by Dysthymia (25%) was documented among infertile group while suicidality at 15% were significantly higher than other disorder (Z = 3.80, p> .001). No such cases of suicidality or Dysthymia was found among patients of control group. (fertile group).
Conclusions: Routine screening of suicidal risk and depression should be conducted for all patients undergoing IVF treatment. Infertility specialists should recognize psychiatric morbidity amongst infertile patients for subsequent referral and treatment.

Disclosure: No significant relationships.
Keywords: Infertility; Depression; suicide

EPP0172

Living on the edge: a review on potential risk factors for suicide in adult attention-deficit/hyperactivity disorder

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Introduction: Attention-deficit/hyperactivity disorder (ADHD) is a neurodevelopmental disorder characterized by symptoms including inattention, hyperactivity and/or impulsivity that commonly persists into adulthood. Suicide is a major cause of death in adult ADHD (aADHD) patients. Suicidality is higher in these patients, in possible relationship to various clinical and socio-demographic factors.
Objectives: To review the current literature concerning potential risk factors for suicide in aADHD patients.
Methods: A research was made using the Medline database through the Pubmed search engine, with the following keywords: “adhd”, “suicide”, “risk factors”.
Results: Comorbid psychiatric disorders (major depressive disorder, sleep disturbances, behavior disorders and addictive disorders) are powerful predictors of suicidal behavior in aADHD. Depression is the most frequent diagnosis among aADHD patients with previous suicide attempts. Subtype (mostly the combined type) and severity of ADHD were also associated with a higher number of prior suicide attempts. Impulsiveness, poor emotional self-regulation, recklessness, persistent hyperactivity, inability to relax, engagement in risk behavior (often found in ADHD), common personality traits in aADHD like low frustration tolerance, maladaptive coping and poor problem-solving, as well as interpersonal relationship problems, were associated with higher suicidality. Financial distress caused by unemployment is associated with higher suicidal behaviors. The suicidality is higher in females, mostly associated to self-concept, whereas in males is typically related to impulsivity.
Conclusions: Clinicians should be aware of the potential risk factors for suicide in aADHD patients because the early detection of these factors is fundamental to improve the patients’ quality of life and could contribute to the design of more effective treatments.

Disclosure: No significant relationships.
Keywords: Suicide; adhd; risk factors

EPP0173

Body attitudes and experienced early care and attachment relationships in suicidal adolescents.

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Introduction: Both theoretical conceptualizations (M.&E. Laufers, E. Furman, J. Maltsberger, etc.) and empirical studies (I. Orbach) suggest an important role body image plays in the dynamics of adolescent suicidal attempts.
Objectives: To study the relationships between body image vulnerability and attachment attitudes concerning early care and current relationships.
Methods: Participants were 100 adolescents with suicidal behavior (46 with suicidal ideation only, 54 with suicide attempts) compared to 100 controls (12-17 years). Body attitudes were assessed with Body Investment Scale (BIS), perceived early care was assessed by Parental Bonding Inventory (PBI), current attachments experiences were assessed with Attachment Style Questionnaire (ASQ).
Results: Adolescents with suicidal manifestations scored significantly lower on BIS Body Care ($p<.001$) , but higher on Comfort with Touch scales ($p=.05$). They did not differ significantly on Body Image and Body Protection scales. With regard to perceived early care, suicidal adolescents did score lower on all Care and Control PBI scales, in both paternal and maternal forms. For current attachments suicidal adolescents scored lower on Confidence ($p<.001$) and higher on Approval Need ($p<0.05$) ASQ scales. Correlation analysis suggests, for both groups, stronger relationships of body attitude dimensions to current relationships than to perceived parental care, the former being more marked in clinical group, with Body Image scale being related to all ASQ scales ranging from r=-.32 to r=-.63.
Conclusions: In current study only weaker tendency to care for body in suicidal adolescents was noted. However, in suicidal group the relationship between body image vulnerability and negative experiences of current attachments was stronger.

