

**Introduction:** Previous studies have established a relation between childhood maltreatment and eating disorder behaviors. However, this pattern of relations has not yet been studied within the nuclear family interactions.

**Objectives:** The aim of this study was to examine a model illuminating the transgenerational mechanism underlying the association between childhood maltreatment and eating disorder behaviors.

**Methods:** One-hundred-sixty-eight Israeli mothers and their young-adult-daughters (discovery sample) and 143 Israeli grandmother-mother-daughter triads (replication sample) filled out a battery of questionnaires assessing their history of childhood maltreatment and level of eating disorder behaviors.

**Results:** Results of structural equation modeling (SEM) in the discovery sample indicated that mothers' childhood maltreatment was associated with daughters' childhood maltreatment and that mothers' eating disorder behaviors were also associated with daughters' eating disorder behaviors. In addition, for both mothers and daughters, childhood maltreatment was associated with eating disorder behaviors. Finally, an indirect effect was found in which the relation between mothers' childhood maltreatment and daughters' eating disorders was mediated by mothers' eating disorders. Partial replication was observed; grandmothers' childhood maltreatment was significantly associated with mothers' childhood maltreatment. Grandmothers' eating disorder behaviors were associated with mothers' eating disorders and mothers' eating disorders were associated with daughters' eating disorders. Finally, an indirect effect was found in which the association between grandmothers' eating disorders and daughters' eating disorders were mediated by mothers' eating disorders.

**Conclusions:** These findings point to the significant contribution of the mother-daughter relationship in different aspects of the intergenerational transmission of both childhood maltreatment and eating disorder behaviors. These findings highlight the need to include a trauma-informed family-system approach in the treatment of eating disorders.

**Disclosure of Interest:** None Declared

## EPP0823

### Clinical and psychometric correlates of binge eating behaviors during the COVID-19 pandemic

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**Introduction:** Binge eating behaviors are associated with psychological, social, and biological factors, while it is suggested that they may be triggered by negative emotions, including depression and anxiety, and provide relief from them, which in turn may lead to reinforcement of such behaviors.

**Objectives:** This study aimed to examine the eating habits and in particular the binge eating behaviors of a sample of adults during

the COVID-19 pandemic, an unprecedented challenge for public health and communities worldwide with multi-level consequences on people's lives.

**Methods:** The sample consisted of 196 individuals residing in Greece aged 18 to 64 years (76.5% women), who completed an anonymous questionnaire from June to July 2021. This included the following psychometric instruments: Fear of COVID-19 Scale to assess the fear related to COVID-19, Rosenberg Self-esteem Scale to assess self-esteem, Depression Anxiety Stress Scale-21 to assess anxiety, depression and stress, Binge Eating Scale to assess binge eating behaviors, UCLA Loneliness Scale for the evaluation of the perceived feeling of loneliness and Reflective Functioning Questionnaire for the assessment of reflective functioning (i.e., the ability to understand human behavior in terms of underlying mental states).

**Results:** The majority of participants (86.7%) reported that during the pandemic their diet was less healthy than before the pandemic onset, while almost half (46.4%) of the participants stated that they had experienced an episode of binge eating during the past 6 months, and 36.2% that they had used self-induced vomiting in order to control their weight. Of note, the results of a multiple regression analysis revealed that higher levels of fear of the pandemic as well as of depression were independently associated with higher binge eating, with women presenting higher mean scores in the Binge Eating Scale than men. Conversely, higher self-esteem appeared to be independently associated with lower binge eating levels, thus acting as a protective factor, whereas the remaining psychometric factors were not found statistically significantly related.

**Conclusions:** In conclusion, the findings of the present study highlight the importance of identifying dysfunctional eating behaviors and related psychological factors that may potentially act as risk or protective factors, especially during the pandemic.

**Disclosure of Interest:** None Declared

## EPP0824

### Is social media important in adolescents with eating disorders?

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**Introduction:** Eating disorders (ED) are complex entities of multi-causal etiology that mainly affect adolescents and young women. For this reason, EDs frequently cause medical and psychological complications that can cause potentially irreversible developmental sequelae during adolescence.

96% of Spanish youth (15-29 years old) use daily Internet. In addition, 83% use Social Networks. Internet could be a good way to spread information through social media, websites, providing material and means to achieve the body culture purpose.

As we have seen in various papers, social media can influence and trigger the development of EDs.

**Objectives:** The objectives of the study are to analyse the preferred social network by adolescents diagnosed with eating disorders, as well as to measure characteristic and time-use of these networks.

