

EPP0487

Borderline personality disorder and attention deficit/hyperactivity disorder in adolescence: overlap and differences in a clinical settingO. F. Akca^{1*}, K. Wall² and C. Sharp²¹Child and Adolescent Psychiatry, Necmettin Erbakan University Meram School of Medicine, Konya, Türkiye and ²Psychology, University of Houston, Houston, TX, United States

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Introduction: With increased consensus regarding the validity and reliability of diagnosing Borderline Personality Disorder (BPD) in adolescents, clinicians express concern over the distinction between BPD and Attention-Deficit/Hyperactivity Disorder (ADHD), and its co-morbidity in clinical settings.

Objectives: The goal of this study was to evaluate differences between BPD, ADHD and BPD + ADHD in terms of co-morbid psychiatric disorders and a range of self-reported behavioral problems in adolescents.

Methods: Our sample consisted of N = 550 inpatient adolescents with behavioral and emotional disorders that have not responded to prior intervention. We took a person-centered approach (for increase clinical relevance) and compared adolescents with ADHD, BPD and ADHD+BPD in terms of co-occurring psychiatric disorders and behavioral problems. We performed a regression analysis to test whether BPD symptoms make an incremental contribution to the prediction of psychiatric symptoms over ADHD symptoms.

Results: The severity of almost all co-occurring disorders, aggression, self-harm, suicidal thoughts, and substance use, were higher in the ADHD+BPD group. Borderline symptoms made an incremental contribution to the prediction of psychiatric symptoms beyond the contribution of ADHD.

Conclusions: The findings of this study demonstrated that ADHD and BPD have different psychiatric symptomatology. In addition, subjects who meet criteria for both the BPD and ADHD diagnoses may have more severe psychiatric and behavioral problems compared to individuals with only ADHD or BPD.

Disclosure of Interest: None Declared

EPP0488

Divergent Mentalization Types in Adolescent Borderline Personality Disorder and Attention Deficit/Hyperactivity DisorderO. F. Akca^{1*}, K. Wall² and C. Sharp²¹Child and Adolescent Psychiatry, Necmettin Erbakan University Meram School of Medicine, Konya, Türkiye and ²Psychology, University of Houston, Houston, TX, United States

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Introduction: Attention Deficit/Hyperactivity Disorder (ADHD) and Borderline Personality Disorder (BPD) have several similarities and it is difficult to distinguish these disorders in adolescents.

Objectives: We aimed to identify the unique correlates of mentalization abilities that may distinguish these two disorders, and to

investigate the mentalization abilities of adolescents with ADHD, BPD and ADHD+BPD in an inpatient sample (n=550) to determine the effect of co-morbidity on mentalization abilities.

Methods: We have explored the relationship between Child Eye Test (CET) scores, Movie for the Assessment of Social Cognition (MASC) subscales, and ADHD and BPD symptoms in adolescent inpatients. In addition, we compared ADHD, BPD and ADHD+BPD groups in terms of their mentalization abilities.

Results: Correct MASC scores were negatively associated with both ADHD and BPD symptoms in girls, and negatively associated with ADHD symptoms in boys. In addition, hypermentalization scores were associated with BPD symptoms in girls, and hypomentalization and no mentalization scores were associated with ADHD symptoms in girls. CET scores were negatively associated with ADHD symptoms in girls, but no relations with BPD were found. Group comparisons revealed no significant difference among groups.

Conclusions: We found that while ADHD symptoms are related to hypomentalization, BPD symptoms are rather related to hypermentalization. We believe that these findings make significant contributions to literature aimed at understanding the differences between two disorders which have great commonalities in terms of clinical appearance and developmental course.

Disclosure of Interest: None Declared

EPP0489

Socially Aversive Personality and the symptoms of Body Dysmorphic Disorder in the Korean Young Adult populationS. Han^{1*} and H.-S. Chee^{1,2}¹Psychiatry, Chungnam National University Hospital and ²Institute of Brain Research, Chungnam National University, Daejeon, Korea, Republic Of

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Introduction: Body dysmorphic disorder (BDD) is defined in DSM5 as a preoccupation with one or more perceived defects or flaws in physical appearance causing significant distress or impairment in social and occupational functioning. Despite many studies on mental health disorders related to BDD, the diagnosis is still frequently overlooked.

Objectives: Previous studies have examined the general personality characteristics of BDD. The objective of this study is to find out how socially aversive personality traits are related.

Methods: Total of 86 mentally and physically healthy adults participated. BDD was assessed by BDDE-SR, and aversive personality was assessed by Short Dark Triad (SD3: Machiavellianism, narcissism, psychopathy), Assessment of Sadistic Personality (ASP), and paranoid (PAR), borderline (BOR), and antisocial (ANT) features of the clinical subscales of Personality Assessment Inventory (PAI). Correlations between the reported scores were investigated using Pearson's and regression was performed on relevant scales.

