

oxytocin. In AN patients copeptin inversely correlate with Restrained Eating while oxytocin correlate with the External Eating score. NH [^{11}C] diprenorphin BP_{ND} correlated with leptin but not with copeptin or oxytocin.

Conclusions: Neurohypophysial opioid tone in anorexia nervosa seem not to impact the vasopressin or oxytocin release but still may interfere in gonadal axis regulation. Copeptin, a good indicator of hydration state, may be a good tool to detect hidden restrictive or purging behaviors. Specific correlates with AN psychologic features still suggest a physiopathological involvement.

Disclosure: No significant relationships.

Keywords: Anorexia nervosa; Copeptin; Oxytocin; Cerebral opioid tone

EPP0067

Digital Hazards for Feeding and Eating - meta-analysis and discussion of putative mechanisms

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doi: 10.1192/j.eurpsy.2022.400

Introduction: Eating disorders are widespread illnesses with significant impact. There is growing concern about how those at risk of eating disorders overuse online resources to their detriment.

Objectives: We present systematically gathered and pooled quantitative evidence from our review and meta-analysis study which aimed to provide a quantitative synthesis of all available data linking problematic usage of the internet (PIU) and eating disorder and related psychopathology. We synthesize how PUI influences eating disorder and related psychopathology, and examine what the moderating parameters influencing this relationship are.

Methods: Our systematic review and meta-analysis protocol was pre-registered electronically in PROSPERO international register and included case-control studies using correlational statistics of association between internet use (various facets) and eating disorder psychopathology. Experimental and prospective studies are systematically reviewed separately.

Results: The meta-analysis comprised $n=32,295$ participants, in which PUI was correlated with significant eating disorder general psychopathology Pearson $r=0.22$ (s.e.=0.04, $p<0.001$), body dissatisfaction $r=0.16$ (s.e.=0.02, $p<0.001$), drive-for-thinness $r=0.16$ (s.e.=0.04, $p<0.001$) and dietary restraint $r = 0.18$ (s.e.=0.03). Effects were not moderated by gender, PUI facet or study quality. Results are in support of PUI impacting on eating disorder symptoms; males may be equally vulnerable to these potential effects. Prospective and experimental studies in the field suggest that small but significant effects exist and may have accumulative influence over time and across all age groups.

Conclusions: Those findings are important to expand our understanding of PUI as a multifaceted concept and its impact on multiple levels of ascertainment of eating disorder and related psychopathology. Putative specific effects of PUI on EDs are discussed.

Disclosure: No significant relationships.

Keywords: meta-analysis; internet addiction; Eating Disorders; problematic use of the internet

EPP0068

Higher levels of concern about dieting and moderate-intensity physical activity predict orthorexia nervosa among young adults

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doi: 10.1192/j.eurpsy.2022.401

Introduction: In some individuals, interest in healthy attitudes and behaviours towards food may show obsessive signs. Preoccupation with 'healthful' eating may contribute to orthorexia nervosa (ON) – a strong preoccupation with "healthy eating" manifested by the avoidance of all foods considered by the individual to be "unhealthy".

Objectives: The objective of the present study was to determine whether disordered eating behaviour, physical activity and self-esteem are predictors of ON in young adults.

Methods: Five hundred fifty-four Polish and Italian university students participated in the present study. Participants were asked to answer the Eating Habits Questionnaire, the Eating Attitudes Test, the International Physical Activity Questionnaire and the Rosenberg Self-Esteem Scale.

Results: Our findings found that higher levels of concern about dieting and moderate-intensity physical activity were related to ON. Particularly, higher levels of concern about dieting, bulimic behaviour and thoughts about food and moderate-intensity physical activity predicted problems associated with healthy eating. Higher levels of concern about dieting, self-esteem as well as self-control of eating and perceived pressure from others to gain weight were associated with knowledge of healthy eating. Whereas, higher levels of concern about dieting with country factor (Poland) predicted feeling positively about healthy eating.

Conclusions: In ON treatment, reduction in symptoms and concerns characteristic of eating disorders and adequate levels of physical activity should be taken into consideration.

Disclosure: No significant relationships.

Keywords: orthorexia nervosa; physical activity; Eating Disorders; young adults

EPP0069

Eating behaviour among adults with different levels of emotional suppression and eating disorder symptomatology

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doi: 10.1192/j.eurpsy.2022.402

Introduction: Research has shown that emotional suppression, a form of emotion regulation, is often used by individuals with

disordered eating behaviour. Moreover, eating disorder symptomatology is associated with inappropriate eating behaviours (e.g. excessive consumption of high-calorie foods and comfort foods).

