(CTQ-28), Relationship Scales Questionnaire (RSQ), Dysfunctional Attitudes Scale (DAS), Temperament Evaluation of Memphis, Pisa, Paris and San Diego (TEMPS-A) and Functioning Assesment Short Test (FAST).

Results: In the patient group scores of childhood traumas, dysfunctional attitudes, cyclothymic, depressive and anxious temperaments, all domains of functional impairment scores except financial issues, and overall functional impairment scores were significantly higher than the control group. Besides this, secure attachment scores were significantly higher in the control group. In the regression analysis anxious temperament and subclinical depressive symptoms significantly positively predicted functional impairment and hyperthymic temperament significantly negatively predicted functional impairment in patients with bipolar disorder.

Conclusions: In the assessment of functioning of patients with bipolar disorder subclinical depressive symptoms, hyperthymic and anxious affective temperament styles might be taken into consideration.

Disclosure: No significant relationships.
Keywords: attachment; affective temperament; functional impairment; bipolar disorder

EPP0103

Binge Eating Disorder in Patients with Bipolar Disorder and Relationship with Clinical Features

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Introduction: Current studies indicate a strong relationship between Eating Disorders and obesity, while studies on Bipolar Disorder (BPD) show that patients with BPD form an important risk group in terms of obesity.

Objectives: The aim of this study is to investigate the frequency of Binge Eating Disorder (BED) in patients diagnosed with euthymic Bipolar Disorder 1 (BPD 1), and the relationship between their clinical features

Methods: This study included 150 patients between 18-65 years of age, diagnosed with euthymic BPD 1 according to DSM 5 criteria. Structured Clinical Interview for DSM-5 Disorders, Structured Sociodemographic Form, Young Mania Scale, Beck Depression Scale, Eating Disorders Assessment Scale (EDAS) , Eating Attitude Test (EAT) were applied to participants.

Results: A diagnosis of BED was detected in 19.3% of the patients. Body weight, highest weight and BMI values were significantly higher in those who were diagnosed with BED compared to those who were not diagnosed with BED. Most of the diagnosed with BED are women; gender was found to be determinant for BED. The total and subscale scores of EAT and EDAS of those with a diagnosis of BED were statistically significantly higher than those who did not. The rate of attacks with psychotic symptoms, rapid cycling and presence of suicide attempt were significantly higher in those with a diagnosis of BED compared to those who did not.

Conclusions: BED may be frequent in BPD 1 patients. Noticing BED in BPD1 patients might help both the more effective treatment of BPD and the prevention of obesity.

Disclosure: No significant relationships.
Keywords: obesity; eating disorder; bipolar disorder; binge eating disorder

EPP0104

A multicentric multimodal in vivo microscopy MRI study of bipolar disorder reveals axonal loss and demyelination.

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Introduction: Bipolar disorder has been repeatedly associated with abnormalities of white matter. However, DTI is intrinsically limited and the precise cellular mechanisms that underlie these alterations remains unknown.

Objectives: Our aim was to investigate microscopical characteristics of white matter using MRI in patients with bipolar and healthy controls.

Methods: 77 patients and 71 controls from 3 sites had a T1 structural MRI, a multi-shell HARDI MRI and at one site with a T1-weighted VFA-SPGR acquisition, and a T2 MSME acquisition. The volume fraction and the orientation dispersion was extracted using NODDI from DW images in each site. Myelin Water Fraction was extracted in 33 patients and 36 controls to probe myelin characteristics. White matter bundles were reconstructed using deterministic tractography. Statistical analyses were performed after harmonization by the ComBat algorithm and controlled for age, gender and handedness.

Results: We found significant lower axonal density in patients along the short fibers of the left cingulum, the left anterior arcuate and the left inferior fronto-occipital fasciculus. We found lower mean MWF in patients along the short fibers of the right cingulum, the left inferior fronto-occipital fasciculus, the left anterior arcuate and the splenium of the corpus callosum. We found higher mean orientation dispersion in patients only along the left uncinate fasciculus.

Conclusions: We report alterations of limbic and interhemispheric white matter tracts in patients with bipolar disorder reflecting axonal loss, demyelination and architecture alterations. These results contribute to better capture the plurality of the mechanisms involved in bipolar disorder that cannot be deciphered with classical diffusion MRI.

Disclosure: No significant relationships.
Keywords: MRI; White matter; bipolar disorder; microscopy