

possible associations between subjects' attachment styles and HPA axis functioning.

**Methods** Twenty-one adult patients with EDs (7 with secure attachment and 14 with insecure attachment) filled in the Experience in Close Relationship (ECR) questionnaire, which assesses the adult attachment style, and were exposed to the TSST. Saliva samples were collected before and after the stress in order to measure cortisol levels.

**Results** As compared to ED patients with secure attachment, those with insecure attachment showed a significant different pattern of the HPA response to the stress test.

**Discussion** Present findings suggest that attachment style may influence the HPA response to stress in patients with EDs and this effect may have relevant implications for the pathophysiology of EDs.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1545>

### EV561

#### Recognition of emotional prosody in anorexia nervosa

T. Dondaine<sup>1</sup>, B. Douailler-Gautier<sup>2,\*</sup>, M. Guillery<sup>2</sup>, G. Robert<sup>1,2</sup>, B. Millet<sup>3</sup>, S. Guillaume<sup>4</sup>, D. Drapier<sup>1,2</sup>

<sup>1</sup> University Rennes 1, Medical Department, Rennes, France

<sup>2</sup> Psychiatric Hospital Guillaume Regnier, pôle hospitalo-universitaire de psychiatrie-adulte, Rennes, France

<sup>3</sup> University Paris 6, Medical Department, Paris, France

<sup>4</sup> University de Montpellier, Medical Department, Montpellier, France

\* Corresponding author.

Deficits in emotional processes are often observed by clinicians in anorexia nervosa and may have an impact on social functioning. Recognition of emotion was mostly investigated using visual stimuli as faces of emotional scenes. Only one study (Kucharska-Pietura et al., 2004) demonstrated impairments in emotional prosody using positive and negative valenced stimuli. However, this study did not provide a highlight for the identification of emotional bias (for example, to recognize an intense fear in a friendly voice). The aim of this study is to better understand the recognition of emotional prosody in anorexia nervosa using a wide range of positive, negative and neutral stimuli (Belin et al., 2008).

In order to test emotion recognition biases in emotional prosody, we exposed 15 patients with anorexia nervosa and 15 healthy controls (HCs) to emotional vocal tasks asking them to rate emotional intensity on visual analog scales. In addition, we assessed clinical symptomatology and cognitive functioning for all participants.

We showed that patients with anorexia nervosa provided higher intensity ratings on the non-target scales (e.g., surprise scale for fear stimuli) than HCs for sadness, fear and neutral voices. Furthermore, with the exception of neutral vocal stimuli, they provided the same intensity ratings on the target scales as the HCs.

These findings suggested a bias in the processing of emotional prosody and may impact the social functioning of patients with anorexia nervosa. The bias may result from a sensorial deficit or a high-order cognitive dysfunction and have to be investigated in future studies.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1546>

### EV562

#### Men with Anorexia: A descriptive study of the characteristics of male patients in an intensive psychotherapy day hospital for eating disorders during 2015 in Madrid

A. Espinosa Benavides<sup>1,\*</sup>, C. García Calvo<sup>2</sup>, B. Unzeta Conde<sup>3</sup>, M.P. Vilariño Besteiro<sup>3</sup>, C. Pérez Franco<sup>3</sup>

<sup>1</sup> Instituto Psiquiátrico José Germain, Psiquiatría, Leganés, Spain

<sup>2</sup> Hospital Universitario Fuenlabrada, Psicología clínica, Fuenlabrada, Spain

<sup>3</sup> Hospital Universitario Santa Cristina, Unidad de Trastornos de la Conducta Alimentaria, Madrid, Spain

\* Corresponding author.

**Objective** To describe the main characteristics of male patients suffering from anorexia in a specialized unit for eating disorders management.

**Introduction** As a result of a more prevalent diagnosis of eating disorders in women (including anorexia among others), male patients characteristics have been less described in current literature.

**Methodology** The authors retrospectively reviewed the clinical history of all male patients attending our unit of Eating Disorders in a period of one year (2015). The recorded characteristics were analyzed and classified as demographic, clinical and biographical. Finally a bibliographic review was also performed and correlated with our results.

