EPP0030

Are anxiety disorders associated with accelerated ageing and cognitive decline? A multicenter italian study in middle aged and older patients and controls.

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Introduction: Anxiety Disorders (AnxDs) are highly prevalent in middle-aged and older individuals and are putative factors that might interfere with normal aging, by affecting cognitive functioning and neuroprogression.
Objectives: This study aims to assess whether current AnxD in middle-aged and older subjects are associated with 1) lower neuropsychological performance, 2) shorter telomere length/lower plasmatic Amyloid-Beta, and 3) brain connectivity alterations, compared to subjects without lifetime psychiatric disorders (HCs).
Methods: This is an ongoing multicentric cross-sectional study. We collected preliminary data on neuropsychological performance through a standardized battery, in 60 outpatients with current AnxDs (DSM-5 criteria), 24 with psychopharmacological treatments (AnxDs+) and 36 without (AnxDs-), compared to 76 HCs, all aged 50-75 years. This study was supported by Fondazione Cariplo, grant n° 2014:0664.
Results: AnxDs- patients showed poorer performance in the language domain, namely in semantic fluency (p=0.04), compared to HCs. No other significant differences were found between groups. Within the patients' group, we found that a greater burden of psychiatric disorders or medical diseases, current use of benzodiazepines, or unhealthy lifestyle had significant detrimental effects on cognition, whereas current use of antidepressants, pharmacological treatments for medical conditions, and higher levels of physical activity exhibited the opposite effects.
Conclusions: We found only limited difference in cognitive performance between patients and controls. However, our preliminary results show that multiple factors influence cognitive performance in individuals with AnxDs, making these aspect important to monitor in clinical practice. So far, our results are provisional and further analyses in the final sample may provide more reliable conclusions.

Keywords: anxiety disorders; ageing; neuropsychological performance; Cognitive decline

EPP0029

Ketogenic diet for anxiety disorders: Dietary regimen for relapse prevention?

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Introduction: Anxiety disorders are a mental disorder that is widespread all over the world and are associated with a high burden of the disease. While poor dietary habits are common in depression, they can lead to worsening of the illness or prolong the treatment, which also leads to a higher risk of developing chronic diseases.
Objectives: With the array of the treatment modalities including monoaminergic antidepressants, benzodiazepines, psychotherapy, there is the unmet need for the effective treatment of anxiety disorders resulting in full remission and relapse prevention. Benzodiazepines can quickly resolve anxiety due to their positive allosteric GABA modulation mechanism of action. Although, they are not recommended for chronic use.
Methods: Ketogenic diet(KD) may be hypothesized as the promising strategy impacting treatment strategies, in particularly facilitating full remission, recovery and preventing relapses. In this popular high-fat diet, where daily calories intake is consists in at least 70% from fat, up to 25 % from protein and as little sugar as possible is mainly known for its helpful role in drug resistant epilepsy treatment, glucose levels balance or fast way for weight-loss.
Results: Could be effective in anxiety disorders treatment due to its possible role in GABA:glutamate balance change in favor of GABA levels, which may enhance the anxiolytic effect in sustaining remission and preventing relapse.
Conclusions: KD in some anxiety disorders may provide a rewarding outcome, but more research is needed. The evidence mentioned in this paper should encourage psychiatrists to recommend KD as advice somewhere between psychotherapy, pharmacology or as an add-on to those two.

Keywords: Anxiety; Ketogenic Diet; GABA

Anxiety disorders and somatoform disorders - anxiety disorders and somatoform disorders

EPP0030

Cognitive and behavioral factors of quality of life in patients with somatoform disorders.

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Introduction: Studies of the cognitive and behavioral factors of perpetuation and quality of life in patients with somatoform disorders are important for identifying targets for psychological interventions and risk groups (Piontek et al., 2018, Dehoust et al., 2017, Schaefer et al., 2012, Flasinski et al., 2020).
Objectives: To reveal beliefs and behavior in patients with somatoform disorders associated severity of somatic complaints and poorer subjective well-being.

Methods: 125 patients with somatoform disorders 17-68 years old filled Screening for Somatoform Symptoms (Rief, Hiller, 2003), Cognitions About Body And Health Questionnaire (Rief et al., 1998), Scale for the Assessment of Illness Behaviour (Rief, Ihle, Pigler, 2003), and Quality of Life Enjoyment and Satisfaction Questionnairie-18 (Ritsner et al., 2005).

