

EPP0559

Distribution of inpatients with cardiovascular diseases and major depressionN. Kornetov^{1*}, O. Molodykh², A. Arzhanik³ and N. Zvereva⁴

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Introduction: Major depression (MD) and anxiety symptoms (AS) are frequent cardiovascular diseases satellites (CVD).

Objectives: To examine features of comorbid physical and mental disorders considering age and sex variability.

Methods: Cross-sectional study 146 patients with CVD were examined in cardiology department of the Medical Centre. Of these, 51 (60.0%) are women and 34 (40.0%) are men. Patients assessed the intensity of pain or its absence using Visual Analog Scale. Anhedonia was determined by the Snatch-Hamilton Pleasure Scale - SHAPS. A hospital scale, HADS, was used to assess anxiety and depression. The final clinical diagnosis of MD was carried out according to the DSM-V criteria. Quantitative and ordinal signs are presented in the form Me-Median (Q1; Q3) - the first and third quartiles, respectively.

Results: The degree of MD among male and female $p=0,17$; in "A" and "B" groups $p=0,4912$. Among patients of "A" age group is 2 (Q1 1; Q3 4) $p=0,1777$ had no difference. Patients of group "B" scored 3 (Q1 1,0; Q3 5,0) $p=0,0019$. Anxiety among female is 9 (Q1 6,0; Q3 11,0), among male 7 (Q1 3,5; Q3 9,0) $p=0,0006$. In the group of patients under 60 years anxiety score is 8 (Q1 4,0; Q3 9,0), group above 60 - 8 (Q1 6,0; Q3 11,0) $p=0,0045$. Pain intensity scored 3 (Q1 1,0; Q3 5,0) among male, 5 (Q1 3,0; Q3 7,0) among female $p=0,0009$.

Conclusions: Despite invariability of main depression symptoms among sex and partly age, pain and anxiety symptoms prevailed in elderly male and female.

Keywords: Depressive Disorder; Major Depression; Cardiovascular diseases; comorbidity

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Evaluation of the prevalence and risk factors of depression in patients admitted to the CCU of the persian gulf hospital in bandarabbas city

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Introduction: The diagnosis of depression and identifying the factors affecting it in patients with high levels of hospitalization is necessary. Evaluating the prevalence of depression in this

population is difficult, because some of the symptoms in depression and medical illness are similar and it is probable the diagnosis of depression to be missed in this patients.

Objectives: The purpose of this study was to investigate the prevalence of depression and factors affecting it in patients admitted to the CCU of the Persian Gulf hospital in BandarabbasCity.

Methods: This study was performed on 133 patients admitted to the Persian Gulf Hospital. After obtaining consent from patients, depression was recorded based on Beck questionnaire (BDI-II). Demographic data was registered from hospital chart review, and patient interview. Chi-Square and Mann-Whitney tests were used to compare the data.

Results: Our results showed that the prevalence of depression was significant in CCU patients. 14.3% of CCU patients had moderate to severe depression and 54.59% had mild depression and only 30.8% were normal. Our study also demonstrated that there was a direct and significant relationship between depression and age, low education level, unemployment and length of hospitalization. ($P < 0.05$)

Conclusions: Considering the high prevalence of depression in CCU patients, it is necessary to identify and perform therapeutic measures in patients at high risk for mental illness.

Keywords: Depression; ccu

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Self-reported validity of self-presentation on social media sites and its association with affective disorder

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Introduction: Individuals with affective disorders, who are prone to negative cognitive bias, may be particular vulnerable to positively biased presentations by other social media users. The degree of positive bias in self-presentations on social media sites is however poorly understood

Objectives: To investigate the validity of self-presentation on social media sites and its association with affective disorder

Methods: Individuals aged 18-75 receiving treatment at the outpatient clinic for affective disorders at Aarhus Hospital or at two general practices were invited to participate in a survey focusing on social media use. Two core questions were: "To what extent do your social media content reflect your real life" and "To what extent do others' social media content reflect their real lives". Response was provided on a likert scale with the following steps: "much more negative" (1), "more negative" (2), "the same as" (3), "more positive" (4) and "much more positive" (5) than real life. Based on these responses on bias, we calculated a bias ratio (validity of own self-presentation/validity of others' self-presentation). The association between unipolar depression, bipolar disorder and bias ratio >1 was investigated using logistic regression with adjustment for age and sex

Results: A total of 183 individuals with unipolar depression, 119 with bipolar disorder and 186 controls participated in the study. Unipolar depression was associated with a bias ratio >1 (OR: 3.4, 95%CI: 1.2;9.9)

Conclusions: Individuals with unipolar depression are prone to consider their self-presentation as more positively biased compared to others' self-presentation. This may shape the impact of social media use on these individuals.

