

healthy subjects. The area under the ROC curve (AUC) for discriminating between subjects with schizophrenia and healthy subjects was 0.83. Cut point of 16 raw points is 86% sensitive and has 70% specificity.

Conclusions The form of the tool that has been achieved as a result of presented analyses suggests that this scale has a potential to fulfill the assumed goals, which will be tested during continuing validation studies.

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

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O087

Disorganization in schizophrenia:

A resting EEG study

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Introduction In subjects with schizophrenia (SCZ), the disorganization factor was found to be a strong predictor of real-life functioning. "Conceptual disorganization" (P2), "difficulties in abstract thinking" (N5) and "poor attention" (G11) are considered core aspects of the disorganization factor, as assessed by PANSS. The overlap of these items with neurocognitive functions is debated and should be further investigated.

Aims Within the Italian network for research on psychoses study, electrophysiological and neurocognitive correlates of the disorganization factor and its component items were investigated.

Methods Resting state EEGs were recorded in 145 stabilized SCZ and 69 matched healthy controls (HC). Spectral amplitude (Samp) was averaged in nine frequency bands. MATRICS consensus cognitive battery (MCCB) was used for neurocognitive assessment. Band Samp differences and correlations with psychopathology and MCCB scores were explored by global randomization statistics.

Results SCZ showed increased delta, theta, and beta1 and decreased alpha2 Samp. A negative correlation between alpha1 and disorganization was observed in SCZ. At the item level, only N5 showed this correlation. MCCB neurocognitive composite was associated with P2 and N5 but not with alpha1 Samp.

Conclusions Our findings suggest an heterogeneity of the disorganization dimension and a partial overlap with neurocognitive domains. The N5, "difficulties in abstract thinking", had a unique association with alpha1 Samp, which is thought to be involved in the formation of conceptual maps.

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

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O088

Autistic traits in patients with anorexia nervosa, bulimia nervosa or binge eating disorder: A pilot study

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Introduction Previous data showed higher autistic traits in individuals with anorexia nervosa (AN) compared to healthy controls (CTL). It is not known, however, whether this characteristic is shared by other feeding and eating disorders (FEDs) or it is uniquely associated to AN.

Objectives To compare autistic traits among individuals with AN, bulimia nervosa (BN), binge eating disorder (BED) and CTL and to investigate which specific dimensions differentiate one group from another.

Methods A total of 241 FED patients (53 AN, 41 BN, 42 BED) and 105 CTL were administered the autism-spectrum quotient (AQ), the adult autism subthreshold spectrum (AdAS Spectrum), the Ritvo autism and Asperger diagnostic scale 14-item (RAADS-14 Screen).

Results FED subjects reported higher AQ, AdAS spectrum and RAADS-14 total and subscales scores compared to CTL (all $P < .001$). No differences were found amongst AN, BN and BED subjects in questionnaires' total scores. BN group scored higher than AN in the hyper-/hyporeactivity to sensory input domain of the AdAS spectrum ($P < .001$); AN group scored higher than BED in the attention switching domain of the AQ ($P < .001$), and BED group scored lower than both AN and BN in the mentalizing deficit domain of the RAADS-14 (all $P < .001$).

Conclusions We reported for the first time that not only AN but also BN and BED patients show greater autistic traits compared to CTL. Longitudinal studies are needed to confirm this preliminary report and to elucidate whether autistic traits either precede, co-occur or follow FEDs.

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

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O089

Resilient coping and social networks in old age

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Introduction Both resilient coping strategies and the structural/functional characteristics of personal social networks are considered important factors when facing adversity and the challenges inherent to the aging process.

Objectives To analyze the association between the configurations of ego-centred networks and different levels of resilient coping in a sample of elderly people.

Methods Quantitative, cross-sectional study comparing groups, with 512 participants, mostly women ($n = 325$; 63.5%), married ($n = 264$; 51.5%), with 76 years old in average ($SD \pm 7.6$), and with basic education ($n = 261$; 51%). We used a socio-demographic questionnaire, the IARSP-Elderly (personal social network assessment tool) and the Brief Resilient Coping Scale for data collection.

Results We found different levels of resilient coping in our sample: low (50.4%); medium (38.7%); strong (10.9%). These three levels of coping were associated with the composition of ego-centred networks, namely the proportion of friends and colleagues ($P < 0.05$), different perceived emotional support, reciprocity and satisfaction with the network ($P < 0.05$), frequency of contacts and relationships' durability ($P < 0.05$).

Conclusions Higher levels of coping are associated with a larger proportion of friends in the network, whereas the familiar networks are associated with low coping. Although participants in our study revealed mainly kin comprised networks, these results