psychological states. All participants completed pre-treatment (baseline), intervention (week 5), and post-treatment (week 10) assessments, and the treatment group completed a separate follow-up assessment (week 14).

**Results:** In the treatment group, 70.05% of the participants completed the full course of the digital intervention. The mean scores for each primary outcome measure and some secondary outcome measures were significantly different between baseline and post-treatment in the treatment group for the Total, Riggy, Pleaser, Shelly, and Jumpy programs, but these differences were not observed in the waitlist group. In addition, mean differences between the treatment and waitlist groups at post-treatment assessment were significant for all primary outcome measures and some secondary outcome measures. Specifically, the levels of stress (Total program), perfectionism (Riggy), loneliness (Shelly), and anxiety (Jumpy) were significantly lower in the treatment group, while self-esteem (Pleaser) was higher. In addition, the mean differences between post-treatment and follow-up assessment data were not statistically significant for all primary outcome measures and nearly all secondary outcome measures.

**Conclusions:** This study validated the effectiveness of the digital intervention program targeting maladaptive personality traits and suggested its sustainable effects.

**Disclosure of Interest:** None Declared

## Eating Disorders

### EPV0452

### Eating disorder and bipolar mental illness through genome wide association studies

B. Abdelmoula*, R. Rhaiem, A. Charfi, S. Kotti, I. Masmoudi, Y. Marsaoui and N. Bouayed Abdelmoula

Genomics of Signalopathies at the service of Precision Medicine - LR23ES07, Medical University of Sfax, Sfax, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.1153

**Introduction:** Besides the role played by environmental factors and their epigenetic influences, scientific researchers showed that the susceptibility to develop an eating disorder among bipolar people is due to genetic factors.

**Objectives:** To review the genetic factors behind eating disorders, highlight the role of genetics and epigenetics in the comorbidity of bipolar and eating disorders.

**Methods:** To delineate the role of genetics and epigenetics in eating disorders and bipolar disorders as two related mental illness, we comprehensively reviewed the scientific literature using GWAS (genome wide association studies) catalog databases to find genome-wide association studies carried out on patients with bipolar disorder EFO_0005203 and eating disorder comorbid condition (anorexia nervosa, binge eating, bulimia nervosa) EFO_0005203.

**Results:** GWAS of eating disorders were found in 33 studies with 324 associations whereas those of bipolar disorder were found in 114 studies with 1469 associations. GWAS of eating disorders

within bipolar disorders revealed 182 and 134 associations, as well as 10 and 8 publications respectively. Only anorexia nervosa and binge eating were studied in association with bipolar disorders. The genetic variants were protein coding genes (CUBN, FAM228B, FXR1, etc.), non-coding RNA genes (SOX2-OT, MMADHC-DT, etc.), and pseudo-genes (RNU1-23P, CACYBPP2, etc.).

**Conclusions:** About 300 genetic variants are associated with eating disorder as a comorbid condition of bipolar disorders. These variants may play a crucial role in the causes and mechanisms of eating disorders and should be more investigated towards more precise clinical and genetic entities.

**Disclosure of Interest:** None Declared

### EPV0454

### Schizophrenia and eating disorders: Epidemiological and clinical characteristics

E. Herelli, M. Lagha, F. Askri*, I. Ben Romdhane, H. Wided and R. Labbane

PSYCHIATRY C, RAZI HOSPITAL, MANOUBA, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.1154

**Introduction:** Schizophrenia is a common mental illness with a wide range of symptoms.

Given the high metabolic comorbidity observed in schizophrenia and the metabolic side-effects induced by the antipsychotics used in practice, the detection of eating disorders is crucial.

These disorders may occur at the same time as psychotic symptoms or independently of them.

**Objectives:** we aim to provide an overview of eating disorders in schizophrenia.

**Methods:** We conducted a systematic search using the 2 bibliographic databases PubMed and Google scholar including the following keywords: "Schizophrenia", "Eating disorders", "Reward mechanisms".

**Results:** Eating disorders are a frequent comorbidity in schizophrenia.

Authors have reported that some patients with schizophrenia have an increased appetite and craving for fatty foods, increased caloric intake and frequency of consumption, which may be associated with increased disinhibition.

According to the literature, binge eating and night eating are frequently observed in patients with schizophrenia, with a prevalence of around 10%.

Studies have shown that people suffering from psychosis and treated with antipsychotics have high rates of binge eating, ranging from 4.4% to 16% for binge eating and from 8.9% to 45% for binge eating symptoms (without reaching the diagnostic threshold for binge eating).

Rates ranging from 16.1% to 64% for cravings were reported.

Anorexia nervosa appears to affect between 1% and 4% of schizophrenic patients.

**Conclusions:** Despite their frequent association with schizophrenia, eating disorders remain little studied. However, it is important to detect these disorders and elucidate the underlying psychopathological and neurobiological mechanisms in order to

better manage metabolic comorbidity and improve patients' quality of life.

