

Objectives: This single-center, retrospective, observational and epidemiological study aims to analyze the prevalence of cardiac changes and their correlation with disease severity, in patients admitted to the Child and Adolescent Psychiatry Unit, AOU Meyer, Florence.

Methods: The study population consisted of 123 children between the ages of 7 and 18 years old admitted to inpatient or intensive day hospital, with a diagnosis of AN, between January 1, 2019, to March 31, 2022. Data were collected by retrospectively consulting clinical reports. The correlation between BMI, percentage of weight loss since the onset of symptoms and HR, QTc interval values and pericardial effusion was evaluated. Furthermore, the correlation between cardiac changes and the intake of antidepressant and antipsychotic medications was analyzed.

Results: The overall prevalence of cardiac changes was 57.7%. In our analysis BMI showed a significant positive correlation whit HR. QTc prolongation was significantly related only to psychotropic drug intake. Pericardial effusion was evidenced exclusively in patients diagnosed with severe or extreme AN. After six months from the hospitalization and the beginning of treatment the prevalence of cardiovascular complications was reduced.

Conclusions: The present study identifies criteria able to select patients with AN at higher risk of developing cardiac changes and underlines the importance of performing more frequent and targeted cardiologic evaluations in this subgroup of patients. This suggests the importance of establishing a common protocol for all clinicians.

Disclosure of Interest: None Declared

EPP0607

The relationship between alexithymia and Nyght Eating Syndrome

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Introduction: NES is characterized by daytime anorexia, sleep difficulties with nocturnal food intake, resulting in obesity (Stunkard et al. Am J of Med. 1955; 19 78-86). Alexithymia refers to the impairment in recognizing and describing feelings. The impairment in distinguishing emotions from body sensations may lead patients to confuse emotional arousal with physical hunger (Sifneos et al. Mod. trends psychosom. med. 1976; 3 430-439). This mechanism could lead to nocturnal food intake. Alexithymia was firstly described in BED and was related to BED severity.

Objectives: To our knowledge no studies have investigated the relationship between alexithymia and NES. The aim of the present study was to assess alexithymia in patients with NES, to improve surgical and nutritional outcomes.

Methods: 110 patients with clinical diagnosis of NES admitted to the Eating Disorder Unit, between 2013 and 2022 underwent psychiatric assessment for bariatric surgery. Clinical assessment consisted of clinical interview and the following psychometric

rating scales: 20-item Toronto Alexithymia Scale; Eating Disorder Inventory 2, specifically the Interoceptive Awareness subscale; Barratt Impulsiveness Scale; Binge Eating Scale.

Results: The mean BES score was 24.14(SD 8.23), computed on 107 patients, of which 16 (14.5%) had no or minimal binge eating problems and 91 (82.7%) had moderate-severe binge eating problems. The mean TAS total score was 55.11(12.92), computed on 103 patients. 42 patients had a TAS-20 total score ≤50 and were categorized as non-alexithymic, and 61 had a TAS-20 total score >50 and were categorized as alexithymic. Simple linear regression was used to test if TAS-20 total score significantly predicted EDI-IA in the whole sample (97 patients). The overall regression was statistically significant (R²=0.27, F(1,96)=35.46, p< .001) and TAS total score significantly predicted EDI-IA score (β=0.519, p<.001). In the alexithymic group, the regression was statistically significant (R²=0.305, F(1,57)=25.07, p< .001) and TAS total score significantly predicted EDI-IA score (β=0.553, p<.001).

	Whole sample	Alexithymic	Non-alexithymic	p
Female (%)	79(71.8) N=110	48(64.9) N=62	26(35.1) N=42	.087
Age mean(SD)	36.41(12.6) N=110	34.65(12.7) N=62	38.48(11.31) N=42	.11
BMI mean(SD)	44.05(7.61) N=106	43.97(7.9) N=60	43.82(7.38) N=40	.92
TAS mean(SD)	55.11(12.92) N=103	64.05(7.06) N=61	42.12(7.13) N=42	<.001*
BIS mean(SD)	67.58(10.35) N=98	70.07(9.93) N=59	63.26 (9.85) N=35	.002*
BES mean(SD)	24.14(8.23) N=107	25.7(6.89) N=62	21(9.25) N=40	.004*
EDI-IA mean(SD)	8.95(6.44) N=103	10.82(7) N=60	6.05(4.44) N=39	.000*

*significant difference between alexithymic and non-alexithymic groups according to independent sample t-test.