Keywords: unipolar depression; Cognitive bias; Self-Presentation; social media

EPP0562

Salivary markers of stress system activation and social withdrawal in humans

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Introduction: Social withdrawal is an early and common feature of psychiatric disorders. Hypothalamic-pituitary-adrenal (HPA)-axis activation through increased salivary cortisol (sC) and sympathetic activation through increased salivary alpha-amylase (sAA) may play a role.

Objectives: We aimed to study whether the link between increased sC and sAA on the one hand and depression on the other hand is mediated by social withdrawal.

Methods: In this cross-sectional, observational study, sC and sAA measures were measured in seven saliva samples in 843 participants (231 psychiatric patients and 612 healthy controls). Social withdrawal was assessed through the Brief Symptom Inventory (BSI)-, the Short Form 36-, and the Dutch Dimensional Assessment of Personality Pathology social withdrawal subscales, and analyzed using linear regression and mediation analyses. On average, participants were 44.0 years old (SD=12.8; 64.1% female).

Results: Basal and diurnal sAA were unrelated to any social withdrawal scale and depression. Certain sC measures were positively associated with the BSI social withdrawal subscale (i.e., area under the curve with respect to the increase, $\beta=0.082$, $p=0.02$; evening sC value: $\beta=0.110$, $p=0.003$; and mean sC value: $\beta=0.097$; $p=0.01$). We found limited support for statistical mediation by social withdrawal (measured using a composite social withdrawal score) on the relationship between evening sC and depression.

Conclusions: Thus, although we found no support for a role of basal and diurnal sAA in social withdrawal, HPA-axis activation may partly aggravate social withdrawal in depressive disorders.

Keywords: salivary alpha-amylase; salivary cortisol; social withdrawal

EPP0563

Effectiveness of vortioxetine in real-world clinical practice: Interim results from the relieve study

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Introduction: Vortioxetine has demonstrated sustained efficacy and favorable safety profile in multiple clinical trials.

Objectives: This study aims to describe the effectiveness and safety of vortioxetine in real-world clinical practice.

Methods: RELIEVE is a prospective, multi-national, observational cohort study of outpatients initiating vortioxetine treatment for MDD at physician's discretion and followed for 6 months. Data were collected at routine clinical visits. The primary outcome was functioning measured by Sheehan Disability Scale (SDS). Depressive symptoms measured by Patient Health Questionnaire 9-item (PHQ-9), cognitive symptoms measured by PDQ-5 and DSST were key secondary outcomes. Safety outcomes including adverse events were reported. This interim analysis presents results of 527 patients who completed the study and were followed for 6 months. Mixed models of repeated measures were used to assess improvements between baseline and month 6, adjusted for relevant confounders.

Results: A total of 527 patients (mean age, 50.2 years, 65% female) were enrolled from US, Canada, France and Italy, and included in the analysis. Mean SDS total score, PHQ-9, PDQ-5 scores decreased by 8.6, 7.4 and 4.7 respectively from baseline to last visit. Mean DSST score improved by 6.5 from baseline to last visit. Patients' overall functioning and quality of life significantly improved, sick leave days and underproductive days (both absenteeism and presenteeism) decreased over the entire follow up period. The overall incidence of adverse events(AE) was 25%, with the most common AEs being nausea and headache.

Conclusions: The results confirm the effectiveness and good tolerability of vortioxetine in a broad range of patients in routine clinical practice.

Conflict of interest: Dr. Mattingly has served as researcher, consultant or speaker for Akili, Alcobra, Alkermes, Allergan, Axsome, Boehringer, Forum, Genentech, Jansen, Lundbeck, Medgenics, Merck, Neos, NLS Pharma, Otsuka, Reckitt Benckiser, Roche, Sage, Shire, Sunovion, Supe

Keywords: real world evidence; effectiveness; Depression; Vortioxetine

EPP0565

Depression during the COVID-19 pandemic. A retrospective study on depressive disorders among psychiatric patients admitted at "elisabeta doamna" hospital galati, romania

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