Disclosure: No significant relationships.
Keywords: adolescence; body image; attempted suicide

Anxiety Disorders and Somatoform Disorders 01

EPP0174

Anxiety disorders and age-related changes in physiology

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Introduction: Anxiety disorders are leading contributors to the global disease burden, highly prevalent across the lifespan, and associated with substantially increased morbidity and early mortality.
Objectives: The aim of this study was to examine age-related changes across a wide range of physiological measures in middle-aged and older adults with a lifetime history of anxiety disorders compared to healthy controls.
Methods: The UK Biobank study recruited >500,000 adults, aged 37-73, between 2006-2010. We used generalised additive models to estimate non-linear associations between age and hand-grip strength, cardiovascular function, body composition, lung function and heel bone mineral density in cases vs. controls.
Results: The main dataset included 332,078 adults (mean age = 56.37 years; 52.65% females). In both sexes, individuals with anxiety disorders had lower hand-grip strength and blood pressure than healthy controls, while their pulse rate and body composition measures were higher. Case-control differences were larger when considering individuals with chronic and/or severe anxiety disorders, and differences in body composition were modulated by depression comorbidity status. Differences in age-related physiological changes between female anxiety disorder cases and healthy controls were most evident for blood pressure, pulse rate and body composition, while in males for hand-grip strength, blood pressure and body composition. Most differences in physiological measures between cases and controls tended to decrease with age increase.
Conclusions: Individuals with a lifetime history of anxiety disorders differed from healthy controls across multiple physiological measures, with some evidence of case-control differences by age. The differences observed varied by chronicity/severity and depression comorbidity.

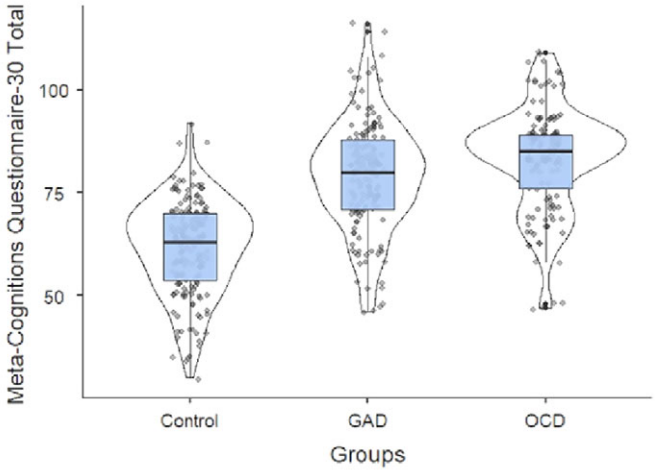
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Keywords: Anxiety; Ageing; Physiology; UK Biobank

EPP0175

Comparison of Metacognitions in Obsessive-Compulsive Disorder, Generalized Anxiety Disorder, and Healthy Controls

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Introduction: Generalized anxiety disorder (GAD) and Obsessive compulsive disorder (OCD) are common psychiatric disorders. Researchers studying the pathophysiology of these two disorders evaluated the effect of metacognition. However, there is no research examining the metacognition differences of these two psychiatric conditions.
Objectives: This study was performed to compare the metacognitions in OCD, GAD and healthy controls.
Methods: The sample of this study consisted of 158 GAD and 137 OCD patients aged 18-65 years who presented to outpatient psychiatry clinic and applied to the health committee 168 healthy controls without psychopathology. Sociodemographic data form, Meta-Cognitions Questionnaire-30 scale(MCQ-30), Beck Depression Inventory(BDI) and Beck Anxiety Inventory(BAI) were applied to the volunteer participants who met the criteria for participation in the study. The data obtained were evaluated statistically and subjected to statistical analysis.
Results: The mean age was 31.89 ± 10.86 years and was 60.5% (n = 208) women. There was statistical difference between marital status, occupation and income($p < 0.05$). In addition, there was a statistically significant difference between MCQ-30 total and subscales, BDI and BAI ($p < 0.001$). According to the comparison of OCD and GAD patients, 'positive belief', MCQ-30 total and BAI scores were found to be statistically different ($p < 0.05$), 'Uncontrollability and danger', 'Cognitive Confidence', 'Beliefs about The Need to Control Thoughts', 'Cognitive Self-Consciousness', BDI there was no statistical difference between them ($p > 0.05$).



Conclusions: Our results are contributing to the understanding of the uncertainty of development and maintenance of OCD and GAD. Additionally, metacognitions could be important for the diagnosis and treatment of OCD and GAD.

Disclosure: No significant relationships.
Keywords: Generalized anxiety disorder; metacognition; obsessive compulsive disorder

EPP0178

Preliminary evidence for a Theory of Mind impairment in patients with Anxiety Disorders

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