Objectives: The objective of the present study was to investigate the differences in eating behaviour among adults with different levels of emotional suppression and eating disorder symptomatology.

Methods: Two hundred seventy adults ($M_{\text{age}} = 29.44 \pm 9.32$) completed the Three-Factor Eating Questionnaire (eating behaviour), the Eating Attitudes Test (eating disorder symptomatology) and the Emotion Regulation Questionnaire (emotional suppression).

Results: Three clusters were identified through cluster analysis: cluster 1 ($N = 115$) presenting low emotional suppression and low eating disorder symptomatology; cluster 2 ($N = 43$) presenting high emotional suppression and high eating disorder symptomatology and cluster 3 ($N = 112$) presenting high emotional suppression and low eating disorder symptomatology. Our results showed that individuals in cluster 2 had significantly greater levels of cognitive restraint, uncontrolled eating and emotional eating than individuals in clusters 1 and 3. Moreover, individuals in clusters 1 and 3 did not differ significantly in terms of any of the TFEQ subscales.

Conclusions: These preliminary findings may suggest that the tendency to persistently suppress emotions exacerbate disordered eating behaviour. Therefore, this factor together with symptoms of eating disorders should to be considered when planning prevention and intervention programs among adults presenting disordered eating behaviour.

Disclosure: No significant relationships.

Keywords: adults; eating disorder risk; eating behaviour; emotion regulation

EPP0070

Is decision-making impairment an endophenotype of Anorexia Nervosa?

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doi: 10.1192/j.eurpsy.2022.403

Introduction: Patients with anorexia nervosa (AN) show impaired decision-making ability, but it is still unclear if this is a trait marker, i.e. a stable endophenotype of AN, or a state parameter, i.e. being explained by present symptoms and associated comorbidity.

Objectives: We aimed to determine whether decision-making impairment is an *endophenotype* of AN. We hypothesized that decision-making alteration would not respect the criteria of an endophenotype, and that these alterations would have a relationship with illness severity.

Methods: Ninety-one patients with acute AN (A-AN), 90 unaffected relatives (UR), 23 patients remitted from AN (R-AN) and 204 healthy controls (HC) underwent the Iowa Gambling Task (IGT) and psychometric assessments. Prospective Valence

Learning model (PVL) was employed to distinguish the cognitive dimensions underlying the decision-making process. Performance at the IGT was compared between the four groups and then analysed according to clinical and psychometric variables.

Results: Patients with A-AN scored worse than UR and HC at the IGT ($p < .01$). PVL-feedback sensitivity parameter was lower in patients with R-AN and A-AN than in the two other groups ($p < .01$) and PVL-loss aversion parameter was lower in A-AN than in UR and R-AN ($p < .01$). Decision-making style, in particular learning and loss aversion parameters, accounted for a significant part of variance of psychopathology in patients with AN ($p < .01$).

Conclusions: Impaired decision-making represents a state-associated, cognitive hallmark of AN. The aggravation of reward modulation along with illness progression may explain the persistence of symptoms despite their consequences on health. Reversal of decision-making impairment should not be limited by inherited vulnerability.

Disclosure: No significant relationships.

Keywords: endophenotype; decision making; iowa gambling task; Anorexia nervosa

EPP0071

Eating disorders in the structure of depressive states.

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doi: 10.1192/j.eurpsy.2022.404

Introduction: Anorexia nervosa is a disease that occurs mainly in adolescent and young girls and is expressed in a conscious, extremely persistent and purposeful desire to lose weight, often reaching severe cachexia with a possible fatal outcome.

Objectives: Clinical and psychopathological analysis of eating disorders and modeling of clinical and dynamic patterns in terms of their association with depressive disorders, improving the criteria for nosological diagnosis, prognosis and therapy.

Methods: 58 patients aged 15 to 25 years who were on outpatient and inpatient observation of the clinic were studied.

Results: It was found that eating disorders are divided into 2 types. The first type is an overvalued eating disorder. In this category, the depressive state developed either during the course of the eating disorder or preceded its development. The second type is delusional eating disorder. In this type, the development of the depressive state did not depend on the eating disorder and proceeded independently of it. At each of these levels, three types of dynamics were identified: narrative type of dynamics (44%), implicit type (25%) and type of selective dissociation (22.4%).

Conclusions: Eating disorders in the structure of depression are heterogeneous and have different degrees of association with depressive symptoms and different variants of the dynamics of their course. The revealed patterns make it possible to formulate a clearer idea of the prognosis of the disease as a whole and to optimize the algorithms for the therapeutic intervention of these conditions.

Disclosure: No significant relationships.

Keywords: Eating disorders; Anorexia nervosa; Depression