**Methods:** In this study, children between 7 and 16 years of age, 39 of whom were OCD patients and 37 healthy, have been included, with both groups having a similar distribution of age and sex. Total serum testosterone, cortisol and DHEA-S levels were measured using the ELISA method, and the relationship with the clinical data was investigated.

**Results:** No statistically significant difference could be established between the patients and the control group in testosterone, DHEA-S or cortisol levels. (p=0.175, p=0.642, p=0.842 respectively).

**Conclusion:** This first study found out that levels of cortisol, testosterone and DHEA-S in the pediatric patients were no different than they were in the control group. However, considering that the levels of these neurosteroids have been shown to be different in the adult patients before, it is likely that the change in neurosteroid levels is a finding emerging in the course of the anxiety disorders.

**Keywords:** obsessive-compulsive disorder, testosterone, DHEA-S

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[Abstract:0610] **Obsessive compulsive disorder**

**Relationship between level of insight and cognitive functions in obsessive-compulsive disorder**

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**Objective:** The aim of this study is to evaluate the relationship between the level of insight and cognitive functions in obsessive-compulsive disorder.

**Methods:** A total of 50 patients who presented to Necmettin Erbakan University, Meram Medical School’s Psychiatry outpatient clinic between June 2013 and March 2014, were diagnosed with OCD, and met the criteria of the study (27 patients with a high level of insight and 23 with a low level of insight) were compared with the control group composed of 25 healthy individuals recruited among the relatives of hospital staff with regard to neuropsychological test performances. In our study, the Stroop Test, Cancellation Test, WAIS-R Number Sequencing subtests, Line Orientation Test, and the Auditory Verbal Learning Test (AVLT) were used to evaluate cognitive functions like attention and memory, visual-spatial functions and executive functions like response inhibition and resistance to interference.

**Results:** There was no statistically significant difference between the patients diagnosed with OCD (those with a high level of insight and those with a low level) and the healthy control group regarding mean age, sex, married status, level of education, and professional status. It was found that the patients with OCD performed significantly worse than the control group in all the areas except for executive functions like response inhibition and interference affect and some of the attention areas. When all the results of the neuropsychological tests given to patients with a high level of insight, patients with a low level of insight, and to the healthy control group were evaluated, it was seen that while the patients with a high level of insight performed significantly worse in the attention, visual-spatial functions, and verbal working memory areas, those with a low level of insight performed significantly worse than the healthy control group in almost all areas. Further, when the neuropsychological test results of patients with a high level of insight and patients with a low level were compared, it was found that there was no statistically significant difference between them except for long-term memory and verbal learning areas.

**Conclusion:** The fact that OCD patients with a low level of insight present a specific neuropsychological profile is important since it will pave the way to the evaluation of biological and psychological characteristics of this group and to the development of therapy strategies. Moreover, the fact that OCD patients with a low level of insight have more severe impairment in neuropsychological performance suggests that this group presents different neurobiological characteristics than patients with no problem of insight.

**Keywords:** cognitive functions, insight, obsessive compulsive disorder

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