

O0074

Associations between COVID-19 pandemic impact, dimensions of behavior and eating disorders: a longitudinal UK-based study

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Introduction: There is growing concern about how people with eating disorders are impacted by the widespread societal restructuring during the COVID-19 crisis.

Objectives: We aimed to examine how factors relating to the impact of the pandemic associate with eating disorders and quantify this relationship while adjusting for concurrent and longitudinal parameters of risk.

Methods: We gathered demographic, behavioral and clinical data pre- and mid-pandemic as well as childhood trauma history from a longitudinal online survey of 489 adults (mean age 23.4 years) recruited from the Neuroscience in Psychiatry Network (NSPN). Using pre-pandemic (T1) and concurrent (T2) data we aimed to predict eating disorders at mid-pandemic (T2). We deployed hierarchical generalized logistic regression to ascertain the strength of longitudinal and concurrent associations.

Results: Pre-pandemic eating disorder scores strongly associated with concurrent eating disorder ($z=5.93$). More conflict at home mid-pandemic ($z=2.03$), pre- (lower sensation seeking $z=-2.58$) and mid-pandemic (higher lack of perseverance $z=2.33$) impulsivity traits also associated with mid-pandemic eating disorder. Significant correlations between pandemic-related disrupted lifestyle and eating disorder psychopathology both pre- and mid-pandemic were observed.

Conclusions: Conflict at home mid-pandemic and specific aspects of impulsiveness significantly associated with concurrent eating disorder when adjusted for pre-pandemic eating disorder symptoms, baseline demographics, behavioral traits, history of traumatic experiences and concurrent psychopathology. These results provide insight into the struggles of those suffering with eating disorders during the COVID-19 pandemic and highlight the importance of impulsiveness traits and the immediate family environment in their experience of illness during the pandemic.

Disclosure: No significant relationships.

Keywords: pandemic; Eating Disorders; Covid-19; Impulsivity

O0072

Anorexia nervosa admissions during the COVID-19 pandemic: results from a Department of Psychiatry in northern Portugal

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Introduction: Emerging evidence suggests that the COVID-19 pandemic had a negative impact on mental health. In particular,

patients with Anorexia nervosa (AN) may have faced increased symptom severity.

Objectives: To compare the clinical characteristics of inpatients with AN admitted amidst the COVID-19 pandemic versus the two previous years.

Methods: Retrospective observational study of inpatients admitted between January 2018 and December 2020 in a psychiatry inpatient unit of a tertiary hospital.

Results: There were 11 admissions of patients with AN in 2020 (8 from March onwards), a 22% increase relative to 2019, which in turn saw a 28% increase in admissions relative to 2018. Most patients had an AN diagnosis previous to the pandemic. The majority were undergoing outpatient treatment for over a year. Two patients were admitted within a month of outpatient treatment. There was an increase in admissions through the emergency service in 2020. The most frequent diagnostic was AN binge-eating/purging type in 2020 and 2019, whereas in 2018 the AN restrictive type was dominant. Mean BMI at admission and average length of stay were similar across the three years. Readmission in a 12-month period was 54,5% in 2020 (22,2% in 2019 and 42,9% in 2018).

Conclusions: Despite the widespread impression of a negative impact of the pandemic on AN patients, in our study the clinical characteristics of AN patients admitted in 2020 were mostly similar to the two previous years. Readmissions were higher in 2020, therefore future analysis of data from 2021 might be more enlightening.

Disclosure: No significant relationships.

Keywords: Covid-19; Inpatient care; Anorexia nervosa

O0074

Nucleus accumbens functional connectivity and circulating endocannabinoids levels in anorexia nervosa

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Introduction: Neuroimaging findings have reported aberrant functional connectivity in brain regions involved reward system

in individuals with anorexia nervosa (AN) altering hedonic processing over food. Likewise, endocannabinoids such as Anandamide (AEA) and 2-Arachidonoylglycerol (2-AG) have been involved in rewarding aspects of food intake.

Objectives: To identify nucleus accumbens (NAcc) functional connectivity with whole-brain comparing between individuals with AN and controls. Furthermore, in a sub-study, to explore the interaction between NAcc functional connectivity and peripheral AEA and 2-AG levels.

