

Objectives: The aim of this study is to elucidate the similarities and differences in patterns of abnormal neural activity between adults and youth diagnosed with MDD and to then determine whether these observed differences are due to either developmental age or length-of-illness.

Methods: We used multilevel kernel density analysis (MKDA) with ensemble thresholding and triple subtraction to separately determine neural abnormalities throughout the whole brain in primary studies of depressed youth and depressed adults and then directly compare the observed abnormalities between each of those age groups. We then conducted further comparisons between multiple subgroups to control for age and length-of-illness and thereby determine the source of the observed differences between youth and adults with depression.

Results: Adults and youth diagnosed with MDD demonstrated reliable, differential patterns of abnormal activation in various brain regions throughout the cerebral cortex that are statistically significant ($p < .05$; FWE-corrected). In addition, several of these brain regions that exhibited differential patterns of neural activation between the two age groups can be reliably attributed to either developmental age or length-of-illness.

Conclusions: These findings indicate that there are common and disparate patterns of brain activity between youth and adults with MDD, several of which can be reliably attributed to developmental age or length-of-illness. These results expand our understanding of the neural basis of depression across development and course of illness and may be used to inform the development of new, age-specific clinical treatments as well as prevention strategies for this disorder.

Disclosure of Interest: None Declared

EPP0444

Attitude Toward Depression in Thai Physicians compared with general population

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Introduction: High stigma has been considered an important cause for the low rates of help-seeking, lack of access to care, under-treatment, material poverty, and social marginalization. Physicians commonly know about depression but are reluctant to seek mental health treatment.

Objectives: This study aimed to examine the attitude toward depression in Thai physicians compared with the general population.

Methods: A cross-sectional descriptive study was conducted on Thai physicians and the general population. We used the Depression Stigma Scale in the Thai version to assess stigma. The Depression stigma scale was distributed via the internet with a google form program.

Results: Two thousand eighty-three participants responded to the questionnaire. Comparing the Depression Stigma Scale of the general population and physicians by using an independent test demonstrated that there was a significant difference between the two groups ($p < 0.001$) with an average total score of physicians higher than the general population (37.47 and 35.73, respectively). There was a significant difference in the Perceived Stigma Subscale

in the general population $p < 0.001$ and physicians but not in the Personal Stigma Subscale. A significant difference was shown between the Personal Stigma Subscale of male and female physicians ($P < 0.05$). No significant difference was demonstrated between the Perceived Stigma Subscale of male and female physicians. However, the male and female general population had no significant differences in the Depression Stigma Scale.

Conclusions: Physicians had higher depression stigma than the general population, especially in perceived stigma.

Disclosure of Interest: None Declared

EPP0445

Characteristics of Adults Hospitalized for a Major Depressive Disorder: Results from the Multicenter OASIS-D Study

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Introduction: Major Depressive Disorder (MDD) is one of the most common mental illnesses worldwide and is strongly associated with suicidality. Commonly used treatments for MDD with suicidality include crisis intervention, oral antidepressants (although risk of suicidal behavior is high among non-responders and during the first 10-14 days of the treatment) benzodiazepines and lithium. Although several interventions addressing suicidality exist, only few studies have characterized in detail patients with MDD and suicidality, including treatment, clinical course and outcomes. Patient Characteristics, Validity of Clinical Diagnoses and Outcomes Associated with Suicidality in Inpatients with Symptoms of Depression (OASIS-D)-study is an investigator-initiated trial funded by Janssen-Cilag GmbH.

Objectives: For population 1 out of 3 OASIS-D populations, to assess the sub-population of patients with suicidality and its correlates in hospitalized individuals with MDD.