**Disclosure of Interest:** None Declared

## EPV0455

### Psychological understanding of Anorexia nervosa gained from combined clinical care

H. Szilárd[1], X. Gonda[1], Á. Menus[1], J. Bognár[2], D. Pólya[3]*,
J. Biliczki[4], Z. Bana[5], Z. Nemoda[6] and J. Réthelyi[1]

[1]Psychiatry and Psychotherapy; [2]Pediatrics Clinic no.1.; [3]Faculty of Medicine, Semmelweis University; [4]Psychiatry, Peterfy Hospital; [5]Clinical Psychology and [6]Molecular Biology, Semmelweis University, Budapest, Hungary
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.1155

**Introduction:** Anorexia nervosa (AN) is a debilitating illness with rapidly increasing incidence. The longer it lasts the more difficult is to cure. Although in the majority of the cases the main treatment is psychotherapy severe cases require inpatient admission for life saving support. The presentation expounds the combined therapeutic approach that anorexia nervosa patients of Semmelweis University Psychiatry and Psychotherapy Department provided with.
Currently the backbone of psychotherapy *for AN* is cognitive behavioral therapy (CBT), schema therapy and katathym imaginative psychotherapy (KIP) combined with psychodrama.
**Objectives:** One of the aims of our research is to identify the most relevant focus of psychotherapy by identification of specific personality traits in patients with AN, who will be compared with healthy controls. Furthermore, two subgroups of patients will be compared with each other: the milder version of AN (BMI above 16) with the more severe form of AN who are required inpatient admission.
**Methods:** Women with AN (age:18-45) have been compared to age-matched controls on MINI and SCID-5-AMPD interview variables and on the scales of online questionnaires, such as EDI-I., MZQ, DIS-Q, SCL-90, PHQ-9, STAI, CTQ and YPI.
**Results:** Clinical care highlighted important underlying psychological causes such as inadequate mirroring, absence of the father, or on the contrary, overly intimate relationship with the father, and relentless inner voice as a consequence of unintegrated inner aspects. The SCID-5-AMPD pointed out affected areas of personality such as Identity, Self-directedness, Negative affectivity, Intimacy, Alienation. Importantly, neither trauma scales (measured by CTQ), nor dissociation (measured by DIS-Q) differed significantly between patients and healthy controls.
**Conclusions:** Planning psychotherapy could benefit from the identified foci. Anti-depressive medication must be considered in order to improve outcome of inpatient admission. The CTQ probably does not measure the subtle but chronic inadequacy of attachment and mirroring that apparently are typical in AN. The reliable identification of the typical dissociative inner voice that often seen in anorexia nervosa may need another questionnaire apart from DIS-Q.
*The research is supported by bilateral science and technology (S&T) cooperation project 2019-2.1.11-TÉT-2020-00242*

**Disclosure of Interest:** None Declared

## EPV0456

### Anorexia nervosa and hyperphagic episodes : About five clinical cases

I. Belabbes

hospital arazi, sale, Morocco
doi: 10.1192/j.eurpsy.2024.1156

**Introduction:** Eating disorders affect almost one million people in France. More than half of them have not been screened for the disorder, and are still unable to access treatment!
**Objectives:** To shed light on the clinical characteristics and management of patients with eating disorders
**Methods:** We report on a series of clinical situations involving patients presenting with binge eating disorder at the adolescent unit of the Gonesse hospital.
**Results:** Our sample included 5 patients, all female, aged between 13 and 16 years. They presented with anorexia nervosa with or without hyperphagia. Comorbidities included depression, anxiety disorders, chronic illness and suicidality.
In some cases, treatment is based on re-feeding via a nasogastric tube. In others, behavioral treatment was sufficient. Pharmacological treatment for comorbidities was prescribed.
**Conclusions:** Untreated eating disorders can be a source of deterioration in patients' quality of life and high mortality. Early detection and diagnosis is essential for better patient management.

**Disclosure of Interest:** None Declared

## EPV0460

### Eating disorders: the increase in requests for help and the optimization of resources

M. Campana[1], M. Colombi[2]*, P. Milanese[1], A. Greco[2] and
C. Mucci[2]

[1]department of mental health and addictions, ASST Bergamo Est, Seriate and [2]Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.1157

**Introduction:** This work aims to provide an updated overview of the eating disorders (EDs) which are a widespread pathology nowadays. Informations related to the clinical-nosographic characteristics, an in-depth analysis about systemic-relational theories and historical evolution are provided. In addition, current informations about epidemiological data, recovery, treatment related implications, new neuroscientific theories and risk factors are shown. Given the complexity of these disorders, the lack of resources and the the increasing demands for treatment, the main object is related to the construction of a questionnaire to manage the waiting lists.
**Objectives:** Building a waiting list management model for EDs, Study and compare advantages and disadvantages of the source allocation ethical models (utilitarianism, prioritarianism, egalitarianism), Analyze EDs leading experts (doctors, dietitians, psychologists, psychiatrists) and EDs patients positioning with respect to