other therapeutic strategies, such as combination or switching to other antidepressant or augmentation with other psychotropics. *Conclusions* There is strong evidence that SGAs augmentation is an effective and generally safe therapeutic approach to patients with MDD who respond poorly to antidepressants. Nevertheless, more studies are needed to understand the efficacy of this treatment comparing other therapeutic approaches.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.308

EW191

Antidepressant-induced hyponatremia

L. Rodríguez Andrés*, S. Gómez Sánchez, A. Rodríguez Campos, R. Hernández Antón, L. Gallardo Borge, A. Álvarez Astorga Hospital Clínico Universitario de Valladolid, Psychiatry, Valladolid, Spain

* Corresponding author.

Introduction Hyponatremia is one of the electrolytic disorders most comonly observed among general hospitalized populations (2% of hospitalized patients). A form of hyponatremia is the syndrome of inappropriate antidiuretic hormone secrection (SIADH). One of its diverse causes is medication. Selective serotonine reuptake inhibitors (ISRSs) can cause hyponatremia due to SIADH, particularly among elderly population.

Clinical case report A 81-year-old female treated with paroxetine 20 mg/day because of depression. Two weeks later she starts feeling nausea, somnolence and motor inhibition. The sodium level previous to the onset of treatment was normal but after two weeks it has decreased to 121 mEq/L, pointing to SIADH induced by ISRSs. Discussion The incidence of hyponatremia among elderly patients treated with antidepressants of ISRSs class has increased. The prevalence varies between 0.5 and 25%. Although half of the patients are asymptomatic, the mortality is rate may reach 25%. It generally develops during the first month of treatment and is reversible between 2 and 28 days after the suspension of the ISRSs. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.309

EW193

The impact of neuroinflammation and inflammatory cytokines in depression and suicidal behavior

G. Serafini ^{1,*}, M. Pompili ², P. Girardi ², M. Amore ¹

- ¹ Section of Psychiatry- San Martino Hospital- University of Genoa, Neuroscience DINOGMI, Genoa, Italy
- 2 Sant'Andrea Hospital- Sapienza University of Rome, Neuroscience, Rome, Italy
- * Corresponding author.

Introduction It has been suggested that neuroinflammation and inflammatory mediators may play a crucial role in the pathophysiology of both major depression and suicidal behavior. Immunological differences have been reported between both subjects with major affective disorders and suicidal behavior.

Objectives The main objective of this review was to deeply investigate the nature of the association between inflammatory cytokines in depression and suicidal behavior. Aims: The study aimed to conduct a systematic review of the current literature to investigate the association between inflammatory cytokines, depression, and suicidal behavior.

Results Generally, an imbalance between pro-inflammatory and anti-inflammatory cytokines has been documented in both major depression and suicidal behavior. The presence of major depres-

sive disorder (MDD) with suicidal ideation/attempts was associated with differences in inflammatory cytokine profile when compared to that without suicidal ideation/attempts. However, not all studies demonstrated a positive correlation between inflammatory cytokines and suicidal behavior.

Conclusions The mentioned association between inflammatory cytokines, depression, and suicidal behavior does not imply the existence of a causal relationship. Further additional studies should clarify the molecular mechanisms of the immune activation pathways underlying depression and suicidality.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.311

EW194

N-methyl-D-aspartate antagonists in depression-15 years after the first ketamine clinical study what has changed?

J. Ribeiro*, D. Mota, L. Rosa Coimbra Hospital and University Centre, Psychiatry Department, Coimbra, Portugal

* Corresponding author.

Introduction In the last decades, multiple studies have suggested evidences of disturbances within the glutamate system in depressed patients. The first clinical study using ketamine in depression treatment was conduct fifteen years ago. Since then several studies tried to understand the mechanisms underlying the antidepressant effects of ketamine, as well as discover new drugs with better pharmacodynamic profiles.

Objectives/aims Review the literature on the role of glutamate system in depression and novel approaches with glutamate N-methyl-D-aspartate receptor antagonists in depression.

Methods Search and review of scientific literature on PubMed database with the keywords.

"major depressive disorder", "depression", "ketamine", "glutamate", "NMDA", "neuroplasticity".

Results Abnormalities of the glutamate clearance at synaptic space and astrocytic dysfunction associated with glutamate metabolism have been associated with depressive symptomatology. In depressed patients, reduced levels of glutamate have been described by magnetic resonance spectroscopy in multiple cortical areas, amygdala and hippocampus, supportting the hypothesis of glutamate system involvement in the neurobiology of depression. Indeed, in the last 15 years, multiple clinical studies using ketamine provided some evidence that glutamate N-methyl-D-aspartate receptor antagonism could be an approach for refractory forms of depression. However, regardless all of the evidences, no drug targeting specifically the glutamate system has been approved for depression treatment.

Conclusions The glutaminergic system plays a role in the pathophysiology of depression, why it's a possible therapeutic target. So, it's of utmost importance that future studies keep the focus in this area, looking for new drugs active in this system.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.312

EW195

Disturbance of serum albumin conformation in patients with melancholic depression

M. Uzbekov^{1,*}, T. Syrejshchikova², N. Smolina³, V. Brilliantova¹, G. Dobretsov³, V. Krujkov⁴, I. Emel'yanova⁴, V. Krasnov⁴

- ¹ Moscow Research Institute of Psychiatry, Brain Pathology, Moscow, Russia
- ² Lebedev Physical Institute, High energy, Moscow, Russia
- ³ Federal Research and Clinical Center of Physical-Chemical Medicine, Biophysical methods of diagnostics, Moscow, Russia
- ⁴ Moscow Research Institute of Psychiatry, Affective disorders, Moscow, Russia
- * Corresponding author.

