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Hereditary Angioedema and Psychopathology: Neurobiology, Stress and Attachment Styles

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Hereditary Angioedema (HAE) is considered an autosomal dominant disorder, characterized by a quantitative and/or qualitative deficit of C1 esterase inhibitor.

The aim of the study is to establish the relationship between HAE, clinical events, and neurobiological and psychopathological parameters, which could influence the phenotype of the disease and therefore its manifestation in terms of quality, severity and duration of symptoms.

Materials and Methods: observational study, cross-sectional, non-interventional, cohort of 46 patients with diagnosis of hereditary angioedema. **Exclusion Criteria:** current pharmacological treatment with ACE-inhibitors, glucocorticoids, psychotropic drugs, immunomodulators, anesthetics. A blood sampling was performed to measure cortisol, IL-6, TNF- α and catecholamines, medical examination, psychiatric examination to investigate the clinical characteristics of HAE and presence of life events, psychometric evaluation. Any correlation was assessed by Spearman Rho.

Results: the sample consists of 46 patients, including 22 women (47,8%) e 24 men (52,2%). Average age of onset of symptoms is equal to $14,61 \pm 12,46$. High values of IL-6 ($1,83 \pm 3,9$) and TNF- α ($10,2 \pm 27,5$) were related with severity of pathology .

Conclusions: levels of IL-6 and TNF- α are in agreement with the increase in the number of attacks of HAE.

There is a relationship between increased levels of IL-6 and high scores on Hamilton Depression Rating Scale and on Hamilton Anxiety Rating Scale and a higher subjective perception of disease severity. The higher was the perceived stress, the greater will be the subjective perception of disease severity and the presence of pathological attachment styles.