S0047

Predictors of Therapy Outcome in Eating Disorders: from Psychopathology to Personality

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Eating disorders are severe mental disorders, with high mortality rates and high incidence in adolescence and early adulthood, especially in women. The course of these disorders is uncertain and treatment outcomes are limited. Several factors such as duration of the disorder, dysfunctional personality traits and cognitive profiles, as well as genetic vulnerabilities, will influence adherence and response to treatment. In this presentation we will include recent results on prospective observational studies, analyzing personality and cognitive predictors of treatment response in eating disorders, as well as potential associated neurobiomarkers.

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Keywords: Eating Disorders; Psychotherapy; predictors; personality

Anxiety Disorders in Pregnancy and the Postnatal Period: Recent Progress and Lived Experience

S0044

Anxiety Disorders in the Perinatal Period

L. Mcdonald

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Anxiety disorders are common in pregnancy and in the post-natal period. This presentation will focus on how anxiety disorders may present in the perinatal period, the need for accurate and timely diagnosis, and barriers to diagnosis and barriers for women in accessing appropriate care and treatment.

Disclosure: No significant relationships.
Keywords: Perinatal; maternal OCD; Anxiety

S0045

Perinatal OCD - A Lived Experience

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- Diana discusses the terror of perinatal ocd undiagnosed with four small children ages six years and under
- Diana explains fearing seeking help and seeing a psychiatrist knowing she would have to disclose her thoughts and images she encountered daily
- She pinpoints what moved her forward and stresses the importance of revisiting ocd when it is not in your life
- She talks of hope and through successful CBT and Citalipram, has been free of the disorder for twenty years

Disclosure: No significant relationships.

S0046

Postnatal PTSD: Risks and Consequences

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Post-traumatic stress disorder (PTSD) occurs in 4% of all pregnancies during the postnatal period. This prevalence can increase in high-risk groups reaching a mean prevalence of 18%. Some risk factors are significantly associated with the development or exacerbation of postnatal PTSD, including prenatal depression and anxiety, pre-pregnancy history of psychiatric disorders, history of sexual trauma, intimate partner violence, emergency childbirth, distressing events during childbirth and psychosocial attributes. Maternal postnatal PTSD is highly associated with the difficulties in mother-infant bond and the postpartum depression. Evidence shows significant links between psychological, traumatic and birth-related risk factors as well as the perceived social support and PTSD following childbirth. The City Birth Trauma Scale can be recommended as a universal instrument for diagnosis of postnatal PTSD.

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Keywords: postnatal; Childbirth; Post-traumatic stress disorder

Modelling Trauma and Resilience

S0047

"Adding new Molecular Insights to a given Endophenotype: the Relevance of Epigenetics in Environmental Stress Response"

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Molecular psychiatry research needs a deeper characterization of emotional and cognitive neural underpinnings, along with a broader recognition of trauma-related circuitries and their involvement in shared pathological endophenotypes. One such endophenotype is unbalanced approach avoidance conflict (AAC), a highly

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