Methods: A total of 60 adult women (18 to 56 years of age) took part in the present study. Twenty-six individuals belonged to the AN group (BMI<18) and 34 to the HC group (BMI=18-24.99). All participants underwent functional magnetic resonance in resting-state, and blood samples were obtained in fasting.

Results: Negative functional connectivity was observed in the AN group compared with the control group between the NAcc and the cerebellum (pFWE<.001), between the NAcc and the insula (pFWE<.001), between the NAcc and the supramarginal gyrus (pFWE=.019), and between the NAcc and the postcentral gyrus (pFWE=.010). Analyses exploring the association between NAcc functional connectivity and peripheral endocannabinoids levels displayed altered NAcc-cerebellum functional connectivity was negatively associated with peripheral 2-AG levels in the AN group ($r = -.553$; $p = .011$).

Conclusions: Understanding the interaction between the reward system and peripheral endocannabinoids in patients with AN could contribute to better elucidate the pathophysiology of this disorder. Future studies will need to further investigate the clinical and therapeutic implications of these findings in patients with AN.

Disclosure: No significant relationships.

Keywords: nucleus accumbens; Endocannabinoids; resting-state functional connectivity; Anorexia nervosa

Mental Health Care 1 / Cultural Psychiatry

O0077

Attitudes and knowledge of the tunisian medical staff towards LGBT patients

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Introduction: Sexual minorities have been coming out more than ever before. However, Tunisian laws and society are still not supportive of LGBT (lesbian, gay, bisexual and transgender) rights. To this day, Tunisian doctors are requisitioned to carry out anal tests as part of expert testimonies in cases of conviction for homosexuality.

Objectives: Assess Tunisian physicians' attitudes and knowledge towards LGBT patients.

Methods: We conducted a cross-sectional study in October 2021, among 445 Tunisian physicians and medical students. Data were collected via an anonymous self-administered online questionnaire including sociodemographic data and the LGBT Development of Clinical Skills Scale (LGBT-DOCSS).

Results: The overall LGBT-DOCSS score was quite good (4.47 ±0.85). The attitudes of Tunisian doctors were better than their knowledge ($p=0.01$; $t=2.6$), which was better than their clinical preparedness ($p<10^{-3}$; $t=25$) in treating LGBT patients. Doctors who self-identify as sexual minorities and those who interacted with LGBT people in their daily lives, were less stigmatising, more able to treat them and had better knowledge of their needs. Those who had had sexology training (5%) had better LGBT-DOCSS score ($p=0.013$), better knowledge ($p=0.045$) and preparedness ($p<10^{-3}$) in treating LGBT patients but did not appear to be less stigmatising than the rest of the group ($p=0.9$). Religiosity was associated with a more stigmatising attitude ($p<10^{-3}$), but had no impact on knowledge or preparedness.

Conclusions: This study points to gaps, identified by doctors themselves when faced with an LGBT patient. A more inclusive health system requires better matching of health services to the needs of the whole population without discrimination.

Disclosure: No significant relationships.

Keywords: stigma; Sexual Minorities; quality of care; medical education

O0078

A cross-sectional study of factors associated with life satisfaction in Thai elderly

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Introduction: Aging raises wide-ranging issues within social, economic, welfare, and health care systems. Life satisfaction is regarded as an indicator of the quality of life which, in turn, is associated with mortality and morbidity in older adults.

Objectives: Life Satisfaction is a dimension of happiness and well-being which represents the quality of life in both literacy and every aspect of a person. The purpose of the article is to assess the level of life satisfaction and the factors associated with life satisfaction in old age.

Methods: This research was conducted in a cross-sectional study using 36 items from Satisfaction and Well-being of Elderly (Thai semi-structured in-depth interviews) tools to collect data. The population used in this study was Thai people over 60 and used multistage probability sampling, were held with 2000 elderly individuals from 13 health regions of Thailand.

Results: Of the 2000 samples, the overall life satisfaction was moderate (54.1%). Upon data analysis, ten categories were extracted. However, there are 7 factors that significantly influence the level of life satisfaction of the Thai elderly at $p < 0.05$: Age, Occupation, Recreational activities, Revenue, Education level, Religious activities, and Social Support. Moreover, when tested with Pearson Correlation found that the relationship between and Thai brief screening for depression (2Q) was low correlated ($r -0.121$, $P = 0.000$).