*Conclusion* The correlation of depressive symptoms, complement and C-reactive protein with depressive symptoms suggests that these may be mediated by disease activity and share pathophysiological mechanisms. The overall weakness of correlations with biological markers demonstrates that more specific tests need to be developed. The study of lupus associated depression may, furthermore clarify the role of immune dysfunction in the pathophysiology of this psychiatric disorder.

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### EV0381

## Depression among elderly cancer patients

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*Introduction* Depression is one of the most common mental illnesses in the elderly and its consequences are severe.

*Aims* To measure the prevalence of depression in elderly cancer patients and subsequently determine the sociodemographic and clinical factors correlated with this disorder.

*Methods* We conducted a descriptive and analytical crosssectional study of patients aged over than 65 years old, suffering from cancer and who had no cognitive impairment, admitted in 2013 in the Oncology and palliative care unit of Gabes regional Hospital (Tunisia). We used a self-rating questionnaire to detect sociodemographics and clinical variables, the Geriatric depression scale (GDS) to assess depressive symptoms, and the Activity of Daily Living to determine the degree of autonomy.

*Results* At the end of our investigation, we included 60 patients. The prevalence of depression was 48%. Depression was significantly correlated with: marital status (widower subjects were more depressed (74% vs. 34%, P=0.007)), less degree of autonomy (80% vs. 38%, P=0.04), fatigue (62% vs. 26%, P=0.007), pain (59% vs. 26%, P=0.02), family psychiatric history (80% vs. 20%, P=0.02), family history of death by cancer (72% vs. 38%, P=0.01), WHO condition (67% vs. 34%, P=0.04) and the presence of co morbidity in particularly diabetes (69% vs. 41%, P=0.05).

*Conclusion* Depression is prevalent in oncogeriatric environments. This could compromise quality of support and care of these patients. Close collaboration between oncologist and psychiatrist is needed to support and relieve these patients.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

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#### EV0382

## Depressive symptomatology and language perception in young women

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*Introduction* Depression may have numerous effects on cognition. A little investigated topic is the perception of the grammatical gender.

*Objective* The aim of this study is to examine whether there is a different understanding of grammatical gender in Greek-speaking young women with and without depressive symptomatology regarding names of cars that are female or neutral according to the modern Greek language.

*Method* Two-hundred fourteen women from Greece (Mean age = 19.59, SD age = 3.60, 18 min–50 max) were examined with the ZUNG Self Rating Depression Scale and a language test that comprised of 38 names of car brands, which were characterized in linguistics either as female or neutral. Half of women scored high in the ZUNG Depression scale.

*Results* Results indicated that overall there are no statistically significant differences between women with or without depression in their gender perception of the words (P > .005). In addition to that, there are no statistically significant differences between the names of car brands that are related to large size cars and/or expensive car models.

*Conclusions* This research suggests that although there is a tendency to consider the existence of depressive symptomatology as detrimental on cognition, this does not seem to hold true for the perception of the gender of the words as examined by linguistics. *Disclosure of interest* The authors have not supplied their declaration of competing interest.

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#### EV0383

# Seasonal affective disorder (SAD) and light therapy: State of the science

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Major depression with a fall/winter seasonal pattern, also known as seasonal affective disorder (SAD), is a recurrent and prevalent disorder. Treatment may include either pharmacological (antidepressant) or non-pharmacological options, most commonly light therapy. Over the years, light therapy has been explored using various delivery methods including light-emitting diode (LED) devices. For over 20 years, cool-white fluorescent sources that yield 10.000 lux of polychromatic white light have been the standard treatment for SAD. Many investigations have confirmed the clinical effectiveness of white light, its overall tolerability, and adverse reactions, such as agitation, insomnia, and headache. Building upon this, more recent studies have compared alternative light sources and different wavelengths of light, such as white, red, green, and blue. If certain wavelengths are more potent and effective, lower intensities of light could reduce side effects and increase tolerability and adherence. Furthermore, studies of the ocular system particularly, intrinsically photosensitive retinal ganglion cells, discovered differences among specific wavelengths of light. While some reports have suggested that 446-477 nm wavelengths of blue light may be the most potent, published clinical trials have revealed mixed results. The purpose of this session is to review the state of the science on light therapy in the treatment of SAD, and suggest recommendations for clinical practice and implications for patients. Disclosure of interest The author has not supplied his/her declaration of competing interest.

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#### EV0384

## Association of activation syndrome with life-time hypomanic symptoms and Ghaemi criteria

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