**Conclusion** During our review (currently being performed) we have found that, even if in much less numbers than in women, the characteristics of male patients suffering anorexia have recognizable patterns and for instance can be used for the better understanding of this pathology in this population.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1547>

### EV563

#### 'Dar Kenn Ghal Sahhtek' – An effective therapeutic intervention

F. Falzon Aquilina<sup>1,\*</sup>, A. Grech<sup>2</sup>, D. Zerafa<sup>3</sup>, M. Agius<sup>4</sup>, V. Voon<sup>5</sup>

<sup>1</sup> Ministry of Health, Psychiatry, Attard, Malta

<sup>2</sup> Dept of Psychiatry, University of Malta, Malta

<sup>3</sup> Ministry of Health, Psychiatry, Mtarfa, Malta

<sup>4</sup> Department of Psychiatry, Bedford Hospital, Bedfordshire, UK

<sup>5</sup> Department of Psychiatry, University of Cambridge, Cambridge, UK

\* Corresponding author.

**Introduction** 'Dar Kenn Ghal Sahhtek' is a residential service for patients suffering from eating disorders, namely Bulimia Nervosa, Anorexia Nervosa and Obesity (Binge Eating and Non Binge Eating type). The focus will be made on the obesity services.

**Objectives** 1. To show that Dar Kenn Ghal Sahhtek has proved to be an effective therapeutic intervention towards obesity (with or without binge eating). 2. To show that from a recruitment of 30 obese subjects a substantial proportion met the DSM-5 criteria for Binge Eating Disorder.

**Aims** 1. To show that by means of questionnaires and physical testing a marked improvement was made following the therapeutic interventions offered at DKGS. 2. To highlight the high incidence of binge eating disorder in a sample of 30 obese subjects recruited via DKGS.

**Methods** 1. Interviewing the patient for the DSM-5 criteria of binge eating. 2. Comparing scores of questionnaires before admission and prior to discharge. 3. Evaluating the response to various treatment modalities.

**Results** On interviewing the group of 30 patients, 47.6% of the patients were found to be the diagnostic criteria of Binge Eating Disorder according to DSM-5 (Table 1).

**Conclusion** Firstly, a considerable proportions of obese subjects proved to meet the DSM-5 criteria for binge eating while Dar Kenn Ghall Sahhtek has proved to be an effective therapeutic intervention towards obesity (with and without binge eating).

Table 1

	On admission	Prior to discharge
BDI questionnaire	1.1	53.33
GAD questionnaire	4.55	400
QOL questionnaire	6.67	350
2 minute step	73 steps on average	114 steps on average
6 minute walk	440 m on average	625 m on average

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1548>

#### EV564

### The effects of shame, self-compassion and perfectionistic self-presentation of body image on eating psychopathology

A.L. Mendes<sup>1</sup>, C. Ferreira<sup>2,\*</sup>, J. Marta-Simões<sup>1</sup>, I.A. Trindade<sup>1</sup>

<sup>1</sup> Faculty of Psychology and Educational Sciences, University of Coimbra, CINEICC, Cognitive, Behavioural Centre for Research and Intervention, Coimbra, Portugal

<sup>2</sup> Faculty of Psychology and Educational Sciences, University of Coimbra, CINEIC, Cognitive, Behavioral Research Centre, Coimbra, Portugal

\* Corresponding author.

Shame is considered a painful emotion that emerges in social contexts when the individual perceives that others see the self as inferior, inadequate or defective. This emotion is associated with decreased levels of self-compassion and may trigger several defensive responses, such as the need to present a perfect body image. Furthermore, shame has been conceptualized as a key component of eating psychopathology.

This study aims to explore the role of external shame in the engagement in disordered eating attitudes and behaviours through the mechanisms of self-compassion and body image-related perfectionistic self-presentation. A path analysis testing a mediational model was conducted in a sample of 469 women from the general community, aged between 18 and 35 years old.

The tested model explained 49% of the eating psychopathology's variance and presented excellent fit indices. Results demonstrated that external shame has a direct effect on disordered eating behaviours and simultaneously an indirect effect through the mechanisms of self-compassion and the need to present a perfect physical appearance.

