

## P01-311 - ALEXITHYMIA, HYPOCHONDRIASIS AND OBSESSIVE-COMPULSIVE SYMPTOMS IN PATIENTS WITH CHRONIC PROSTATITIS

K. Tournikioti<sup>1</sup>, G. Moussas<sup>1</sup>, P. Korkoliakou<sup>1</sup>, C. Christodoulou<sup>1</sup>, G.M. Gourgoulis<sup>2</sup>, S. Tsiodras<sup>2</sup>, S. Nika<sup>1</sup>, P. Panagopoulos<sup>2</sup>, H. Giamarellou<sup>2</sup>, L. Lykouras<sup>1</sup>

<sup>1</sup>2nd Department of Psychiatry, Attikon General Hospital, <sup>2</sup>4th Department of Internal Medicine, Attikon General Hospital, University of Athens, Medical School, Athens, Greece

**Objective:** Chronic prostatitis has been long considered a psychosomatic illness, however the psychological profile of patients suffering from it, has not been fully elucidated yet. The present study aims to assess alexithymia, hypochondriasis and obsessive-compulsive symptoms in patients with chronic prostatitis.

**Methods:** Patients diagnosed with chronic prostatitis at a tertiary care ID clinic were evaluated for the presence of alexithymia, hypochondriasis and obsessive compulsive symptoms using respectively the following psychometric tools: Toronto Alexithymia Scale (TAS), Whiteley Index (WI) and Leyton Obsessional Inventory (LOI). Patients were categorized according to the NIH Consensus Classification System for Prostatitis Category and the NIH Chronic Prostatitis Symptom Index (CPSI) was calculated.

**Results:** 57 patients (median age 40 yrs old; IQR 32-51.5 yrs) have been evaluated so far. Median CPSI score was 18 (IQR: 13-24). Median TAS score was 44 (39-57), median LOI score was 13 (10-15) and median WI score was 28 (22-38). An abnormal LOI score indicative of obsessive-compulsive features was noted in 58% of patients and an abnormal WI score indicative of hypochondriacal beliefs in 45%. CPSI strongly correlated with TAS score ( $r=0.57$ ,  $p=0.007$ ).

**Conclusion:** High rates of alexithymia, obsessive compulsive symptoms and hypochondriasis are present in chronic prostatitis patients. Alexithymic features were strongly correlated with quality of life measures such as the CPSI. These findings necessitate further elucidation and suggest that patients with chronic prostatitis may need psychiatric counseling and therapy.