on the construction of a positive body image, presenting an impact on the engagement in disordered eating. In this line, cognitive fusion may be a pertinent target in clinical practice and also within eating disorders prevention.

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#### EV0469

# What relationship between eating disorders and alexithymia among medical students?

N. Messedi\*, I. Feki, R. Masmoudi, B.N. Saguem, J. Masmoudi Hedi Chaker University Hospital, Psychiatry A, Sfax, Tunisia \* Corresponding author.

Introduction The student population seems to be vulnerable to eating disorders (ED) but is this in relation to their ability to express their emotions or alexithymia?

Objectives Studying the prevalence of ED and alexithymia among medical students, and establish the relationship between these entities.

Methods It was a cross-sectional study of 97 students in Sfax University Medicine (Tunisia). We used:

- a questionnaire containing demographic and clinical data;
- Eating Attitudes Test (EAT-26): a score ≥ 20 indicates ED;
- Toronto Alexithymia Scale (TAS-20): a score  $\geq$  61 indicates alexithymia.

Results The average age of participants was 24.07 years ( $\pm 2.71$ ); the sex ratio (M/W) was 0.4. Their average BMI was 22.85 kg/m² ( $\pm 3.36$ ). They were smoking in 36.1% and sedentary in 43.3% of case. They had a nibbling activity in 57.7%. The average score of the EAT-26 was 11.66  $\pm 8.66$  and prevalence of TCA was 19.6%. The average score of TAS-20 was 50.92, 0.46 and alexithymia was found in 16.5% of students. ED was significantly correlated with nibbling (P=0.02), BMI or overweight (P=0.012), smoking (P=0.006) and physical inactivity (P<0.00). Also alexithymia was significantly correlated with smoking (P=0.003) and physical inactivity (P=0.025). A significant correlation was found between alexithymia and ED (P=0.008).

Conclusion It is clear from our study an association between alexithymia and the ED. Psychological support aimed specifically alexithymic dimension is indispensable, not only for decreasing the emergence of ED but also contributing to lower any addictive behavior.

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

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## EV0470

## Prenatal stress exposure as a risk factor for anorexia nervosa: A controlled study

S. Michelon\*, E. Tenconi, E. Bonello, D. Degortes, M. De Toffol, A. Favaro, P. Santonastaso, M. Nassuato University of Padua, Department of Neurosciences, Padua, Italy

\* Corresponding author.

Introduction Prenatal risk factors, such as gestational complications and exposure to stress during pregnancy, may have a role in the development of many psychiatric disorders including eating disorders.

*Aim* To investigate the impact of prenatal stress exposure on the development and clinical features of anorexia nervosa.

Methods One hundred and nine patients with a lifetime diagnosis of anorexia nervosa and 118 healthy controls underwent a clinical assessment, which included interviews, questionnaires and a

neuropsychological battery. The mothers of the patients and controls underwent a specific interview focused on stressful life events, which occurred during pregnancy. Obstetric and neonatal records were consulted.

Results The mothers of patients experienced more severe stressful episodes during pregnancy than the mothers of controls and the perceived distress showed significant positive correlation with both total number of obstetrical complications and placental weight. In patients, the severity of stressful events was strongly associated to cognitive rigidity and perseverance.

Conclusions Prenatal stress exposure might be a risk factor for the development of anorexia nervosa and it is associated with cognitive traits of rigidity and perseverance.

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

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### EV0471

## The disorder of lived corporeality: A possible link between attachment style and eating disorder psychopathology

A.M. Monteleone <sup>1,\*</sup>, G. Castellini <sup>2</sup>, U. Volpe <sup>1</sup>, M. Nigro <sup>1</sup>, F. Zamponi <sup>2</sup>, V. Ricca <sup>2</sup>, G. Stanghellini <sup>3</sup>, P. Monteleone <sup>4</sup>

<sup>1</sup> Second University of Naples, Department of Psychiatry, Naples, Italy <sup>2</sup> University of Florence, Psychiatric Unit, Department of

Neuroscience, Psychology, Drug Research and Child Health, Florence, Italy

<sup>3</sup> Università G D'Annunzio, Department of Psychological, Humanistic and Territorial Sciences, Chieti, Italy

<sup>4</sup> University of Salerno, Department of Medicine, Surgery and Dentistry "Scuola Medica Salernitana" Section of Neurosciences, Salerno, Italy

\* Corresponding author.

Introduction According to the trans-diagnostic perspective, disturbances in eating patterns of eating disorders (EDs) are considered as epiphenomena secondary to the patient's overvaluation of his/her body shape and weight.

Objectives The phenomenological theory states that the main feature of ED psychopathology is a disturbance in the way affected persons experience their own body (embodiment). Insecure attachment may promote the development of unstable self-identity leading to use body weight as a source of self-definition.

Aims The aim of our study was to assess the role of embodiment impairments in the relationships between attachment stiles and ED psychopathology.

Methods One hundred twelve ED patients and 108 healthy subjects filled in the Identity and Eating Disorders (IDEA) questionnaire, which assesses embodiment and personal identity abnormalities, the eating disorder inventory-2 (EDI-2) and the experiences in close relationships (ECR) scale, which defines attachment styles.

Results ED patients showed IDEA, EDI-2 and ECR scores significantly higher than controls. Significant correlations between IDEA scores, insecure attachment and almost all EDI-2 sub-item scores emerged in ED patients but not in controls. IDEA total score mediated the relationship between avoidant attachment and EDI-2 interoceptive awareness.

Conclusions These findings demonstrate that in ED patients insecure attachment is correlated to disorder of identity and lived corporeality that, in turn, mediates the association between attachment and a specific ED psychopathological trait. Therefore, we suppose that early relationships, through the development of disturbances in identity and embodiment, lead to altered perception of bodily signals and deranged discrimination of one's emotions, which could contribute to EDs.