P274

Using latent growth curve modeling in clinical treatment research: Comparing guided self-change and cognitive behavioral therapy treatments for bulimia nervosa

S.A. Hardy ¹, C. Thiels ². ¹ Center for Developmental and Health Research Methodology, Department of Psychology, University of Virginia, Charlottesville, VA, USA ² Department of Social Studies, Bielefeld University of Applied Sciences, Bielefeld, Germany

Background and aims: The purpose of this study was to demonstrate the usefulness of multi-group piece-wise latent growth curve models (LGCM) in clinical research, particularly for assessing and comparing treatment effects. As an empirical example, this analytic technique was used to compare the effectiveness of Guided Self-Change (GSC) and Cognitive Behavioral Therapy (CBT) treatments for bulimia nervosa.

Methods: Sixty-two female patients (M age = 28.1, SD = 8.00) with bulimia nervosa were randomly assigned to a) a GSC treatment involving a self-care manual plus 8 bi-weekly sessions of CBT or b) 16 weekly sessions of CBT.

Results: Both groups showed significant improvements in treatment outcomes across the treatment period, although the CBT group showed greater improvements. However, the GSC group evidenced more continued improvement post-treatment. CBT showed greater variability in effectiveness during the treatment period, while GSC showed greater variability during follow-up. For GSC patients, baseline levels on some treatment outcomes were related to follow-up improvement levels.

Conclusions: LGCM provided a rich analysis of these data, and addressed important questions regarding differences in the effectiveness of the two treatment programs. For example, CBT tended to show greater improvements during treatment, while GSC evidenced more continued improvements during follow-up.

P275

Psychopathological characterization of morbid obese patients proposed for bariatric surgery

S. Timóteo, I. Domingues, I. Brandão, A.R. Torres, A. Palha. Department of Psychiatry, Hospital of S. João, Porto, Portugal

Introduction: Obesity is considered an important Public Health problem, due to his continuous growing and terrible medical and psychological consequences. In morbid obesity this problems are even more complicated and surgery is sometimes the only solution. Bariatric surgery is a term derived from the Greek words: "weight" and "treatment." Weight reduction may be life saving for patients with extreme obesity, for whom no other satisfactory long term therapy currently exists. The patients proposed for this procedure are always submitted to psychiatry avaliation.

Objectives: Psychopathological characterization of morbid obese patients proposed for bariatric surgery.

Population and Methods: We studied 60 morbid obese outpatients of the Psychiatry Department of our Hospital, proposed for bariatric surgery. Their age ranged between 18 and 60 years. Informed Consent was obtained from all participants. We evaluated patients trough the following sequence: clinical interview in order to obtain clinical and social variables; EDI, SCL 90-R, MOS SF-36, and impulsiveness and body image scales.

Results: The study is now under statistically evaluation. The authors enhance the crucial role of Psychiatry in the multidisciplinary approach of morbid obese patients.

P276

3111t/c polymorphism of the clock gene confers a predisposition to a lifetime lower body weight in anorexia and bulimia nervosa

A. Tortorella, P. Monteleone, C. Di Filippo, A. Di Cerbo, S. Mansueto, M. Maj. *Department of Psychiatry, University of Naples, Napoli, Italy*

In mammals, the suprachiasmatic nuclei of the hypothalamus contain the master circadian clock that coordinates the daily temporal organization of endogenous rhythms. The core oscillation is thought to be driven by several genes called "clock genes" for their crucial role in the clockwork. Eating disorders (EDs), such as anorexia nervosa (AN) and bulimia nervosa (BN), are characterized by a disruption of circadian feeding patterns, as well as by alterations in the circadian rhythms of endogenous hormones. Therefore, a possible role of the clock gene in the biological vulnerability to EDs may be suggested.

To explore this hypothesis we designed a case-control study study exploring the 3111T/C polymorphism of the CLOCK gene in patients with EDs. One hundred fifty one female Caucasian patients were enrolled into the study. Sixty of them met the DSM-IV diagnosis of AN and 91 met the DSM-IV diagnosis of BN purging. A group of 90 normal weight Caucasian healthy women were also recruited. We could not detect any significant association between the 3111T/C polymorphism of the CLOCK gene and AN or BN. Moreover, we found that the 3111T/C polymorphism of the CLOCK gene was significantly associated with minimum past BW in both AN and BN individuals, but not in healthy controls.

In conclusion, our present findings, although preliminary, suggest that the CLOCK 3111T/C SNP does not represent a major vulnerability factor for AN and BN, but seems to predispose ED patients to a more severe BW loss in the course of their illness.

P277

Eating disorders in males, a general population study in Norwegian males

E. Vedul-Kjelsaas ¹, V. Vedul-Kjelsaas ², K.G. Gotestam ³.
¹ Department of Neuroscience, Faculty of Medicine, NTNU and Division of Psychiatry ² Department of Research and Development, St. Olavs University Hospital, AFFU, Ostmarka, Trondheim, Norway ³ Department of Neuroscience, Faculty of Medicine, NTNU and St. Olavs University Hospital, Division of Psychiatry, Department of Research and Development, AFFU, Ostmarka, Trondheim, Norway

Eating disorders (ED) is commonly referred to among women. Very few studies have been done focusing on male ED. A traditional point of view is that eating disorders are rare among men. This may be right in regard to anorexia nervosa; however clinical experiences and recent studies show that we should not disregard eating pathology among men.

In the present study, 5000 postal questionnaires were sent out in December 2005 to men 18-65 years in Norway. The total response rate was 41%.

The main aim of the present study was to calculate the lifetime, and point prevalences of eating disorders in the general male population in Norway. In addition, the relationship between eating disorders and physical activity has been studied.