Introduction The last years it is became clear that disturbances in molecular processes in pathological conditions can be connected with conformational changes in protein structure.

Aim Investigation of blood albumin conformation in patients with melancholic depression.

Material and methods There were investigated 19 patients with melancholic depression (12 women and 7 men) and 25 health volunteers. Patient's state according to ICD-10 criteria was defined as a depressive episode in the frame of bipolar depressive disorder (type 2) (F32) and in the structure of recurrent depressive disorder (F33). Subnanosecond laser time resolved fluorescence spectroscopy (SLTRFS) (subnanosecond diapason) with K-35 fluorescent probe was used for the investigation of albumin conformation.

Results and discussion There were revealed 3 binding sites in albumin molecule with fluorescent decay time of 1, 3 and 9 nanoseconds (A1, A3 and A9 sites, respectively) in healthy volunteers using SLTRFS approach. There were found significant differences between albumin binding sites of volunteers and patients with melancholic depression, respectively, A1–117 \pm 7 \pm 142 \pm 10; A3–358 \pm 14 \pm 420 \pm 26; A9–371 \pm 16 \pm 433 \pm 29.

Conclusion These findings point out that melancholic depression is followed by conformational changes of albumin molecule that can affect its functional properties. We can hypothesized that albumin binding properties can serve as a biomarker of the efficacy of psychopharmacotherapy.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.313

EW196

Differential profile amongst patients with depressive disorder (DD) and adjustment disorder (AD)

J. Martínez Arnaiz ^{1,*}, B. Vallejo-Sánchez ¹, C. Garcia Blanco ¹, A.M. Pérez-García ²

- ¹ Santa Barbara Hospital, Mental Health Unit, Puertollano- Ciudad Real, Spain
- ² UNED, Psychology Faculty, Madrid, Spain
- * Corresponding author.

Introduction Adjustment disorder (AD) is a condition that includes both emotional or/and behavioral symptoms and occurs when individual is unable to cope with stress. It is a common diagnosis but few studies have been done due to controversial diagnosis related to their diagnostic criteria definition. It is often difficult to establish differential diagnosis with condition such as depressive and anxiety disorders or even normal reaction to stressful situations. There are limited tools to evaluate such condition and its definition is focused or based on lack of severity.

Objectives Study objective target is to analyse the differences between two groups, a first group with AD and another one with Major Depressive Disorder (MDD) (with different sociodemographic, clinical and triggering individual factors such as vulnerability or copying management).

Aims We try to have a better comprehension and management of depressive conditions.

Methods Two groups that belongs to Mental Health Community Team are compared. The first one with a diagnosis of AD, and another group with the diagnosis of MD. They have been diagnosed through a structured clinical interview and standard

questionnaires to evaluate personality copying management. Other pathologies (such as psychotic, organic,...) were excluded through a structured clinical interview. We analyzed variables considered through variance analysis.

Results Significant differences between groups were found in some of the variables considered.

Conclusions This study have important implications regarding evaluation, differential diagnosis and psychotherapeutic approach to patients with AD and MD.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.314

EW198

Anhedonic brain while attending sexual and emotional pictures

F. Von Duering Heiligenthal, Germany

Anhedonia is defined as the inability to gain pleasure from normally pleasurable experiences and reduced sexual desire. Rees et al. (2007) showed that limbic and paralimbic areas are responsible for sexual arousal and that anhedonia is associated with frontolimbic inhibition. In major depression, reduced ventral striatum and increased ventral prefrontal cortex areas was associated with anhedonia(Gorwood, 2009). Walter et al. (2009) indicated that there is a deviation in the neuronal activation pattern of the pregenual anterior cingulate cortex in anhedonic depression which is related to a glutamergic deficit. Glutamate was suggested to play a relevant role in reward system (Birgner et al., 2005). ACC is a key involved in affective state and glutamate mediates ACC activation to sexual attraction(Wu et al., 2009). Thus, a glutamatergic deficit might be related to reduced hedonic effect specific to major depression. Using an attention modulation of emotional and sexual pictures, we investigate the role of anhedonia on the ventral and dorsal systems in healthy volunteers and patients with major depression. They undergo an expectancy task in a 7T scanner and passively view sexual and emotional photographs and are asked to expect either high salient pictures or high erotic pictures. Half of these pictures are announced by an expectancy cue, whereas the other half are preceded by a fixation cross. Snaith-Hamilton-Pleasure-Scale and Hamilton Depression Rating Scale are employed to assess anhedonia and depressive symptom severity. Brain metabolites in the dorsal and pgACC are measured using MRS. We will show how anhedonia modulates the neural response to sexual arousal.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.316

Eating disorders

EW199

Oxytocin secretion in anorexia nervosa and bulimia nervosa: Investigation of its relationships to temperament personality dimensions

M. Nigro ^{1,*}, A.M. Monteleone ¹, L. Steardo ¹, G. Patriciello ¹,

V. Di Maso¹, M. Cimino¹, U. Volpe¹, P. Monteleone²

- ¹ Department of Psychiatry, University of Naples SUN- Naples- Italy, Naples, Italy
- ² University of Salerno, Neuroscience Section- Department of Medicine and Surgery, Salerno, Italy
- * Corresponding author.