

on patient characteristics, treatments, clinical outcomes, and healthcare utilization were collected during a 90-day follow-up. Data collection is still ongoing.

**Results:** Sixty-four evaluable patients were considered for this interim analysis: 41 (64.1%) females, mean [SD] age 46.0 [15.4] years, a concomitant psychiatric diagnosis in 7 (10.9%), and other comorbidities in 26 (40.6%). The baseline mean [SD] MADRS total score was 37.5 [7.2], with severe MDE and prior suicidal behavior in 30 (46.9%) and 21 (32.8%) patients, respectively. Median [25th;75th percentiles] duration of current MDE was 1.1 [0.3;2.1] months. Acute inpatient hospitalization was provided for 43 (67.2%) patients. Antidepressant augmentation with mood stabilizers and/or antipsychotic drugs and optimization were the most frequent early standard-of-care treatment regimens in 32 (53.3%) and 24 (40.0%) patients with available data (N=60), respectively.

**Conclusions:** Our preliminary results suggest that initial treatment approaches in this critical population are mostly polypharmacological and delivered as inpatient care, with consequent intensive resource utilization.

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**Keywords:** suicidal ideation; major depressive disorder; real world; standard of care

## EPP0064

### Association of genetic variants of Glutamate Metabotropic Receptor 5 gene and state-anhedonia

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**Introduction:** Anhedonia is one of the core symptoms of depression. It is known that in case of depressed individuals experiencing anhedonia, the classical antidepressants are often ineffective, thus investigation of this symptom would be essential. Recent studies highlight the possible role of the glutamatergic system in anhedonia however, the genetic background of these assumptions is still unclear.

**Objectives:** Our goal was to investigate the possible associations between state-anhedonia and genetic variants from *GRM5* (Glutamate Metabotropic Receptor 5) gene.

**Methods:** For our analysis we used data from the NewMood (New Molecules in Mood Disorders, LSHM-CT-2004-503474) project. Participants (n = 1820) aged between 18-60, were recruited in Budapest and in Manchester. All volunteers filled out mental-health questionnaires and provided DNA sample. Genotyping was performed by Illumina's CoreExom PsychChip. Altogether

1282 variants from *GRM5* gene survived the genetic quality control steps. State-anhedonia was measured with an item from the Brief Symptom Inventory questionnaire. We performed logistic regression using Plink 2.0. During our analyses, age, gender, population and the top10 principal components of the genome were added into the model as covariates. Correction for linkage-disequilibrium were performed with LDlink.

**Results:** After the correction of linkage-disequilibrium, three independent variables ( $r^2 < 0.2$ ), (rs1827603, rs6483520, rs35669869) yielded significant ( $p < 0.05$ ) results, both in additive and in dominant model. In case of recessive model, only rs11020880 showed significant ( $p < 0.05$ ) effect.

**Conclusions:** The detected nominally significant associations between state-anhedonia and genetic variants from *GRM5* gene strengthen previous assumptions about the possible relationship between glutamatergic system and anhedonia.

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**Keywords:** Glutamate; GRM5; Genetics; anhedonia

## Eating Disorders 01

### EPP0065

#### Links between posterior pituitary activity, psychometric profile and other endocrine abnormalities in anorexia nervosa: a multimodal evaluation

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**Introduction:** Opioid system activity was found disturbed in several reward circuit areas in restrictive anorexia nervosa (AN) patients but also at the pituitary level. The role of this specific abnormality in AN physiopathology remains unknown.

**Objectives:** We aimed to evaluate the relationship of upper mentioned AN abnormality with its classical pituitary features and eating behavior traits.

**Methods:** PET [<sup>11</sup>C] diprenorphin binding potential (BP<sub>ND</sub>) were processed for each pituitary part in three groups of young women: 12 AN, 11 recovered AN patients (ANrec), and 12 Controls. Anterior pituitary hormones and neurohypophysis (NH) 12 points circadian profile including copeptin and oxytocin, psychological scores were evaluated in these subjects as well as in 13 bulimic (BN) patients.

**Results:** [<sup>11</sup>C] diprenorphin pituitary binding was found to be fully localized in NH. Only AN patients' NH present lower [<sup>11</sup>C] diprenorphin BP<sub>ND</sub> than Controls, interpreted as a higher opioid tone. Both AN and ANrec show lower copeptin/24h than in Controls but no difference in oxytocin. BN showed increased copeptin and low

oxytocin. In AN patients copeptin inversely correlate with Restrained Eating while oxytocin correlate with the External Eating score. NH [<sup>11</sup>C] diprenorphin BP<sub>ND</sub> correlated with leptin but not with copeptin or oxytocin.

