Conclusions: Dysregulated sexuality is linked to emotion dysregulation and childhood trauma. Binge-purging patients experience adverse behavioural consequences.

Disclosure: No significant relationships.
Keywords: hypersexuality; childhood trauma; eating disorders; emotion dysregulation

O122

Not everyone is the same: Latent profile analysis of food addiction, personality traits and loneliness among young adults

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Introduction: Food addiction (FA) has been found to correlate with personality traits and psychosocial factors (Zhao et al., 2018). However, the vast majority of studies on this subject use the variable-oriented approach, which assumes that relationships between specific variables are identical in a given population (Collins & Lanza, 2010).
Objectives: The main aim of this study was to assess the heterogeneity of young adults with respect to food addiction, personality traits (extraversion, conscientiousness and emotional stability) and loneliness. The secondary aim was to examine the relationships between profile membership and well-being.
Methods: The sample consisted of 1,157 young adults (58.1% women). The Yale Food Addiction Scale, the Ten-Item Personality Inventory and the Short Loneliness Scale were used in the present study. Various aspects of well-being were included (e.g. quality of life). Latent Profile Analysis was performed twice: in the full sample, and in the subsample of individuals with increased FA (defined as z-score ≥ 1; n = 213).
Results: Four profiles were identified both in the full sample and in the subsample. The best functioning was observed in individuals who scored high on extraversion and low on loneliness, despite their relatively high levels of FA. Young adults who scored high on FA and loneliness, and low on extraversion, conscientiousness and emotional stability, were more likely to have the worst functioning.
Conclusions: Our findings suggest that using the person-oriented approach may expand our knowledge on the role of personality traits and psychosocial factors in determining the effects of FA on well-being.

Disclosure: No significant relationships.
Keywords: loneliness; latent profile analysis; food addiction; personality traits

O123

Prevalence and treatment of patients with eating disorders: Data of a german health insurance

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Introduction: Few studies have examined the course of eating disorders and the respective treatments based on insurance data, even though they provide representative information.
Objectives: To assess the epidemiology, treatments, duration of illness, costs of treatment in a data set of a public health insurance.
Methods: Data provided by a German health insurance (data from 4.2 million members from 2005-2010). A matched control group based on age and gender without an eating disorder diagnosis was used for comparisons.
Results: 2.734 cases with the diagnoses of an eating disorder (anorexia nervosa AN, bulimia nervosa BN or combination ANBN) were identified. More than 92% of the patients were female. The relative risk for personality disorders, depressive disorders, alcohol abuse and obsessive-compulsive disorders was highly increased. Most of the patients with BN (53.04%) or AN (41.57%) were treated in out-patient care, and many were only treated for three months, whereas most of the patients with ANBN were treated for a longer time. 3-19% with BN, AN or ANBN were treated only in in-patient care. The in-patient costs of treatment for the year of the diagnosis were 5471.15€ for BN, 9080.26€ for AN, 10809.16€ for ANBN and 339.37€ for the control group.
Conclusions: Our findings suggest that patients with ANBN diagnosis have a severe and longer course of treatment. Furthermore, contrary to national guidelines for eating disorders, there is a considerable proportion of patients with BN or AN that are treated only in in-patient care.

Disclosure: No significant relationships.
Keywords: eating disorders; epidemiology; costs of treatment; health insurance data

O125

Negative affect, affect regulation, and food choice: A value-based decision-making analysis

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Introduction: Research has shown that negative affect leads to unhealthy eating, the top cause of death in the United States.
Objectives: This project examined whether AR (Affect Regulation) can be applied to incidental negative affect to improve eating behavior.
Methods: We conducted four studies.
Results: In Studies 1 and 2 (n=80), we developed a autobiographical negative affect induction, showed that it induces negative affect, and demonstrated that participants can learn to downregulate this negative affect. In Study 3 (n=40), participants completed a three-phase dietary food choice task. In phase 1, participants made food choices under neutral conditions. In phase 2, participants made food choices after receiving the negative affect induction from

