NAME OF PRESENTING AUTHOR: Georgina Krebs

EMAIL ADDRESS OF PRESENTING AUTHOR: georgina.1.krebs@kcl.ac.uk

LOCATION OF PRESENTING AUTHOR: Europe

TIME ZONE OF PRESENTING AUTHOR: GMT +1

TYPE OF SUBMISSION: Oral paper

MEMBER STATUS:
Non-member

ELIGIBLE FOR THOMPSON AWARD: No
ELIGIBLE FOR ROWEWARD: No

TITLE:
The association between body dysmorphic symptoms and suicidality among adolescents and young adults: a genetically-informative study

FULL AUTHOR LIST:
Georgina Krebs1,2, Lorena Fernández de la Cruz3, Fruhling Rijsdijk1, Daniel Rautio3, Jesper Enander3, Christian Rück3, Paul Lichtenstein4, Sebastian Lundström5, Henrik Larsson4,6, Thalia C Eley1,*, & David Mataix-Cols3,*

* Joint last authors

AFFILIATIONS:
1 MRC Social, Genetic and Developmental Psychiatry Centre, Institute of Psychiatry, Psychology & Neuroscience, King’s College London, London, United Kingdom
2 National and Specialist OCD and Related Disorders Clinic for Young People, South London and Maudsley NHS Foundation Trust, London, UK
3 Centre for Psychiatry Research, Department of Clinical Neuroscience, Karolinska Institutet, & Stockholm Health Care Services, Stockholm County Council, Stockholm, Sweden
4 Department of Medical Epidemiology and Biostatistics, Karolinska Institutet, Stockholm, Sweden
5 Gillberg Neuropsychiatry Centre, Centre for Ethics, Law and Mental Health, University of Gothenburg, Sweden
6 School of Medical Sciences, Örebro University, Örebro, Sweden

KEYWORDS:
BDD, suicidal ideation, suicide attempts, twin design, genetic, adolescence
ABSTRACT:

Background: Previous research indicates that body dysmorphic disorder (BDD) is associated with risk of suicidality. However, studies have relied on small and/or specialist samples and largely focused on adults, despite these difficulties commonly emerging in youth. Furthermore, the aetiology of the relationship remains unknown.

Methods: Two independent twin samples were identified through the Child and Adolescent Twin Study in Sweden, at ages 18 (N=6,027) and 24 (N=3,454). Participants completed a self-report measure of BDD symptom severity. Young people and parents completed items assessing suicidal ideation/behaviours. Logistic regression models tested the association of suicidality outcomes with: (a) probable BDD, classified using an empirically derived cut-off; and (b) continuous scores of BDD symptoms. Bivariate genetic models examined the aetiology of the association between BDD symptoms and a suicidality composite at both ages.

Results: Suicidal ideation and behaviours were common among those with probable BDD at both ages. BDD symptoms, measured continuously, were linked with all aspects of suicidality, and associations generally remained significant after adjusting for depressive and anxiety symptoms. Genetic factors accounted for most of the covariance between BDD symptoms and suicidality (74.1% and 79.4% at ages 18 and 24, respectively), but with significant non-shared environmental influences (25.9% and 20.6% at ages 18 and 24, respectively).

Conclusions: BDD symptoms are associated with substantial risk of suicidal ideation and behaviours in late adolescence and early adulthood. This relationship is largely explained by common genetic liability, but non-shared environmental effects are also significant and could provide opportunities for prevention among those at high-risk.

GRANT SUPPORT:
The Swedish Twin Registry is managed by Karolinska Institutet and receives funding through the Swedish Research Council under the grant no 2017-00641. The CATSS study is supported by grants 2012-1678, 2014-0834 and 2017-02552 from the Swedish Council for Working Life, funds under ALF agreement 2014-0322 and ALFGBG-776031, and grants 340-2013-5867 and 2014-3831 from the Swedish Research Council. GK is funded by an MRC Clinical Research Training Fellowship (MR/N001400/1). TCE is part funded by a program grant from the MRC (MR/M021475/1).