Image:

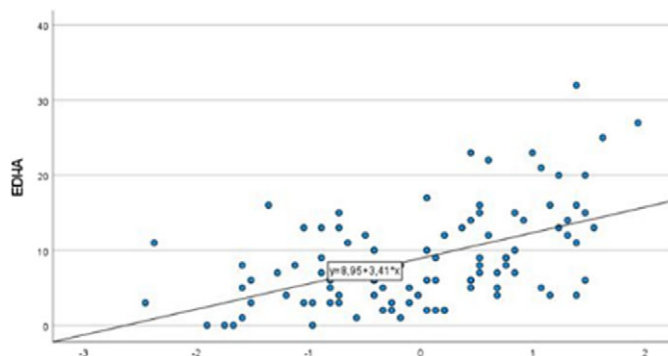
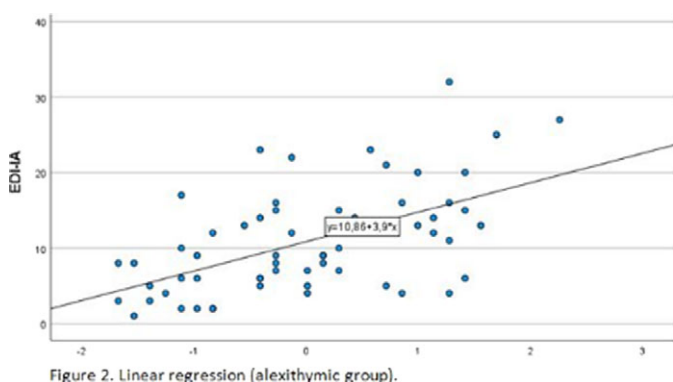


Figure 1. Linear regression (whole sample).

Image 2:



Conclusions: In patients with NES, alexithymia significantly predicts poor interoceptive awareness, thus explaining excessive nocturnal food intake.

Disclosure of Interest: None Declared

EPP0608

Mirror exposure therapies: Effect of the distance to the mirror on the attentional pattern in a Virtual Reality immersive environment

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Introduction: Mirror exposure therapies (MET) have been proposed to reduce symptomatology in patients with Anorexia Nervosa. However, most MET protocols or related studies do not specify the patients' distance to the mirror, or when they do so, such a distance may differ significantly (from 0,5 to 3 meters). Such modifications of mirror positioning could imply variations in patients' fixation patterns on different body parts (i.e., attentional bias between weight-related and non-weight related body parts), since previous studies shown that dissociated neural systems (either in left or right cerebral hemispheres) are involved in the attentional patterns and scanning strategies depending on the distance (i.e., in near and far space). Furthermore, as the body-related attentional bias (AB) has been shown to be a part of the maintenance mechanism of AN symptomatology, any modification of attentional patterns due to mirror's distance variations may influence the efficacy of MET.

Objectives: This study aims to use Virtual Reality (VR) and Eye-Tracking (ET) technologies to precisely analyse the effect of the distance to the mirror on the attentional patterns.

Methods: 137 female college students were immersed in a VR environment in which they could look in the mirror at their respective avatars created from the measurements and photos of their real bodies. The mirror was positioned at 3.30m in front of the participants in "group 1" ($n_1 = 54$), and at 1.54m in front of the participants in "group 2" ($n_2 = 83$). Eye-Tracking feature and OGAMA software (Freie Universität, Berlin, Germany) were used to record and process the visual attentional pattern of each participant, during a 30-second free viewing task at her avatar. Complete Fixation Time (CFT) was assessed as the fixation time difference between weight- and non-weight- related body parts, defined from the weight scale of the PASTAS questionnaire. Independent Sample t-Test was conducted to analyse CFT mean difference between both groups.

Results: Independent Samples t-Test shows statistically significant CFT mean difference ($F(1, 135) = 1.571, p < 0.001, 95\% \text{ IC } [1717; 5581]$) between both groups. While fixation pattern of the group positioned further to the mirror (group 1) was more focused on weight-related body parts (CFT mean = 2282ms, SD = 809), the fixation pattern of the group positioned closer to the mirror (group 2) was more focused on non-weight-related body parts (CFT mean = -1367ms, SD = 587).

Conclusions: This study shows new opportunities to use VR and ET technologies to precisely analyse the variations of fixation patterns as a function of mirror position in MET. Such information may contribute to adapt and develop new MET's protocols for AN patients, optimizing the distance to the mirror. It also underscores the importance of specifying the distance to the mirror in MET-related studies to improve replicability.

Disclosure of Interest: None Declared

EPP0609

Serotonin, insulin, leptin and glycolipid metabolic factor's relationship in obesity

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Introduction: Obesity, defined by an excessive body fat accumulation, is a non-communicable condition attaining epidemic proportions in economically developed countries.

Objectives: To provide evidence to the link between serotonin (5-HT), energy metabolism and the human obese phenotype, the present study investigated the binding and function of the platelet 5-HT transporter (SERT), in relation to circulating insulin, leptin, glycolipid metabolic parameters and body-mass indices (BMIs, Kg m^{-2}).

Methods: The study included an observational clinical cohort of 74 drug-free subjects (51W; 23M), recruited on the basis of divergent BMIs (16.5-54.8 Kg m^{-2}). All subjects were tested for their blood glycolipid profile together platelet [³H]-paroxetine ([³H]-Par) binding and [³H]-5-HT reuptake measurements from April 1st to June 30th 2019.

Results: The [³H]-Par B_{max} (fmol/mg proteins) was progressively reduced with increasing BMIs ($p < .001$), without changes in affinity. Moreover, B_{max} was negatively correlated with BMI, waist/hip circumferences, triglycerides, glucose, insulin and leptin, while positively with HDL cholesterol ($p < .01$). The reduction of 5-HT