

EPP0075

Art therapy in eating disorders. A systematic review of literature.

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doi: 10.1192/j.eurpsy.2022.405

Introduction: Art-therapy (encompassing plastic arts, music, theater and writing) is a promising and acceptable management strategy of eating disorders (ED). It has the potential to improve well-being and therapeutic alliance, targeting psychological dimensions of ED, and dealing with difficulties of expression and rationalization of patients. Nevertheless, the efficacy of this approach is difficult to evaluate because of the lack of studies in this area.

Objectives: We sought to provide an overview on the efficacy of art therapy in the management of ED, by a systematic review of all controlled trials using art therapy on patients with ED.

Methods: This systematic review included all controlled trials using art-therapy on a population of adolescent and adult patients with ED. The effect of art therapy on clinical indicators such as anthropometric variables, symptoms and dimensions of ED was evaluated.

Results: Of the 1286 screened records, only four respected inclusion criteria. These four trials evaluated plastic art therapy, music therapy, writing therapy, and dance-movement therapy. A large number of bias and strong heterogeneity of inclusion criteria, techniques and variables prevented any attempt of quantitative synthesis. Music therapy appeared to have a significant effect on post-prandial anxiety, while dance-movement therapy showed an effect on body dissatisfaction.

Conclusions: The generalizability of the results found is weakened by the high heterogeneity of trials. Replication studies and a rigorous methodologies are necessary for more reliable conclusions. Art therapy could help improving some specific dimensions of ED.

Disclosure: No significant relationships.

Keywords: Psychotherapy; Eating Disorders; systematic review; art therapy

EPP0073

Vulnerability to acute psychosocial stress in subjects with eating disorders and history of childhood trauma: experimental evidence of a "Maltreated Ecophenotype"E. Barone^{1*}, M. Carfagno¹, A.M. Monteleone¹, V. Ruzzi¹, F. Pellegrino¹, N. Marafioti¹ and R. Toricco²¹University of Campania "Luigi Vanvitelli", Department Of Psychiatry, Naples, Italy and ²Università degli studi della Campania "L.Vanvitelli", Psichiatria, napoli, Italy

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doi: 10.1192/j.eurpsy.2022.406

Introduction: Subjects with eating disorders (ED) show a high prevalence of childhood trauma.

Objectives: Aim of the study is to evaluate the emotional, biological and behavioral responses to an experimental acute psychosocial stress in subjects with ED with or without childhood maltreatment.

Secondary aim is to evaluate the effects of different traumatic experiences (physical and emotional).

Methods: 48 women with ED completed the Childhood Trauma Questionnaire (CTQ). 29 participants (14 with Anorexia Nervosa [AN] and 15 with Bulimia Nervosa [BN]) reported an history of childhood maltreatment, while 19 (11 with AN and 8 with BN) did not. Cortisol levels, anxiety and hunger perceptions have been assessed in all participants throughout the Trier Social Stress Test (TSST) as well as body dissatisfaction after stress exposure.

Results: Subjects with childhood trauma showed higher emotional reactivity and body dissatisfaction and lower hunger throughout the TSST than those without childhood trauma. Higher cortisol levels were observed in patients with AN, regardless of the presence of childhood trauma, and in those with BN and history of emotional trauma. Emotional trauma was the childhood trauma explaining most of the observed differences.

Conclusions: Childhood trauma, especially emotional one, can lead to vulnerability to interpersonal stress in individuals with ED. The present study is the first that supports the "maltreated ecophenotype" hypothesis in subjects with ED through an experimental task and the evaluation of multiple levels of response. These data may provide new perspectives on the pathogenetic mechanisms of ED and novel therapeutic implications.

Disclosure: No significant relationships.

Keywords: TSST; maltreated ecophenotype; ED

EPP0075

Bulimia nervosa and borderline personality disorder - case report and literature review

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doi: 10.1192/j.eurpsy.2022.407

Introduction: Bulimia Nervosa (BN) is a debilitating eating disorder characterized by bingeing and purging episodes generally accompanied by excessive concern with body weight and shape as well as body image disturbance. BN and Borderline Personality Disorder (BPD) may co-occur. In fact, studies estimate that one quarter to one third of patients with BN also meet criteria for BPD. However not much is known about the relationship between these two diseases. Nevertheless, the high comorbidity rate might not be surprising as both BN and BPD may share interacting aetiologies and common core symptoms such as impulsivity and emotional instability. So far, only very little is known about the clinical presentation of patients with both BN and BPD and their response to treatment.

Objectives: Literature review on BN and comorbid BPD. An illustrative clinical case is presented.

Methods: Case report and non-systematic review of the literature - sources obtained through search on Pubmed.gov database.