Results: The mean age in the sample was 44.8 (SD=12.9), 56.7% were married, 18.1% were single, 39.5% had a University degree, 83.3% were working, and 7.8% were on sick leave. The mean weight was 86.4kg (SD=23.01), the mean height was 180.7cm (SD=7.99), and the mean BMI was 26.6 (SD=7.85).

More men than expected with symptoms of ED. Prevalence numbers for the different eating disorders according to DSM-IV will be presented in March. In addition, data on the relationship between eating disorders, physical activity, and exercise dependence will be presented.

P278

The association between eating disorders and level of physical activity among norwegian women

E. Vedul-Kjelsaas ¹, G. Braein ², K.G. Gotestam ³. ¹ Department of Neuroscience, Faculty of Medicine, NTNU and Division of Psychiatry, Department of Research and Development, St. Olavs University Hospital, AFFU, Ostmarka, Trondheim, Norway ² Department of Neuroscience, Faculty of Medicine, NTNU, Trondheim, Norway ³ Department of Neuroscience, Faculty of Medicine, NTNU and St. Olavs University Hospital, Division of Psychiatry, Department of Research and Development, AFFU, Ostmarka, Trondheim, Norway

Several studies have shown high prevalence of eating disorders among elite athletes. In particular, weight-related sports focusing on body and body shape have indicated high numbers. Studies including lower-level athletes have failed to find strong a relationship between amount of training (hours per week) and prevalence of eating disorders.

The aim of the present study was to study the relationship between eating disorders and physical activity among 1500 Norwegian women aged 18-65 years.

In addition, we wanted see whether the prevalence of eating disorders is higher among competitive athletes than among recreational athletes.

The Survey for eating disorders (SEDs, 37 questions), which assesses full DSM-IV diagnoses for anorexia nervosa (AN), bulimia nervosa (BN), binge eating disorder (BED), and eating disorders not otherwise specified (EDNOS) based on self-report, was used. In addition, the respondents answered specific questions related to different aspects of exercise and physical activity, such as hours of exercise, type of sport and competency level. As far as we know, no earlier studies on eating disorders and physical activity in general population have presented data to differentiate between competitive athletes and recreational athletes.

Preliminary analyzez indicate that women with AN exercised more than all the other ED groups, and the BN group also showed a high number of weekly physical activity. More results will be presented in March. The analyses are expected to shed some light over the discussion concerning sport as a risk group for eating disorders in relation to competition and level of performance.

P279

Eating disorders and psychopathological comorbidity in obesity patients

E. Vedul-Kjelsaas, S.A. Sandnes, J.K. Dahl, K.G. Gotestam, M. Strommen, B. Kulseng, R. Mårvik. *Department of Neuroscience*,

Faculty of Medicine, NTNU and Division of Psychiatry, Department of Research and Development, St. Olavs University Hospital, AFFU, Ostmarka, Trondheim, Norway

The treatment of overweight and obesity has recently been given priority by the Norwegian Government. A research project has been started in the Central Norway Regional Health Authority which includes surgical treatment (gastric bypass), and non-surgical treatment.

The focus on eating disorders and comorbid psychiatric diagnoses has to some extent been ignored in this patient group. Important questions are: How will an eating disorder and/or other psychopathology affect treatment outcome? How should the follow up procedures be tailored in regard to psychopathological status?

The main aim of this study was to describe the prevalence of eating disorders in obese patients. In addition, data on depression, anxiety, quality of life, and personality will be presented in groups with and without and eating disorder.

Methods: Cross-sectional study of patients on a waiting list for obesity treatment, n=160, 117 women and 43 men.

Postal questionnaires were used. Instruments: Eating disorders in obesity (EDO), HADS, SF-12, and EPQ.

Results: Mean age for the sample was 41.2 years, and the mean height and weight was 171 cm and 138 kg. A total of 20% showed symptoms of eating disorders, 24.7% of the men, and 17.1% of the women, respectively. Preliminary analyses indicate that the groups with an eating disorder had more psychopathology, and lower quality of life compared to other groups.

More results will be prepared in March.

Discussion: The results gave higher numbers than a similar Swedish study. Results from this study should be used in the future treatment of this neglected patient group.

P280

The influence of the study profile on early anorexia symptoms expression in women

R.W. Wojciak. Department of Human Nutrition and Hygiene, August Cieszkowski Agricultural University of Poznan, Poznan, Poland

The purpose of this preliminary study was to examine the share of women with incorrect eating behavior in the group of young women studying courses join with food technology. The 120 women studying food technology, human nutrition, and dietetics ("food" group) and 118 women from the humanistic study (philosophy and pedagogic courses) ("humanistic" group) aged 20-24 years were examined by the Eating Attitude Test, designed according to DSM-IV and adapted to the Polish conditions. It was obtained statistically significant differences between different profiles of the study. However in the "humanistic" group 12% had early anorexia symptoms, in the "food" group it was approximately 29%. It could be in accordance with literature data concern interest in food, cocking, dietetic etc. in anorectics. The purpose of this study was also to compare the some elements of quality of life women with and without incorrect eating attitude in "food" group. There were significant differences in the assessment of own body shape (incorrect), imaging of perfect body shape (too thin), physical activity (high), reaction on stress situations (withdraws and escapes usually), frequency of physical symptoms (headache and stomachache, irregular menstruation) as well as home conflicts especially with old sisters or mothers. The social position of respondents were not influenced on expression of early symptoms of anorexia. This study suggests that profile of university education could depend on incorrect eating attitudes and should be common to focus on the