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Studies 1 and 2. In phase 3, participants made food choices while downregulating the negative affect caused by the induction. In phase 2, participants placed less importance on health (b=-0.15, z=-5.99, p<.001) when making food choices than under neutral conditions (phase 1). In phase 3, participants successfully down-regulated their negative affect (b=-1.2, t=-22.01, p<.001) and placed the same level of importance on health when making food choices as in phase 1, indicating that AR applied to incidental affect is an effective method for improving eating behavior. In Study 4 (n=120), we pre-registered and replicated our findings from Study 3. In addition, we fit drift-diffusion models to participants reaction time data and show that these results extent to the by-participant weights participants place on health when making food choices.
Conclusions: These results are a step towards scalable AR interventions to improve eating behavior.

Disclosure: No significant relationships.
Keywords: dietary food choice task; affect regulation; eating behavior; negative affect

O126

Alexithymia and cortisol awakening response in people with eating disorders

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Introduction: Alexithymia, that is the inability to recognize and describe one's own emotions, is a transdiagnostic feature across eating disorders (EDs) and it has been associated to a prolonged stress exposure.
Objectives: Therefore, we evaluated whether alexithymia affects the hypothalamus-pituitary-adrenal (HPA) axis functioning in patients with anorexia nervosa (AN) or bulimia nervosa (BN).
Methods: Twenty-six women with AN and 26 with BN participated in the study. Alexithymia was evaluated by the Toronto Alexithymia Scale–20 and eating-related psychopathology was measured by the Eating Disorder Inventory-2. The activity of the HPA axis was assessed by the salivary cortisol awakening response (CAR). Group differences in saliva CAR were tested by repeated measures 3-way ANOVA with diagnosis and alexithymia as between-subject factors.
Results: The prevalence of alexithymia did not differ significantly between the two diagnostic groups (c^2=1.24, p=0.26). Alexithymia was associated with more severe eating-related psychopathology in AN women but not in BN women. A significant reduction in the magnitude of CAR occurred in alexithymic patients with BN compared to non-alexithymic patients with BN (t = 3.39, p = 0.008), but not in alexithymic women with AN (t = 0.67, p = 0.54).
Conclusions: These results confirm the presence of a more severe eating-related psychopathology in alexithymic individuals with AN and show, for the first time, an association between alexithymia and a dampened basal activity of the HPA axis in BN.

Disclosure: No significant relationships.
Keywords: eating disorders; alexithymia; cortisol; stress

O128

Cortisol, anxiety and cognitive responses to trier social stress test: The first multiple levels assessment of the rdoc "system for social process" in eating disorders

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Introduction: Social dysfunction is a putative risk and maintaining factor for Eating Disorders (EDs).
Objectives: We aimed to assess biological, emotional, and cognitive responses to a psychosocial stressor, in order to provide a multilevel investigation of the RDoC social process system in EDs.
Methods: Cortisol response to Trier Social Stress Test (TSST) was measured in 105 subjects: 35 women with anorexia nervosa (AN), 32 with bulimia nervosa (BN) and 38 healthy women. In a subgroup of them (23 AN, 21 BN, and 25 control women) anxiety, hunger, and desire to eat throughout the TSST were also rated.
Results: Compared to healthy women, AN and BN women showed reduced cortisol reactivity that disappeared after controlling for trait anxiety and ineffectiveness. They also displayed increased anxiety response, while only people with AN reported greater decrease in hunger and desire to eat. Baseline ineffectiveness predicted post-stress body dissatisfaction through the mediation of post-stress anxiety while no significant correlations were found between cortisol and anxiety, hunger, or desire to eat responses
Conclusions: People with EDs are characterized by blunted cortisol reactivity and greater anxiety, hunger, and desire to eat responses to a psychosocial stressor. We show a relationship between socio-emotional distress and ED-related attitudes without an association between biological and emotional or cognitive changes. This study provides the first empirical and multilevel support to a deranged functioning of the RDoC "system for social process" in EDs.

Disclosure: No significant relationships.
Keywords: psychosocial stressor; cortisol reactivity; emotional distress; eating disorders

O129

COVID-19 pandemic and eating disorders: What impact on specific and general psychopathology?

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