

Conclusions: As observed with the original English-language scale, the Portuguese version of the SDE has shown good validity (construct and concurrent) and internal consistency. As such, the SDE might be a useful tool to investigate disordered eating psychopathology in older women. In the near future we will determine the SDE cut-offs with the best combination of sensitivity and specificity to screen for eating disorders in this populational group.

Disclosure of Interest: None Declared

EPP0614

Fathers' Role in Bulimia Nervosa: A Systematic Review

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Introduction: Bulimia Nervosa (BN) is a highly prevalent eating disorder related to multiple risk factors. In this regard, familial variables can play a critical role in the development and maintenance of BN.

Objectives: The existing studies frequently explored mothers and maternal factors, while fathers and paternal variables have been less extensively investigated in this field. Therefore, we aimed to systematically review the studies on the role of paternal factors in BN.

Methods: This systematic review process was carried out according to the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines. As a result of the literature search on PubMed, Web of Science TM, and APA PsycINFO, 419 candidate papers were determined and evaluated based on the eligibility criteria. The quality assessment of the final 59 studies was conducted using the JBI Critical Appraisal Tools.

Results: Then, we thematically arranged and narratively reported the qualitative and quantitative research findings. Paternal attitudes (e.g., critical, abusive, aggressive, uncaring, and unaffectionate), family dynamics (e.g., chaotic, rigid, less communicative, and emotionally involved), and father-specific features (e.g., personality traits, eating psychopathology features) were found as three main groups that could be directly or indirectly associated with the development and maintenance of BN symptoms. The eligible qualitative studies also indicated that fathers could positively influence the recovery process of their daughters with BN (e.g., by helping them develop healthy adaptive body image, self-adequacy, and self-esteem).

Conclusions: The contradictory outcomes were discussed for further research and clinical implications.

Disclosure of Interest: None Declared

EPP0615

Childhood maltreatment is associated with cortical thinning in people with eating disorders

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Introduction: Childhood maltreatment (CM) is recognized as non-specific risk factor for the onset of various psychiatric disorders and is associated with a greater severity in their clinical presentation and poorer treatment outcome. These data suggest that maltreated people with eating disorders (ED) may be biologically other than clinically different from non-maltreated people.

Objectives: Aim of the present study was to investigate cortical thickness (CT), a possible biomarker of neurodevelopment, in people with ED with or without history of CM and in healthy women.

Methods: Study participation was proposed to patients consecutively admitted to the adult ED outpatient centre of the University of Salerno. Twenty-four healthy women, 26 with anorexia nervosa (AN) and 24 with bulimia nervosa (BN) underwent a 3T MRI scan. All the participants completed the short form of the Childhood Trauma Questionnaire (CTQ). All neuroimaging data were processed by FreeSurfer. Maps of CT were computed in order to perform a vertex-by-vertex analysis. CT maps underwent a general linear model analysis to evaluate differences among groups. Age and body mass index (BMI) were included as nuisance covariates.

Results: Based on CTQ cut-off scores, 12 participants with AN and 12 with BN were identified as maltreated and 14 participants with AN and 12 with BN as non-maltreatment. All healthy women were "non-maltreated". Therefore, participants were split in 3 groups: 26 maltreated participants with ED, 24 non-maltreatment participants with ED and healthy control (HC). Compared to HC, maltreated people with ED showed lower CT values in the left rostral anterior cingulate gyrus, while compared to non-maltreatment people with ED showed lower CT values in the left superior frontal, in right caudal middle frontal and in right superior parietal gyri. No significant differences emerged in CT measures between HC and non-maltreatment people with ED.

Conclusions: Present findings show for the first time that in adult people with ED childhood maltreatment is associated with cortical thinning in areas implicated in the modulation of brain processes that are acknowledged to play a role in the psychopathology of ED.

Disclosure of Interest: None Declared

EPP0616

Orthorexia and perceived stress by medical students: which association?

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