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EPV1391

Neurohormonal markers of stress in Borderline Personality Disorder: interplay between oxytocin and cortisol

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Introduction: Borderline personality disorder (BPD) is characterized by important attachment issues and emotion dysregulation, particularly in response to psychosocial stressors. Emotions (mainly anger and sadness) may therefore be felt and expressed more intensively. Even though stress response is mainly regulated by cortisol, oxytocin is also involved in this response, and both hormones interact in a temporal dynamic. A previous pilot study carried-out by our group has shown that oxytocin displays less variation in naturalistic setting and lower reactivity during a stress task in patients with BPD when compared to healthy subjects.
Objectives: We are now carrying out a larger-scale study to better understand the interplay between cortisol and oxytocin in everyday life and during stressful situations, but also which other factors may influence these hormonal changes like medication, hormonal contraceptives, childhood adverse events and other psychiatric comorbidities.
Methods: We aim to recruit 120 participants (60 per group). Each participant undergoes three visits. First visit: explanation of the global procedure and risks, signature of informed consent, as well as psychological screening and distribution of questionnaires and salivettes (to be returned during the second visit). Second visit: return of questionnaires and return of part of the salivettes collected during the morning + additional saliva sample and assessment of emotional state. Third visit: experimental procedures and return of remaining samples of salivettes collected in the previous days for circadian assessment (the afternoon of the second visit). Thus, the day of the third visit participants perform an experimental task, the Trier Social Stress Test (TSST), involving stress reactivity.
Results: Currently, 28 BPD patients and 39 healthy controls completed protocol. We analyzed hormonal preliminary data of the first 20 participants of each group. Our initial analyses showed a hyporeactivity of cortisol during stress in BPD patients compared with healthy subjects ($F= 5.27$, $p = .005$).
Conclusions: Recruitment is still ongoing and further analyses will be conducted. Our study may offer a better understanding of the neurobiological underlying stress dysregulation in BPD, which may help to contribute to the development of new psychotherapeutic and pharmacological approaches.

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The relation between emotional intelligence and dark triad traits, limitations of research

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Introduction: The war has affected every Ukrainian to some extent. With the mobilization comes the increased risk of people with dark triad traits (DT) (psychopathy, machiavellianism and narcissism) to be exposed to stress on the battlefield. Being vulnerable, these individuals are in need of protection for their mental health. One of such protections is the emotional intelligence (EI). This makes the relation between DT and EI highly valued as the basis for future development of effective measures against stress disorders for combatants.
Objectives: The aim of this research is to study the existing knowledge exploring the relation between the emotional intelligence and dark triad traits and to determine the limitations of these studies.
Methods: In order to analyse this relation the literature review of scientific studies on the topic of the relation between the EI and DT was conducted.
Results: The literature sources published in 1994-2023 years were reviewed for this study. 1,87% of studies showed that DT related negatively to general EI. 5,66% showed that some facets of DT related positively to some facets of EI, while 2,83% showed negative relation. 2,83% demonstrated that psychopathy (P) related positively to general EI, 13,21% reported negative relation, 0,94% showed no relation, 2,83% demonstrated mixed relation. 5,66% reported that some facets of P related positively to some facets of EI, while 38,68% discovered negative relation. 14,15% demonstrated that narcissism (N) related both positively and negatively to general EI, 4,72% observed no relation. 16,98% found that some facets of N related positively to some facets of EI, 21,7% showed negative relation. 5,66% demonstrated that M related positively to general EI, 7,55% reported negative relation. 10,38% found that some facets of M related negatively to some facets of EI.
Conclusions: Among reviewed papers most of them reported that some facets of DT related positively to some facets of EI, with P mostly relating negatively to general EI and some of its facets, N mostly relating positively to some facets of EI and M mostly relating negatively to general EI and some of its facets. Found and known limitations of mentioned studies included: sample population being too heterogenous, sample population including criminal offenders only, size of sample population being too small, use of self-report measures, lack of unified approach to measure EI, possibility of comorbidity influencing EI, possibility of individual's secondary gain influencing EI measure, non-exclusion of individuals with mental disorders from general population. This highlights the need to take mentioned limitations into account in order to acquire accurate data in further research on the topic.

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