

EPV0293

Self-harm and aggression in patients with anorexia nervosa

N. Lebedeva^{1*}, A. Parshukov² and Y. Chebakova²¹Clinical Psychology, Pirogov Russian National Research Medical University, Moscow, Russian Federation and ²Psychology, Moscow Institute of Psychoanalysis, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1869

Introduction: Anorexia nervosa (AN) is a complex condition with high comorbidity.**Objectives:** This study aims to verify whether patients with AN are more aggressive towards themselves than towards others; namely, we measure the levels of autoaggressive/aggressive ideation, negative emotions regarding self/others, as well as self-harm behavior.**Methods:** 10 female patients with AN (2 of them also had bulimia nervosa) and 20 female participants of the control group were presented with Structured Interview, Rosenzweig Picture-Frustration Test (P-F), Thomas-Kilmann Conflict Mode Instrument, Buss-Durkee Hostility Inventory, I-structural Test of Ammon, Boyko Communication Aggression Inventory, Boyko Self-directed Emotion Accumulation Inventory (BSEAI). Mann-Whitney U-test and Pearson's correlation coefficient were used.**Results:**

Table 1		
Structured interview indicator	Control group	AN patients
Suicide attempts	10%	60%
Self-harm behavior	35%	60%
Piercing/tattoos	20%	50%
Depression (self-report)	40%	90%

There were no significant differences in aggression levels between groups. However, patients with AN showed less extrapunitive reactions: blaming others, requiring others to resolve the situation (P-F, $p=0.013$) and more intropunitive reactions: self-blame, feeling responsible/guilty for the situation (P-F, $p=0.031$). AN patients had more self-directed negative emotions and impulses (BSEAI, $p=0.01$), more self-harm behavior (see table 1). There were no correlations between autoaggression and aggression scales in the control group, but there were 9 correlations between them in the AN group ($p<0.05$, $r>0.76$).

Conclusions: Patients with AN are more inclined to self-blame, negative ideas about themselves, self-harm behavior, but have the same aggression level as the control group. The interconnection of aggression and autoaggression is different in patients with anorexia nervosa compared to the control group.

Disclosure: No significant relationships.**Keywords:** anorexia nervosa; Aggression; self-harm

EPV0294

The importance of the family situation to understand the role of anorexia symptoms

P. Del Sol Calderon^{1*}, A. Izquierdo¹ and M. García Moreno²¹Psychiatry, Hospital Universitario Puerta de Hierro, Majadahonda, Spain and ²Psychiatry, HOSPITAL UNIVERSITARIO PUERTA DE HIERRO MAJADAHONDA, MADRID, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1870

Introduction: The objective of this poster is to show the importance of understanding the situation of the patient's family in order to know the development and role that eating symptoms are occupying both in the patient and in the different members that make up the family**Objectives:** Highlight the triggering and sustaining factors of a case of anorexia nervosa**Methods:** Case Report

Results: Patient is a 14-year-old woman who begins to develop excessive concern about her body image initiating eating behaviors in the form of high restriction and counting of calories from food. Also she explains that she began to compulsively perform more than two hours a day of sports in order to lose weight Family genogram: she is an only daughter, whose parents have been separated for 4 years. Parents recognize conflictive relationship. The patient recognizes a very close relationship with her mother. When she talks about her relationship with her father, she explains how she felt very close to her father when she was young but that after the separation her father moved away. She describes that his father rebuilt his life a year ago and that he recently informed her that he is going to be a father again. She recognizes intense feelings of abandonment from her father. She acknowledges that the sense of control starting with anorexia initially helped her to feel confident about herself.

Conclusions: Understanding the origin of the symptoms and their function is essential for a better management of cases of anorexia

Disclosure: No significant relationships.**Keyword:** eating disorder family dynamics

Emergency psychiatry

EPV0295

New therapy by surfactant to avoid neuro/psychiatric problems caused by cerebral hypoxia

L. Bracco

Scientific Director Of Lorenzo Bracco Foundation, Lorenzo Bracco Foundation, Torino, Italy

doi: 10.1192/j.eurpsy.2021.1871

Introduction: Covid-19 causes neuro/psychiatric problems by cerebral hypoxia.