

Results patient had selective/restrictive eating behaviours, daily purges and occasional binges for last five years. At age 14 she was diagnosed with ADHD by impulsivity/aggressiveness and poor school performance, but she did not take drugs and left medical consultations. She came to our specific unit of EDs in november-2015. Her BMI was 24.88 kg/m². We initiated CBT and atomoxetine (80mg/day). In this first year of treatment binges and purges have disappeared and exposure to new foods and body image have improved partially. We found clear improvement in mood, motivation and attention/concentration in relation with introduction of atomoxetine. These facts have positive impact on the clinical evolution. Her current BMI is 26.90 kg/m².

Conclusions Identify comorbid ADHD to assess the use of specific drugs for this disorder could be beneficial in the treatment and prognosis of EDs. However, more studies are needed to determine effectiveness, particularly of non-stimulant drugs.

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Theory of mind in binge eating disorder: an exploratory study

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Introduction to date, studies on the relationship between Theory of Mind (ToM) and eating disorders (ED) have never considered binge eating disorder (BED).

Aims a) to assess ToM abilities in a sample of patients suffering from BED comparing them with healthy controls; b) to evaluate the influence of several variables (demographic, clinical and neuropsychological dimensions, attachment styles, traumatic events, comorbid Axis I and II disorders) on ToM abilities.

Methods we assessed ToM in a sample of 20 BED patients and 22 women from the general population using the Reading the Mind in the Eyes Test (RMET) and the Faux Pas Test (FPT).

Results regarding the first aim, the comparison between groups showed that the clinical group scored significantly lower than the control group on the RMET as well as on FPT. Regarding the second aim, two different multiple regression models were performed: one for the RMET and one for the FPT. Both of them led to significant results. When modeling RMET score, it emerged that age and Binge Eating Scale significantly reduce the score, while vocabulary and drive for thinness have a positive effect ($r^2 = 0.62$). When modeling FPT score, we found that central coherence and binge eating significantly reduce the total score ($r^2 = 0.33$).

Conclusions our study begins to shed light on the relationship between ToM and BED; in particular, it suggests that BED patients have lower mentalization skills than healthy controls and ToM abilities are partially influenced by clinical variables related to eating pathology.

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Some stay the same: Personality change after treatment for eating disorder

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Introduction Strong evidence establishes a close relationship between personality traits and mental illness; where personality can be said to influence the likelihood, severity and longevity of a mental disorder. Personality is usually seen as fixed, yet there is a growing body of evidence for the changeability of personality, though this has rarely been studied in relation to mental disorders.

Objective To study the longitudinal interplay between personality and eating disorders (EDs), particularly the associations between personality, recovery and treatment modality.

Aims To investigate changes in the five domains and thirty lower-level facets of personality in non-underweight EDs, and its associations to intervention and outcome.

Methods Two hundred and nine adults with EDs enrolled either in a four-month multimodal psychodynamic group-therapy (DAY) or four-six month internet-based supported cognitive behavioural therapy (iCBT). ED diagnosis and personality (by the five-factor model) were assessed at baseline, termination and 6-month follow up. Structural equation modeling was used to analyze domain-level development, and reliable change (RCI) for facet-level development.

Results Remission rate at end of treatment was 71% in DAY and 55% in iCBT. Over time, Neuroticism decreased significantly while Extraversion, Openness and Conscientiousness increased ($P < 0.01$). Treatment and outcome had little influence on domain-level change. At the facet-level, 28% of patients reliably changed in any given facet, and there were several differences in pattern based on treatment and outcome.

Conclusions This study lends support for the possibility of personality change and its relevance for recovery from EDs.

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

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Run for it: Compulsive exercise in adolescents with eating disorders – a nationwide longitudinal study

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Introduction Rigorous exercise to control weight and/or shape and to avoid negative affect has been proposed as significant in the etiology, development and maintenance of eating disorders (EDs), resulting in more severe and enduring pathology. However, few studies have investigated compulsive exercise (CE) among adolescents with EDs.

Objective To study the longitudinal relationship between EDs and CE in adolescents.

Aims to investigate if adolescent ED patients show a similar relation between EDs and CE as previous research has found in adults.

Methods A total of 3116 girls and 139 boys from a nationwide clinical EDs database were investigated on CE prevalence and frequency in relation to ED diagnosis, psychiatric symptoms, associated features and outcome. Denial of illness in self-ratings was adjusted for.