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PERFECTIONISM AND OTHER RISK FACTORS IN POSTPARTUM DEPRESSION: A CASE-CONTROL STUDY

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<sup>1</sup>Department of Clinical and Health Psychology, Universitat Autònoma de Barcelona, Bellaterra (Barcelona), <sup>2</sup>Neuropsychopharmacology Programe, IMIM-Parc de Salut Mar, <sup>3</sup>Neuroscience Institute, Hospital Clinic, UB, IDIBAPS, <sup>4</sup>CIBERSAM, Barcelona, Spain Introduction: Although perfectionism has generally been associated with depressive illness in general, there are no studies on its role in major depression in the postnatal period. The aim of the present study was to explore the relationship between perfectionism and major postpartum depression.

Methods: In this case-control study, we compared the differences in perfectionism dimensions between 122 women with major postpartum depression (SCID-I; DSM-IV) and 115 healthy postpartum women. The Frost Multidimensional Perfectionism Scale (FMPS) was used to assess perfectionism. Other variables were also considered: Socio-demographic and obstetric data, psychiatric history, other personality traits, social support, life events and genotype combinations according to serotonin transporter expression (5-HTTLPR and Stin2 VNTR polymorphisms).

Results: Multivariate models confirmed perfectionism as an independent factor associated with major postpartum depression. The FMPS dimension concern over mistakes was associated with a 4-fold increase in risk for major postpartum depression (OR=4.14; 95%CI: 1.24-13.81). Neuroticism, personal psychiatric history and 5-HTT low-expressing genotypes at one of the loci were also identified as independent factors.

Conclusions: Perfectionism, and particularly the concern over mistakes perfectionism dimension, is associated with major postpartum depression. These results highlight the importance of assessing personality traits together with other risk factors to identify women at risk of depression after childbirth.