Results: Severity of somatoform symptoms is higher in patients with catastrophization of bodily sensations, autonomic sensations, belief in their bodily weakness, somatosensory amplification, scanning for bodily symptoms, and disturbances in daily activities due to illness (r=.18-.38, p<.05). Adjusting for the severity of somatoform symptoms, subjective well-being was lower in patients with higher belief in their bodily weakness and somatosensory amplification, autonomic sensations, expression of symptoms, and changes in daily activities due to illness (r=.21-.40, p<.05).

Conclusions: The results suggests that regardless of symptoms severity poorer quality of life in patients with somatoform disorders is associated with beliefs about body and body perception that could be addressed in psychotherapy.

Keywords: somatoform disorders; factors of quality of life

Bipolar disorders

EPP0033

Insight and self-esteem in patients with bipolar disorders.

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Introduction: The recurrence of bipolar disorder due to poor treatment adherence can be explained by different factors.The poor awareness of the disorder seems to be the major cause.

Objectives: To evaluate insight in patients followed for euthymic bipolar disorders and determine the factors correlated with it,mainly the self-esteem.

Methods: A cross-sectional descriptive and analytical study of 33 euthymic subjects with bipolar I and II disorders (DSM 5) and followed up at the psychiatric consultation in Hédi Chaker university Hospital of Sfax.Data collection was performed using a sheet exploring socio-demographic and clinical data. We used Birchwood insight scale to assess the quality of insight and Rosenberg's Self-Esteem scale.

Results: The average age of our patients was 44,52±12,99 years old. The sex ratio =0.32.Patients were followed for bipolar I disorder (60.6%).The first episode of the disease was depressive in(51.5%) of cases.The average number of depressive episodes was1.97±1.87. The last episode was depressive in(57.6%) or manic in(42.4%). There were no psychotic characteristics in(42.4%) of cases.The patients had good insight in(54.5%).The average of self-esteem

score was27±7.85and it was low in 51.5% of cases.Factors correlated with good insight were bipolar II disorder(p=0.001), high number of depressive episodes(p=0.013) and absence of psychotic characteristics(p=0.003) during the last episode.In addition,good insight was significantly associated with low self-esteem(p=0.023).

Conclusions: Our study shows that a poor insight depends mainly on the clinical characteristics of bipolar disorders. Moreover,low self-esteem seems to be linked to it. For this reason, our attention should be focused on psychoeducation to improve insight, especially during episodes, in order to facilitate integration and increase patients' self-esteem.

Keywords: insight; self-esteem; Bipolar Disorders

EPP0034

Does bipolar disorder cause posttraumatic growth? Relationship between psychological resistance in patients with bipolar disorder and caregivers

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Introduction: Focusing on the negative changes experienced by both patients and caregivers associatively caregiving and experiencing chronic mental illnesses, there is an increasing interest in the phenomenon of development after traumatic experiences with high levels of stress. These changes are in line with the concept of posttraumatic growth.

Objectives: In the study, posttraumatic growth and psychological resilience in bipolar patients and caregivers has been examined in the context of the variables that are claimed to be related to it.

Methods: With the approval of ethics committee, 49 patients in euthymic period and caregivers, 49 healthy volunteers meeting the inclusion criterions, applied to Erenköy Mental and Neurological Diseases Training-Research Hospital outpatient clinics between July-December 2019 were included. While psychological resilience and posttraumatic growth scale were implemented to patients and caregivers only psychological resilience scale was applied to healthy volunteers. The relationship between posttraumatic growth and psychological resilience, patient and caregiver variables was examined through statistical methods.

Results: Comparing with the patients and caregivers, respectively posttraumatic growth total scores were 57.7%-61.3% of the highest score obtained from the scale in the patients and caregivers. Considering the literature, patients and caregivers experienced moderate to high posttraumatic growth. Caregivers' psychological resilience levels was higher than the other groups.

Conclusions: The results of the study are in line with the findings that, negative life experiences positively contributes to individuals. Knowing the factors affecting posttraumatic growth can make contribution to approaching patients and caregivers in clinical practice.

Keywords: Psychological Resistance; Posttraumatic Growth