Results: Thirty seven males and 49 females (mean age 23.8 years) showed no statistically significant difference in total BDDE-SR was reported based on sex (p=0.18) or BMI (underweight, normal, overweight, p=0.236). BDDE-SR, SD3 and ASP were not statistically correlated, but all of the subscales of PAR (PAR-H, PAR-P, PAR-R), BOR (BOR-A, BOR-I, BOR-N, BOR-S) and ANT (ANT-A, ANT-E,

ANT-S) were associated with BDDE-SR. Regression results demonstrated in Table 1 show that BOR-I and PAR-R predict BDDE-SR. Correlation of BOR-I and PAR-R with BDDE-SR factors was shown in Table 2.

Table 1. Hierarchical multiple linear regression analysis for BOR-I, PAR-R in predicting BDD symptoms

	B	SE	beta	t	R ²	ΔR ²	F	Sig.
Model 1								
BOR-I	2.812	0.547	0.491	5.140	.241	.232	26.421	.001
Model 2								
BOR-I	2.317	0.568	0.405	4.080	.294	.277	6.073	.016
PAR-R	1.387	0.563	0.245	2.464				

Table 2. Correlation between BDDE Total, five BDDE factors and BOR-I and PAR-R

Variable	BDDE Total	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	BOR-I
BOR-I	.489**	.469**	.370**	.440**	.317**	.352**	
PAR-R	.388**	.311**	.366**	.307**	.302**	.387**	.354**

Note. **p<0.01; Factor 1 : preoccupation, distress and embarrassment; Factor 2 : avoidance; Factor 3 : checking, comparing and camouflaging; Factor 4 : dissatisfaction; Factor 5 : importance; BOR-I : identity problem of borderline traits; PAR-R : resentment of paranoid traits

Conclusions: This study shows that BDD symptoms are associated with borderline-identity problems and paranoia-resentment and suggests that we should consider the diagnosis of BDD for individuals with high BOR and PAR scores.

Disclosure of Interest: None Declared

EPP0490

Personal and situational determinants of perception of important life events

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Introduction: The present time is characterized by the instability of society, the authoritarian state, social insecurity, and the events of the global pandemic. One of the main properties of modernity is the continuous nature of the social changes taking place in it. Social uncertainty, instability and social insecurity complicate the usual strategy for constructing ideas about the world around us. In connection with certain factors, events in a person's life can be defined as significant.

Objectives: The purpose of this study was to check the fact that important life events are something associated with stress and have a negative emotional connotation.

Methods: The methodological basis of the research was the qualitative study: semi-structured interviews, including projective techniques (case and content analysis) were carried out. N = 50 residents of Russia and Austria, age 16-65.

Results: The hypothesis about important life events was completely confirmed. It turned out that important life events were described by the respondents mainly as negative, that is, in most cases (more than 70% of the total number of answers), important events were associated as something associated with stress, having a negative emotional connotation. It is interesting that mentions of joyful and happy events were much less frequent than negative ones, while there were practically no descriptions of the experience of vivid emotions accompanying any long-awaited events. At the same time, important events are quite extensively associated with stress and critical emotional experiences, often with mental problems: "shock", "crisis", "debts", "severe depression", "complete collapse", "everything goes to hell".

Conclusions: Important life events for a person are rather negatively assessed events, as well as events associated with stress, rather than positively assessed events.

Disclosure of Interest: None Declared

Prevention of Mental Disorders

EPP0491

The prevalence of subclinical ADHD and its associations with mental health and academic attitudes

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Introduction: ADHD has been studied less extensively in adults than in children over the years, even though the indications of it clearly affect academic attitudes and closely linked to depression and substance abuse.

Objectives: Exploratory cross-sectional research was conducted to examine the prevalence of subclinical ADHD is among medical students and its correlations with substance abuse. Furthermore, our goal was to find psychological and academic mediating variables, that might be risk or protective factors of its occurrence.

Methods: A total of 239 (69 male) medical students were screened by an online questionnaire using Adult Self-Report Scale (ASRS), Depression, Anxiety and Stress Scale-21 (DASS-21), Maslach Burnout Inventory-Student Version (MBI-SS), Utrecht Work Engagement Scale for Students (UWES-S) and CAGE Questionnaire, which included smoking, alcohol, stimulant and sedative use.

Results: Problematic substance use was reported by 48% of medical students for alcohol use, 43% for smoking, 25% for stimulant use and 21% for sedative use. The prevalence of ADHD symptoms is relatively high among medical students (m=36.13). Correlation and linear regression analysis showed a strong association between ADHD symptoms, depression, and substance abuse. The prevalence of subclinical ADHD symptoms mediates the relationship between depression and substance use, such as alcohol and stimulant use, but there is no significant relationship between academic attitudes (engagement and burnout) and ADHD symptoms, except for depersonalization, which was found to be a risk factor for the development of alcohol and stimulant use.