologies such as PTSD, on attentional bias is discussed.