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**Introduction:** Anxiety disorders are leading contributors to the global disease burden, highly prevalent across the lifespan, and associated with substantially increased morbidity and early mortality.

**Objectives:** The aim of this study was to examine age-related changes across a wide range of physiological measures in middle-aged and older adults with a lifetime history of anxiety disorders compared to healthy controls.

**Methods:** The UK Biobank study recruited >500,000 adults, aged 37-73, between 2006-2010. We used generalised additive models to estimate non-linear associations between age and hand-grip strength, cardiovascular function, body composition, lung function and heel bone mineral density in cases vs. controls.

Results: The main dataset included 332,078 adults (mean age = 56.37 years; 52.65% females). In both sexes, individuals with anxiety disorders had lower hand-grip strength and blood pressure than healthy controls, while their pulse rate and body composition measures were higher. Case-control differences were larger when considering individuals with chronic and/or severe anxiety disorders, and differences in body composition were modulated by depression comorbidity status. Differences in age-related physiological changes between female anxiety disorder cases and healthy controls were most evident for blood pressure, pulse rate and body composition, while in males for hand-grip strength, blood pressure and body composition. Most differences in physiological measures between cases and controls tended to decrease with age increase.

**Conclusions:** Individuals with a lifetime history of anxiety disorders differed from healthy controls across multiple physiological measures, with some evidence of case-control differences by age. The differences observed varied by chronicity/severity and depression comorbidity.

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Keywords: Anxiety; Ageing; Physiology; UK Biobank

## **EPP0175**

## Comparison of Metacognitions in Obsessive-Compulsive Disorder, Generalized Anxiety Disorder, and Healthy Controls

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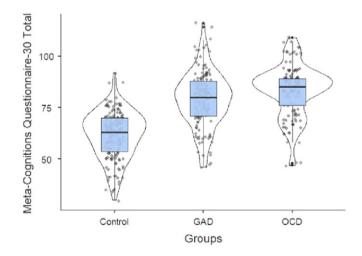
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**Introduction:** Generalized anxiety disorder (GAD) and Obsessive compulsive disorder (OCD) are common psychiatric disorders. Researchers studying the pathophysiology of these two disorders evaluated the effect of metacognition. However, there is no research examining the metacognition differences of these two psychiatric conditions.

**Objectives:** This study was performed to compare the metacognitions in OCD, GAD and healthy controls.

Methods: The sample of this study consisted of 158 GAD and 137 OCD patients aged 18-65 years who presented to outpatient psychiatry clinic and applied to the health committee 168 healthy controls without psychopathology. Sociodemographic data form, Meta-Cognitions Questionnaire-30 scale(MCQ-30), Beck Depression Inventory(BDI) and Beck Anxiety Inventory(BAI) were applied to the volunteer participants who met the criteria for participation in the study. The data obtained were evaluated statistically and subjected to statistical analysis.

**Results:** The mean age was  $31.89 \pm 10.86$  years and was 60.5% (n = 208) women. There was statistical difference between marital status, occupation and income(p <0.05). In addition, there was a statistically significant difference between MCQ-30 total and subscales, BDI and BAI (p <0.001). According to the comparison of OCD and GAD patients, 'positive belief', MCQ-30 total and BAI scores were found to be statistically different (p <0.05), 'Uncontrollability and danger', 'Cognitive Confidence', 'Beliefs about The Need to Control Thoughts', 'Cognitive Self-Consciousness', BDI there was no statistical difference between them (p> 0.05).



**Conclusions:** Our results are contributing to the understanding of the uncertainty of development and maintenance of OCD and GAD. Additionally, metacognitions could be important for the diagnosis and treatment of OCD and GAD.

**Disclosure:** No significant relationships.

**Keywords:** Generalized anxiety disorder; metacognition; obsessive compulsive disorder

## **EPP0178**

## Preliminary evidence for a Theory of Mind impairment in patients with Anxiety Disorders

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