

Conclusions: There is a plethora of possible factors involved in the development of an inaugural seizure. Although, the risk of spontaneous seizure during ECT is low, it may be increased by the concomitant use of drugs which can lower the seizure threshold. In most cases, when ECT was resumed after removal of such triggers, there were no further complications.

Keywords: Epileptic seizure; ECT; major depressive disorder

EPP0522

Peripheral tryptophan and serotonin and kynurenine pathways in major depression: A case-control study

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Introduction: The tryptophan pathway along with its two branches of metabolism to serotonin and kynurenine seems to be affected in major depression. In depressed patients, peripheral levels of tryptophan, serotonin, kynurenine and their metabolite remain unclear.

Objectives: Therefore, peripheral tryptophan and metabolites of serotonin and kynurenine were investigated extensively in 173 patients suffering from a current major depressive episode (MDE) and compared to 214 healthy controls (HC).

Methods: Fasting plasma levels of 11 peripheral metabolites were quantified: tryptophan, serotonin pathway (serotonin, its precursor 5-hydroxy-tryptophan and its metabolite the 5-hydroxy-indole acetic acid), and kynurenine pathway (kynurenine and six of its metabolites including anthranilic acid, kynurenic acid, nicotinamide, picolinic acid, xanthurenic acid and 3-hydroxy-anthranilic acid).

Results: 60 (34.7%) patients were antidepressant drug free. Tryptophan levels did not differ between MDE patients and HC. Serotonin and its precursor (5-hydroxy-tryptophan) levels were lower in MDE patients than HC. Whereas, its metabolite (5-hydroxy-indole acetic acid) levels were within the standard range. Kynurenine and four of its metabolites (kynurenic acid, nicotinamide, picolinic acid and xanthurenic acid) were lower in MDE patients.

Conclusions: This study uses the largest ever sample of MDE patients, with an extensive assessment of peripheral tryptophan metabolism in plasma. These findings provide new insights into the peripheral signature of MDE. The reasons for these changes should be further investigated. These results might suggest a better stratification of patients and different therapeutic strategies therapeutic strategies.

Keywords: Major Depression; Peripheral serotonin pathway; Peripheral kynurenine pathway; Peripheral tryptophan

EPP0523

On psychosocial pathomorphosis of depression

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Introduction: The concept of depression has long been a matter of controversy. Sociocultural factors greatly influence the phenomenology of depression and the meaning that patients assign to their symptoms.

Objectives: The aim is to determine the changes in the phenomenology of depression over the past decades.

Methods: To compare the proportions of biologically mediated symptoms of typical recurrent melancholic depression with the ideator components of the depressive syndrome and a depressive decrease in reactivity. We compared the archival data of one of the authors (V.N.K.) obtained in the study of depression: 1980-1987 (first group) and 2014-2020 (second group). The groups are age-comparable (21-64 y.o.). The Hamilton Depression Scale has been used to assess depression (score of 21-32, in both groups).

Results: Basic, i.e., biologically mediated symptoms, were not statistically different in the study groups. Whereas symptoms associated with emotional reactivity, the patient's introspective abilities and capacity to identify and verbalize feelings - in the second group, were statistically rare, except for anhedonia, which, on the contrary, came to the fore. Based on some longitudinal studies of the dangers of excessive reliance on computer-mediated communication, one could foresee such contrasting phenomenology changes, which were especially clearly manifested in young patients.

Conclusions: Over the past decades, there are changes in the phenomenology of depression. The same underlying disorder can produce different clinical presentations, and agreement on a pathological entity does not necessarily mean deal with a descriptive label.

Keywords: Depression; Psychosocial pathomorphosis; Patient's capacity to verbalize feelings

EPP0524

The impact of religiousness on life satisfaction and anxiety level of the patients with depression disorders treated at the neuro-psychiatric center in riem, munich

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Introduction: Religious people suffer less from depression disorder than less or non-religious people. According to a longitudinal study investigating religiousness and negative life events, religious participants demonstrated fewer depressive symptoms than non-religious. Furthermore, depressed patients with higher religiosity scores show lower values of depression symptoms.

Objectives: The purpose of the study was to investigate the relationship between religiosity and patients with depression symptoms in the Neuro-Psychiatric Center in Riem (NPZR). The correlation between religiousness and life satisfaction as well as anxiety level was analyzed. Additionally, possible gender differences are also assessed.