**Conclusions:** Neurohypophysial opioid tone in anorexia nervosa seem not to impact the vasopressin or oxytocin release but still may interfere in gonadal axis regulation. Copeptin, a good indicator of hydration state, may be a good tool to detect hidden restrictive or purging behaviors. Specific correlates with AN psychologic features still suggest a physiopathological involvement.

**Disclosure:** No significant relationships.

**Keywords:** Anorexia nervosa; Copeptin; Oxytocin; Cerebral opioid tone

## EPP0067

### Digital Hazards for Feeding and Eating - meta-analysis and discussion of putative mechanisms

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**Introduction:** Eating disorders are widespread illnesses with significant impact. There is growing concern about how those at risk of eating disorders overuse online resources to their detriment.

**Objectives:** We present systematically gathered and pooled quantitative evidence from our review and meta-analysis study which aimed to provide a quantitative synthesis of all available data linking problematic usage of the internet (PIU) and eating disorder and related psychopathology. We synthesize how PUI influences eating disorder and related psychopathology, and examine what the moderating parameters influencing this relationship are.

**Methods:** Our systematic review and meta-analysis protocol was pre-registered electronically in PROSPERO international register and included case-control studies using correlational statistics of association between internet use (various facets) and eating disorder psychopathology. Experimental and prospective studies are systematically reviewed separately.

**Results:** The meta-analysis comprised n=32,295 participants, in which PUI was correlated with significant eating disorder general psychopathology Pearson  $r=0.22$  (s.e.=0.04,  $p<0.001$ ), body dissatisfaction  $r=0.16$  (s.e.=0.02,  $p<0.001$ ), drive-for-thinness  $r=0.16$  (s.e.=0.04,  $p<0.001$ ) and dietary restraint  $r=0.18$  (s.e.=0.03). Effects were not moderated by gender, PUI facet or study quality. Results are in support of PUI impacting on eating disorder symptoms; males may be equally vulnerable to these potential effects. Prospective and experimental studies in the field suggest that small but significant effects exist and may have accumulative influence over time and across all age groups.

**Conclusions:** Those findings are important to expand our understanding of PUI as a multifaceted concept and its impact on multiple levels of ascertainment of eating disorder and related psychopathology. Putative specific effects of PUI on EDs are discussed.

**Disclosure:** No significant relationships.

**Keywords:** meta-analysis; internet addiction; Eating Disorders; problematic use of the internet

## EPP0068

### Higher levels of concern about dieting and moderate-intensity physical activity predict orthorexia nervosa among young adults

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**Introduction:** In some individuals, interest in healthy attitudes and behaviours towards food may show obsessive signs. Preoccupation with 'healthful' eating may contribute to orthorexia nervosa (ON) – a strong preoccupation with "healthy eating" manifested by the avoidance of all foods considered by the individual to be "unhealthy".

**Objectives:** The objective of the present study was to determine whether disordered eating behaviour, physical activity and self-esteem are predictors of ON in young adults.

**Methods:** Five hundred fifty-four Polish and Italian university students participated in the present study. Participants were asked to answer the Eating Habits Questionnaire, the Eating Attitudes Test, the International Physical Activity Questionnaire and the Rosenberg Self-Esteem Scale.

**Results:** Our findings found that higher levels of concern about dieting and moderate-intensity physical activity were related to ON. Particularly, higher levels of concern about dieting, bulimic behaviour and thoughts about food and moderate-intensity physical activity predicted problems associated with healthy eating. Higher levels of concern about dieting, self-esteem as well as self-control of eating and perceived pressure from others to gain weight were associated with knowledge of healthy eating. Whereas, higher levels of concern about dieting with country factor (Poland) predicted feeling positively about healthy eating.

**Conclusions:** In ON treatment, reduction in symptoms and concerns characteristic of eating disorders and adequate levels of physical activity should be taken into consideration.

**Disclosure:** No significant relationships.

**Keywords:** orthorexia nervosa; physical activity; Eating Disorders; young adults

## EPP0069

### Eating behaviour among adults with different levels of emotional suppression and eating disorder symptomatology

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**Introduction:** Research has shown that emotional suppression, a form of emotion regulation, is often used by individuals with