

dependence of auditory evoked potential (LDAEP) is a suitable biomarker of inhibitory action in signal processing. Variations in response inhibition can have great impact on different aspects of life. Individuals with reduced capability of inhibitory control have a tendency to impulsive behavior. Studies showed that they have stronger LDAEP values. Patients with schizophrenia may exhibit alterations in the responsiveness to sensory stimuli. Thus, a reduced LDAEP was found in these patients. However, these deviances differed in clinical features of the disorder. Therefore, we would like to further elucidate the relationship between multimodal neuroimaging methods and dimensions of symptoms, observable behavior, personality traits and general psychopathological dysfunction.

Methods A sample of 20 healthy controls and 20 patients with manifest schizophrenia will be examined with the LDAEP paradigm in a trimodal approach with customary imaging tools. PET measurements with the radiotracer [¹¹C]-flumazenil will be used to assess the binding potentials of GABA-A receptors. MRS will provide data about GABA concentrations. Simultaneously recorded EEG-fMRI data will permit new insight in the relationship between LDAEP and impulsivity.

Discussion The project will use alternative approaches to psychiatric classification. Response inhibition in sensory processing will be investigated from different angles (biochemical, neurophysiological, and neuroanatomical) and combined with psychological characteristic values.

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Obsessive-compulsive disorder

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Actions speak louder than words: Enhanced action tendencies in obsessive-compulsive disorder: An ERP study

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Obsessive-compulsive disorder (OCD) is characterized by repeated thoughts and behaviors. Several studies have detected deficient response inhibition ability in individuals with OCD, leading researchers to suggest this deficit as an endophenotype of OCD. However, other researchers maintain that the effect size of this deficit is modest and that it lacks clinical significance. The current investigation examines a potential alternative explanation for difficulties in response inhibition, namely enhanced action tendencies in response to stimuli. Therefore, early processes of motor response preparation preceding action performance (or inhibition) were studied with the event-related potential (ERP) component of readiness potential (RP). RP measures brain reactions related to motor activity in response to external stimuli. ERPs were recorded while 15 participants with OCD and 16 healthy controls performed a variation of a go/no-go task and a stop-signal task using schematic faces (angry and neutral). The OCD group presented with a greater RP slope gradient and amplitude over bilateral parietal areas corresponding to the motor cortex. The amplitude effect was further enhanced under negative valence, compared with the neutral condition. Differences in RP between the OCD and control groups remained significant when controlling for levels of trait anxiety. Results support the hypothesis that a stronger readiness for action might characterize OCD, especially in the presence of threatening

stimuli. This finding, specific to OCD and not to anxiety symptoms, may underlie habitual tendencies in OCD. This study suggests that early-stages of motor preparation might be important to the etiology and maintenance of OCD.

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Pain and treatment options

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The net suppression effect of pain catastrophic cognition on anxiety sensitivity

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Introduction The existing literature on chronic pain points to the effects anxiety sensitivity, pain hypervigilance, and pain catastrophizing on pain-related fear; however, the nature of the relationships remains unclear. The three dispositional factors may affect one another in the prediction of pain adjustment outcomes. The addition of one disposition may increase the association between another disposition and outcomes, a consequence known as suppressor effects in statistical terms.

Objective This study examined the possible statistical suppressor effects of anxiety sensitivity, pain hypervigilance and pain catastrophizing in predicting pain-related fear and adjustment outcomes (disability and depression).

Methods Chinese patients with chronic musculoskeletal pain ($n=401$) completed a battery of assessments on pain intensity, depression, anxiety sensitivity, pain vigilance, pain catastrophizing, and pain-related fear. Multiple regression analyses assessed the mediating/moderating role of pain hypervigilance. Structural equation modeling (SEM) was used to evaluate suppression effects. **Results** Our results evidenced pain hypervigilance mediated the effects of anxiety sensitivity (Model 1: Sobel $z=4.86$) and pain catastrophizing (Model 3: Sobel $z=5.08$) on pain-related fear. Net suppression effect of pain catastrophizing on anxiety sensitivity was found in SEM where both anxiety sensitivity and pain catastrophizing were included in the same full model to predict disability (Model 9: CFI=0.95) and depression (Model 10: CFI=0.93) (all $P<0.001$) (see Tables 1 and 2, Figs. 1 and 2).

Conclusions Our findings evidenced that pain hypervigilance mediated the relationship of two dispositional factors, pain catastrophic cognition and anxiety sensitivity, with pain-related fear. The net suppression effects of pain catastrophizing suggest that anxiety sensitivity enhanced the effect of pain catastrophic cognition on pain hypervigilance.