Results: Female, 19-year-old, student, lived with her mother and stepfather. Developed a poor relationship with her body image due to dental problems during high school. The patient started to binge eat, exhibit compensatory behaviors, restrictive eating pattern, body dissatisfaction and emotional instability while maintaining a

normal BMI. Over the last year, she started a self-destructive behavior with slight improvement of BN symptoms.

Conclusions: Special attention should be given to patients suffering from BN and comorbid BPD as they present greater risk of recurrent suicide attempts and non-suicidal self-injury, as well as lower rates of remission. Early interventions that target impulsivity and problematic eating behavior may mitigate risk of future borderline personality features.

Disclosure: No significant relationships.

Keywords: Eating Disorders; Borderline Personality; Bulimia nervosa

Schizophrenia and other Psychotic Disorders 01

EPP0078

Development of a self-replicating plasmid for non-toxic expression of CRISPR-repressors to study schizophrenia-risk genes

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doi: 10.1192/j.eurpsy.2022.408

Introduction: Genome-wide association studies revealed that polymorphisms located within non-coding regions significantly contribute to the genetic architecture of schizophrenia. Such regions may affect the expression of tens and hundreds of neuronal genes. Epigenetic CRISPR editors help to elucidate the causative polymorphisms. However, efficient CRISPR-repressors are highly toxic to neuronal cells, and their activity rapidly declines with time after transfection due to plasmid silencing. Therefore, less toxic, effective, and long-acting epigenetic CRISPR instruments are required to advance schizophrenia genetic research.

Objectives: We aimed at creating a less toxic and effective CRISPR-repressor for the investigation of schizophrenia-risk genes.

Methods: Plasmids were obtained using standard molecular cloning techniques and lipofected into the SH-SY5Y cell line. Cells were cultured using standard conditions and techniques. Cell viability and GFP-reporter fluorescence were observed using a fluorescent microscope.

Results: We obtained a set of plasmids encoding dCas9-KRAB-MeCP2 repressor under the control of different promoters (hEF1a, hPGK1, mPGK1, hSYN2, synthetic TRE). Non-toxic expression of the CRISPR-repressor was achieved using tetracyclin controllable TRE promoter. Moreover, the Epstein-Barr virus origin of replication (oriP) and its regulator EBNA were introduced to make the self-replicating plasmid. High activity of CRISPR-repressor was confirmed on a schizophrenia-risk gene DDC encoding L-DOPA decarboxylase catalyzing the last step of dopamine biosynthesis.

Conclusions: We have created a plasmid encoding the non-toxic and effective CRISPR repressor encoded by a self-replicating plasmid. The study was supported by the grant from the Russian Science Foundation №21-15-00124, <https://rscf.ru/project/21-15-00124/>.

Disclosure: No significant relationships.

Keywords: causative genes; schizophrenia; CRISPR editors

EPP0079

Positive schizotypy is associated with amplified mnemonic discrimination and attenuated generalization

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doi: 10.1192/j.eurpsy.2022.409

Introduction: Tendency to experience inaccurate beliefs alongside perceptual anomalies constitutes positive schizotypal traits in the general population and shows continuity with the positive symptoms of schizophrenia. It has been hypothesized that the positive symptomatology of schizophrenia, and by extension, positive schizotypy, are associated with specific alterations in memory functions. Imbalance between memory generalization and episodic memory specificity has been proposed on several counts; however, the direction of the imbalance is currently unclear.

Objectives: We aimed to contrast two competing hypotheses regarding the association between positive schizotypy, and memory alterations in a general population sample (N=71) enriched for positive schizotypy from a larger pool of individuals (N=614).

Methods: Positive schizotypy was measured with the short-version of the O-LIFE questionnaire, and memory specificity and generalization was captured by the well-established Mnemonic Similarity Task.

Results: Distortions in the behavioural memory performance indices were found to correlate with positive schizotypy: individuals prone to unusual experiences demonstrated increased discrimination and reduced generalization (explaining 10% and 17% of variance, respectively). Associations were robust when controlled for the disorganized, negative and impulsive-asocial dimensions of schizotypy and associated psychopathology.

Conclusions: Our findings show that people who are prone to irrational beliefs and unusual experiences also show measurable alterations in memory and likely have difficulty grasping the global picture and rather be overpowered by fragments of information.

Disclosure: No significant relationships.

Keywords: episodic memory; schizotypy; pattern separation; pattern completion

EPP0080

Prevalence of treatment resistant schizophrenia according to minima TRRIP criteria in a mental health catchment area in southern Spain

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doi: 10.1192/j.eurpsy.2022.410