Objectives: To review critically whether there is a robust basis for the concept of an obsessive–compulsive (OC) spectrum of disorders, and if so, which disorders should be included.
Methods: Literature review performed on PubMed and Google Scholar databases, using the keywords "obsessive–compulsive disorder", "obsessive–compulsive spectrum", "body dysmorphic disorder", "hypochondriasis", "trichotillomania", "psychiatry".
Results: Obsessive–compulsive disorder (OCD) itself is a heterogeneous condition or group of conditions, and this needs to be appreciated in any articulation of a 'spectrum' of OC disorders. The basis for 'membership' of the spectrum is inconsistent and varied, with varying level of support for inclusion in the putative spectrum.
Conclusions: A more fruitful approach may be to consider behaviours and dimensions in OCD and OC spectrum disorders, and that this should be encompassed in further developments of the OC spectrum model.

Disclosure of Interest: None Declared

EPV0651

The Fear of Smell: The Relationship Between Obsessive Traits and Self-odor Concern

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Introduction: DSM-5's framing of Obsessive-Compulsive and Related Disorders (OCRDs) paved the way for the increasingly structured definition of obsessive-compulsive spectrum disorders. The spectrum would include, among others, body dysmorphia, hair-pulling, skin-picking, obsessional jealousy, and olfactory reference syndrome (ORS). ORS – i.e., persistent concern about emitting a foul or offensive body odor – causes clinically significant distress or impairment in several areas of functioning.
Objectives: This study aimed to investigate the relationship between obsessive traits and self-odor concern in a clinical sample that did not meet the diagnostic criteria for either OCRDs or ORS.
Methods: In a sample of 220 adults referring to an outpatient Mental Health Service in Bologna, Northern Italy, we measured (1) self-odor concern through two specific items – sweat hatred (SH) and body odor hatred (BOH) – on the Body Uneasiness Test (BUT) and (2) obsessive traits through the total score of the Obsessive-Compulsive Inventory-Revised (OCI-R). Therefore, we performed correlation and regression analysis to examine the relationship between obsessive-compulsive traits and self-odor concern.
Results: We found a positive correlation between OCI-R and SH scores ($r = 0.330$) and OCI-R and BOH scores ($r = 0.188$). Linear regression analysis demonstrated that OCI-R score significantly predicted SH score [$F(1, 218) = 26.455$, $R^2 = 0.109$, $p < 0.001$] and BOH score [$F(1, 218) = 8.017$, $R^2 = 0.035$, $p = 0.005$], highlighting that obsessive-compulsive traits predict both sweat and body odor hatred.
Conclusions: These results demonstrate that obsessive traits and self-odor concern are strictly connected. This knowledge may allow us, even in the absence of an overt diagnosis of OCRDs or ORS, to better identify an at-risk population before it suffers impairment in functioning. Overall, further research is needed to help characterize obsessive-compulsive spectrum disorders before symptom exacerbation.

Disclosure of Interest: None Declared

Old Age Psychiatry

EPV0655

Involvement of the intestinal microbiota in the formation of neurodegenerative disorders

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Introduction: Increased life expectancy, increased prevalence of neurocognitive disorders, various aspects of the concept of "age" and pathogenic the influence of late age on the formation of cognitive deficit was the basis for this study. Bi-directional communication between the brain and the intestine is continuous and supported by the mechanisms that carry out the work of the axis "brain-gut". Increased life expectancy, increased prevalence of neurocognitive disorders,various aspects of the concept of "age" and pathogenicthe influence of late age on the formation of cognitive deficit was the basis for this study. Bi-directional communicationbetween the brain and the intestine is continuous and supported by the mechanisms that carry out the work of the axis"brain-gut"
Objectives: Studied relationships between microbiota of the gastrointestinal tract and CNS diverse and dynamic, including in relation to to age and the aging process. Studied relationships betweenmicrobiota of the gastrointestinal tract and CNSdiverse and dynamic, including in relation toto age and the aging process.
Methods: Microbiotic a person's profile is age-specific. Changes in microbial middle age increase mental, cognitive problems in the elderly and senile age.
Results: Dysbiosis of the intestinal microbiota in AD triggers neuroinflammation, which contributes to the accumulation of Aβ in brain structures and pathological cleavage of the tau protein, which leads to disruption of the functions of microglia, hippocampus, and synaptic transmission. The emergence of a two-way connection through the vagus nerve system between the formations of the digestive tract containing microbiota and the CNS with the formation of a "vicious circle" with the development of age-related pathological processes in the CNS. The diverse and multilevel process of aging in its pathological form embraced the active participation of mental adaptation.
Conclusions: Involvement of the microbiota in the pathogenesis of the disease Alzheimer's suggests that the correction intestinal microflora may have potential value for the prevention of cognitive damage and / or be included in the therapeutic complex, which requires further study and analysis. Involvement of the microbiota in the pathogenesis of the diseaseAlzheimer's suggests that the