

satisfied with figure. One-half adolescents are terrified with increasing in weight.

Statistically significant number in both schools does not have control in eating ( $p < 0.5$ ).

**Conclusion:** There is high level of discontent and dissatisfaction with figure among adolescent females.

**Discussion:** This research indicate necessary education of adolescents to help them in accepting healthier nutrition and lifestyle in an earlier period of life, also developing programs for prevention which will encourage youth in adopting healthy lifestyles and related behavior.

Key words: adolescent females, eating attitudes, eating disorders

### P0335

Psychiatric comorbidity with night eating disorder

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**Objective:** purpose of the study to asses the relationship between psychiatric disorders and night eating syndrome.

**Method:** subjects were recruited from psychiatric outpatient clinic at The Sisli Etfal Teaching and Research Hospital ( $n=384$ ). Night Eating Syndrome Questionnaire and Structured Clinical Interview for DSM-IV diagnosis (SCID) researchers version were used as screening tools.

**Results:** 304 patient were female (%79,2), 80 were male (%20,8). Mean age of patients were  $37,5 \pm 13,7$ .

Two hundred seven participants (%54) scored  $\geq 20$  on the Night Eating Syndrome Questionnaire. 168 of these were female, 39 were male.

Our sample was screened with SCID for psychiatric diagnosis and we found 51% depression (comorbid diagnosis also included); 13,5% bipolar disorder; 8,3% generalized anxiety disorder (GAD); 6,5% panic disorder; 4,7% obsessive compulsive disorder (OCD); 4,2% social phobia; 2,9 % adjustment disorder; 2,1% somatoform disorder, 1,6% schizophrenia; 0,5% eating disorders.

Statistically significant rates of bipolar disorder were found among patients diagnosed with NES ( $p=0,037$ ). The relationship between NES and psychiatric disorders other than bipolar disorder were not statistically significant in our study.

**Discussion:** There are limited published data about psychiatric comorbidity with NES. These studies reported comorbidity with depression, substance use disorders and sleep disorders. In our study we found strong relationship between bipolarity and NES. Despite high rate of depression with NES in our study and in the literature, our findings didn't support the relationship between NES and depression.

### P0336

Eating disorders: Twins studies

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The psychiatric morbidity – endogenous and exogenous psychoses, neurosis and abnormal personalities, psychosomatic diseases, addictions, sociopathies and so on – is studied mainly on first grade relatives in 6 cases of female patients affected with anorexia nervosa, 2

monozygotic twins; 2dizygotic twin and 2 cases of anorexia nervosa on non-twin sisters.

On both patients and their families, cathamnesic study has been made and the syndrome-shift or psychiatric polysyndrome coincidences-alterations have been estimated.

Finally, results and genetical and clinical findings are discussed in the scope of etiological theory of anorexia nervosa.

### P0337

Dialectical behaviour therapy for eating disorders: A randomized control trial

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**Background and Aims:** Dialectical Behaviour Therapy (DBT), an innovative method of treatment developed to treat severe emotion deregulation, shows benefit for individuals with borderline personality disorder. The purpose of this pilot study was to evaluate the efficacy of DBT in reducing Eating Disorders (ED) symptoms.

**Methods:** Twenty-eight individuals with DSM- IV diagnoses of eating disorders and other concurrent disorders were randomly assigned to a DBT treatment modified to address eating disorders or treatment as usual (both one year duration). They were administered a series of eating disorders and mental health measures prior to and after treatment.

**Results:** Data suggested that individuals in the DBT condition had decreased bulimic behaviour, weight and shape concerns and increased interoceptive awareness, treatment retention and overall health.

**Conclusions:** DBT can provide improvement of some eating disorders' symptoms. Specific adaptations of DBT for individuals with eating disorders, ways to overcome challenges, and recommendations will be discussed.

### P0338

Families of patients with concurrent eating and substance use disorders: what do they need?

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**Background and Aims:** The increasing prevalence of concurrent eating and substance use disorders has been well documented in both the eating disorders and in substance use disorders literature. Despite evidence for the important role of families and wider social networks in addiction and eating disorder treatment, concurrent eating and substance use disorder therapy has focused on treating the concurrent disorders, and largely overlooked the needs of families. This study explores the impact of concurrent eating and substance use disorders on family members to identify the family's needs in order to direct future intervention.

**Methods:** A series of semi-structured interviews were completed with family members of patients with concurrent eating and substance use disorders. A qualitative grounded theory approach was