Methods: The patients of the NPZR were selected as sample of the study (N =106, F=61, M=45). The participants were provided with three surveys including the life satisfaction questionnaire, state trait anxiety inventory and the Centrality Scale. A Pearson Correlation was conducted to investigate the association between life satisfaction, level of anxiety and religiousness. T-Test was carried out to find out the differences between female and male patients.

Results: There was a positive relationship between religiousness and life satisfaction of the depressed patients ($r = .608, p = .001$). There was also a significant relationship between religiosity and anxiety level ($r = -.548, p < .001$). However there was no significant difference between male and female patients with regard to their religiousness ($t = .149, p = .882$).

Conclusions: The findings indicate that while there is a significant relationship between life satisfaction, level of anxiety and religiousness of the patients, the gender of the patients has no impact on the religiosity of participants.

Keywords: Life satisfaction; Depression; Religiosity

EPP0525

Dysthymia through time: A review

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Introduction: Dysthymia is defined in ICD-10 as a chronic depression of mood which does not currently fulfil the criteria for recurrent depressive disorder, mild or moderate severity, in terms of either severity or duration of individual episodes. Although it only entered the psychiatric classifications in DSM-III and ICD-10, this syndrome has been a subject of several changes in conceptualization and classification.

Objectives: We aim to perform an historical review on dysthymia and related concepts.

Methods: We performed an updated review in the PubMed database using the terms “dysthymia”, “dysthymic disorder”, “persistent depressive disorder”, “neurotic depression” and “depressive personality”. The included articles were selected by title and abstract. We also consulted reference textbooks.

Results: Depressive symptoms have been recognized since Antiquity, however, depressive disorders with a chronic course were only conceptualized in the 1970s. Dysthymia represents the confluence of older concepts, including neurotic depression and depressive personality and entered the psychiatric classifications in DSM-III and ICD-10. Presently, this syndrome is classified as persistent depressive disorder (dysthymia) in DSM-5 and named dysthymic disorder in ICD-11.

Conclusions: The concepts regarding mental illness and psychiatric diagnoses are constantly evolving. Having knowledge about historical concepts is essential for a clear communication among psychiatrists, adding to the differential diagnosis process and improving patient care.

Keyword: Dysthymia

EPP0526

Depression and hypothyroidism: Literature review and case report.

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Introduction: Multiple neuroendocrine disorders can present themselves through diverse psychiatric symptoms. In the case of hypothyroidism it can manifest itself through mood disorders that will require a comprehensive differential diagnosis.

Objectives: We present a case report and a review of the relevant literature about the relation between mood disorders and hypothyroidism.

Methods: We present the case of a 56-year-old man with no prior psychiatric record who concurring with a grieving process, developed a depressed mood, fatigue, decreased daily activity, and home isolation for months of evolution. He was diagnosed of hypothyroidism and treated with levotiroxine. It was necessary to boost hormonal treatment with antidepressant drugs due to the persistence of the symptoms after the resolution of the hormonal deficit.

Results: The relationship of depression in patients with overt hypothyroidism is widely recognized. Common alterations to both disorders that could make their diagnosis difficult have been observed: existence of psychomotor slowing, attentional and executive disturbance, anxiety, asthenia, weight gain, depressed mood or bradypsychia among others. In the case of subclinical hypothyroidism, certain neuropsychiatric disorders have been linked without having conclusive evidence.

Conclusions: An early screening of thyroid function at the onset of psychiatric symptoms in individuals without prior psychiatric record is essential in the provision of adequate treatment. Clinical improvement has been seen with hormone replacement therapy alone. However, in up to 10% of patients it becomes insufficient, being necessary to complete it with antidepressant drugs for the complete resolution of the condition.

Keywords: hypothyroidism; Depression; mood disorder

EPP0527

Investigation depression prevalence and related effective factors among students at health faculty isfahan university 2019, Iran

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Introduction: The incidence of depression is associated with decreased social, occupational, and educational performance.

Objectives: The aim of this study was assessing the prevalence of depression and its related effective factors among students at health faculty at Isfahan University of Medical Sciences in 2019.

Methods: In this cross-sectional study 177 students were included randomly. The Beck test included 21 questions were applied to collect data. Data were analyzed by SPSS software (version 22) and were presented as descriptive statistics and analyses included One-way analysis of variance, t-test and correlation Pearson.

Results: The mean and standard deviation of the age of students was 22.15 ± 3.88 years. More than 80% of students experienced some