**Methods:** We decided to undergo a transversal study to analyse the use of social media. For that, we developed a survey to reflect the use of the main social networks (Instagram, Facebook, Snapchat, Twitter, YouTube and Reddit) in adolescents diagnosed with eating disorders in Spain, who are in outpatient treatment in a specialised ED unit.

**Results:** The total number of adolescents interviewed was 65; of these 96.9% were females and 3.1% males. The mean age was 14.8 years.

The preferred social network was Instagram (54%), followed by TikTok (34%) and YouTube (6%).

Most of the patients interviewed (68%) admitted checking Instagram daily, and 31% reflected spending between 1-3 hours/day. None of the adolescents reported using Facebook or Reddit.

The majority of adolescents (89%) admitted having ignored friend requests while 12% reflected the importance of having a high number of followers as a way of external validation, getting more 'likes' and getting to know more people.

**Conclusions:** The obtained results reinforce the need of exploring and taking into account the use of Social Media in adolescents with ED and how it may influence their pathology. There is a need for further prospective research in this field.

**Disclosure of Interest:** None Declared

## EPP0825

### Anorexia Nervosa and Autism Spectrum Disorder: what links them?

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**Introduction:** According to the literature, about 35% of patients with Anorexia Nervosa (AN) also have a diagnosis of Autism Spectrum Disorder (ASD), and this comorbidity occurs more frequently in males.

**Objectives:** With this work, the authors intend to address the characteristics present in this comorbidity and what is the impact of this comorbidity in the diagnosis, approach and prognosis of AN.

**Methods:** Non-systematic research of the literature through the PubMed database with the terms "autism spectrum disorder" and "anorexia nervosa". Only surveys conducted in the last 10 years were considered for inclusion.

**Results:** Although AN and ASD may seem to be quite distinct conditions, the studies found suggest the existence of four characteristics that overlap the two diagnoses: deficits in theory of mind, inability to switch between courses of action fluently, inability to see the whole pictures to the detriment of detail and alexithymia. Studies also point to greater resistance to treatment in AN when an ASD is present in comorbidity.

**Conclusions:** Scientific evidence suggests that autistic characteristics in people with AN are not a consequence of being underweight, but rather stable characteristics present before and after the onset of

AN. The studies thus conclude that comorbidity between the two disorders exists and is frequent enough to warrant greater attention to the diagnosis of ASD in people with AN. However, there are still no specific guidelines for the treatment of AN in people with ASD, which leads to a worse response to treatment, evolution and prognosis of AN in people with ASD.

**Disclosure of Interest:** None Declared

## EPP0826

### EMOTIONAL PROCESSING IN ANOREXIA NERVOSA - WHAT IS THE ROLE OF NEUROMODULATION?

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**Introduction:** Anorexia Nervosa (AN) is an Eating Disorder (ED), being globally characterized by a low body mass index (BMI), intense fear of gaining weight, and distorted body image that motivates extreme food restrictions. The consequence is massive weight loss.

AN is the third leading cause of chronic illness among adolescents and the leading cause of death among psychiatric conditions.

Among patients with AN it is common the occurrence of psychiatric comorbidities, particularly depressive and anxiety syndromes. Negative emotions are very common and represent either primary aspects of the disease or arise secondarily to psychopathological or organic processes.

The therapeutic options for AN are scarce and only work for a small percentage of subjects.

It is known that difficulty in emotional regulation is one of the defining characteristics of ED, being a core feature of AN psychopathology.

**Objectives:** To highlight the importance of understanding the neurobiology of AN, how it is related to emotional processing and future directions for AN's management.

**Methods:** Non-systematic review of the literature using *Pubmed* database. Papers were selected according to their relevance.

**Results:** In recent literature, in purging AN-type (neurobiology similar to Bulimia Nervosa - BN), binge eating is a method of emotional regulation, while in restricting AN-type, food restriction is the way to deal with emotions, mainly negative emotions.

It is known that in AN, patients tend to eat less than usual in response to a negative emotion and more than usual in response to a positive emotion. In BN, the neurobiology works in a mirrored way, patients eat less than usual in response to a positive emotion and more than usual in response to a negative emotion.

In short, in the face of negative emotions, subjects with AN respond with dietary restriction and, subjects with BN respond with binge eating. On the other hand, more positive emotions seem to resolve the maladaptive eating behaviours inherent to both ED, with AN and BN subjects tending towards more balanced eating behaviours. One of the brain areas most implicated in the neurobiology of AN is the left dorsolateral prefrontal cortex (L-DLPFC), since this region is recognized as being involved in decision-making process and emotional regulation, and is therefore the target of novel and