These results seem to corroborate the link between shame and eating psychopathology. Additionally, these data suggest that women who present higher levels of shame show decreased self-compassion and tend to adopt compensatory maladaptive strategies, such as striving for a perfect body. Furthermore, these findings have significant clinical implications, highlighting the importance of developing new programs focused on shame and on the promotion of adaptive emotion regulation strategies, such as self-compassion.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1549>

#### EV565

### A clinical case of a patient with anorexia nervosa and bizarre behavior

A. Fonseca<sup>1,\*</sup>, A. Poças<sup>1</sup>, J. Melim<sup>2</sup>, R. Araújo<sup>2</sup>

<sup>1</sup> Centro Hospitalar de Leiria, Psiquiatria, Leiria, Portugal

<sup>2</sup> Centro Hospitalar de Leiria, Psiquiatria, Leiria, Portugal

\* Corresponding author.

Eating disorders (EDs) are mental illnesses, defined by abnormal eating habits. EDs are chronic, severe and difficult to treat, and cause psychological, social and physical consequences. It occurs predominantly in adolescents and young adults women (around 90%), causing severely disability, major biopsychosocial losses, and high morbidity and mortality. EDs are considered by WHO as a public health problem, affecting different ages, genres, times, regions and contexts.

**Objective** Case report of a patient with Anorexia Nervosa and bizarre behavior.

**Methods** Clinical observation in hospital.

**Results** Woman with 43 years old, with a peace of 65 years, who was hospitalized in Psychiatric Service – Eating Disorders, in August 2015, because of its extreme thinness, with difficulty to walk and with severe edema of the feet, ankles and legs. At the entrance, she weighed 29 kg, after 4 days her weight reduced to 23 kg, reaching a BMI of 8.5 kg/m<sup>2</sup>. In the first week, she showed a high cognitive impairment, confusional state and detailed and ruminative speech about food. She had developed multiple techniques to hide food and to hide and take dietary supplements for weight loss. Furthermore, she had a bizarre behavior and marked social isolation, not interacting with other patients.

**Conclusion** Although the low prevalence of EDs, these have a high morbidity, and are one of the psychiatric disorders that most often leads to a fatal outcome. Treatment is lengthy and cumbersome, requiring serious investments under the personal point of view, family and clinical, yet still, these patients can have a full life and quality.

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

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.1550>

#### EV566

### Anger expression, impulsivity and expressed emotion: A comparison between patients with eating disorder and schizophrenia

E. Gambaro<sup>1,\*</sup>, C. Gramaglia<sup>1</sup>, D. Cenci<sup>1</sup>, C. Delicato<sup>1</sup>, A. Lombardi<sup>1</sup>, C. Rizza<sup>1</sup>, L. Girardi<sup>1</sup>, V. Binda<sup>2</sup>, N. Chiappa<sup>2</sup>, P. Prosperini<sup>2</sup>, F. Bert<sup>3</sup>, R. Siliquini<sup>3</sup>, P. Zeppego<sup>1</sup>

<sup>1</sup> Università del Piemonte Orientale, Dipartimento di Medicina Traslazionale, Novara, Italy

<sup>2</sup> Azienda Ospedaliera Universitaria Maggiore della Carità di Novara, Medicina Traslazionale, Novara, Italy

<sup>3</sup> Università degli Studi di Torino, Scienze della Sanità Pubblica e Pediatriche, Torino, Italy

\* Corresponding author.

**Introduction** The level of express emotion (EE) is a measure of the attitude of close relatives towards a patient and include dimensions as critical comments, hostility and emotional over-involvement. Anger and impulsivity may lead to self-injurious and aggressive behaviours, and often represent an obstacle to treatment.

**Aims** To compare anger expression, impulsivity and expressed emotion in ED and SCHZ, and to explore the different level of caregivers' EE in the two groups.

**Methods** Twenty-five female with ED diagnosis and 25 patients with schizophrenia, were recruited at the Psychiatry Ward and outpatient Service of AOU – Novara, during one year period. Patient's assessment included Global Assessment of Functioning