EPV0413

Efficacy of brexanolone in postpartum depression

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Introduction: Depression whose onset in the peripartum period is commonly referred to as Postpartum Depression. Postpartum Depression affects 11.5% of women during pregnancy or postpartum.Brexanolone has been developed for the treatment of Postpartum Depression, it is a formulation of Allopregnanolone, which is administered parenterally. Several studies have found that a single Brexanolone infusion had rapid antidepressant effects for severe Postpartum Depression, with good safety.
Objectives: The objective of this review is to evaluate the effectiveness of treatment with Brexanolone in Postpartum Depression.
Methods: A systematic search was performed through Pubmed, including randomized controlled trials (RCTs).
Results: 2 articles were selected that included three RCTs, in which participated 156 women diagnosed with Postpartum Depression who received an infusion of Brexanolone and 111 women with Postpartum Depression who received placebo .Compared to placebo, women who received Brexanolone had a significant clinical response, starting 24 hours after administration (RR: 1.34; 95% CI: 1.03–1.73).), reaching its maximum action peak at 36 hours (RR: 1.50; 95% CI 1.06–2.13; P = 0.02), and with a duration of effect up to the seventh day (RR = 1.32, 95% CI: 1.01–1.73). Likewise, women with Postpartum Depression, treated with Brexanolone, had a significantly greater remission, starting at 24 hours of treatment (RR: 1.86; 95% CI: 1.03–3.34), reaching its peak maximum action at 60 hours (RR: 2.20; 95% CI 1.31–3.70), and with a duration of effect up to 72 hours (RR = 1.96; 95% CI: 1 .41–2.72).
Conclusions: The administration of a dose of Brexanolone seems to have an ultra-rapid antidepressant effect for the treatment of Postpartum Depression. The short-term and long-term therapeutic effect of brexanolone needs to be examined with large-scale randomized controlled studies.

Disclosure of Interest: None Declared

EPV0412

Catatonia in a case of major depression resistant to pharmacotherapy. A case report

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Introduction: Catatonia is a clinical syndrome characterized by behavioral alterations, which may include motor immobility or excitation. As a symptom, catatonia may be present in several mental disorders, primarily schizophrenia and mood disorders. Symptoms can be severe and can lead to dangerous and lethal conditions if not diagnosed and treated properly.
Objectives: To describe the complicated evolution of a case of major depression with psychotic symptoms, which developed catatonic status. We discuss the psychopharmacological approach and non-pharmacological therapies (ECT).
Methods: Case summary. We have conducted a systematic review of the descriptions published to date, regarding this case.
Results: We present a case of extreme severity, in a 55-year-old male, with a broad differential diagnosis with organic pathology, which required multidisciplinary management in conjunction with other specialties and multiple complementary tests.
Eventually diagnosed with major depression with psychotic symptoms evolving into a catatonic state. During more than one year of follow-up, multiple drugs have been tested sequentially: SSRI antidepressants, dual action, low-dose antipsychotics (caripracin, lurasidone, aripiprazole, olanzapine).
Finally, a good response was obtained in the treatment with lorazepam 1mg /6h and 12 sessions of ECT administered concomitantly.
In this case, the patient presented a refusal to eat and weight loss with a BMI of malnutrition. We had to be coordinated with the endocrinology service for a nutritional restitution strategy through dietary supplements. Once nutritional restitution was achieved, we started treatment with clomipramine, with good results on affective symptoms.
Conclusions: Nowadays, the origin and treatment of catatonia are still unclear.
We present the case of a man with melancholic depression with psychotic symptoms, who evolved into a catatonic syndrome. A good response was achieved with the combination of ECT and benzodiazepines.
We want to highlight nutritional recovery as an important point to achieve good absorption of antidepressant drugs. Once achieved, we started treatment with clomipramine with good results.
During the treatment, he has presented multiple difficulties and finally, he was able to leave after five months of hospitalization in the acute mental health unit.

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EPV0413

"Andropausal" Depression – biological fact or psychosocial possibility?

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Introduction: In contrast to women, men do no experience a sudden cessation of gonadal function comparable to menopause. However, there is a progressive decline in hypothalamic-pituitary-gonadal function in aging men: testosterone level decline, and there is a loss of circadian rhythm of testosterone secretion.

By age 75 years, mean plasma testosterone levels have decreased 35% compared with young adults, and more than 25% of men of this age are clinically hypogonadal. Age related hypogonadism, which has been termed»andropause«, is thought to be responsible for variety of symptoms experienced by elderly men, including reduced muscle and bone mass, sexual dysfunction, depression, fatigue and irritability.

Objectives: However, it has been difficult to establish correlations between these symptoms and plasma testosterone levels. Clinical trials of testosterone replacement have documented some symptoms relief (improved muscle strength and bone mineral density), yet studies to date on the specific relation between depression and testosterone level have been methodologically flawed.

Methods: Data are presented from systematic clinical and epidemiological studies with bearing on this relation:

1. population-based assessments of the relation between testosterone level, genetic factors and depression in elderly men,
2. placebo-controlled clinical trials of testosterone replacement in men with major depressive disorder.

Results: Results suggest that age-related hypothalamo-pituitary-gonadal hypofunction may have particular etiologic importance in late-onset male dysthimia.

Conclusions: However, there is still the dilemma whether late-onset depression in older men is predominantly biological (in which testosterone decline certainly plays an important role), psychosocial, or stress-diathesis origin.

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EPV0414

Atopic Dermatitis and Major Depressive Disorder: is there causality?

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Introduction: The association between Atopic Dermatitis (AD) and Major Depressive Disorder (MDD) has long been reported by some population-based observational studies. However, observational studies are susceptible to potential confounders and inverse causation, rendering it difficult to conclude about the causality of such association. Mendelian randomization (MR) analysis is a novel epidemiological method to assess the causation between an exposure and an outcome, with less susceptibility to potential confounders and reverse causation by using genetic variants as instrumental variables.

Objectives: To report a clinical case of depression in association with atopic dermatitis and to review what contributions MR studies have been bringing to the matter of causality between AD and MDD.

Methods: Case report and literature review based on PubMed using the terms “atopic dermatitis”, “eczema”, “depression", “depressive”, “mood” and “Mendelian randomization”, which were searched in the title and abstract fields.

Results: Case-report: A 26-year-old man was admitted for inpatient treatment with a clinical picture of sadness, irritability, social isolation and insomnia, with 4 months of evolution, aggravated by suicidal ideation in the preceding days. On examination of the mental status, the patient had a frankly depressed mood, with congruent affects. He was contemplating suicide methods, pointing to sodium nitrite intoxication as an option. The patient related these symptoms to the worsening of his atopic dermatitis. In fact, he had a history of other depressive episodes contemporaries with periods of dermatological worsening.

Literature review: The PubMed research identified 7 articles, 4 of which assessed the causal effect of AD on MDD. Three studies did support a causal effect of AD genetic risk on MDD. One study supported a small causal effect of AD on MDD, with the significance disappearing when a stricter threshold for selection of single-nucleotide polymorphisms was applied.

Conclusions: The MR studies included in this poster favour the absence of a causal effect of AD on MDD, suggesting that the comorbidity observed clinically is unlikely to be causal. We must be aware that these studies are few and are not free of limitations (e.g. subgroup analysis for age and severity was not carried out, AD and MDD diagnosis were self-reported in some cases). Further research may help clarify the existence of causality and/or uncover the factors responsible for the observed association of AD with MDD in observational studies.

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EPV0415

“Lactose free” depression- Antidepressant with and without lactose registered in Croatia

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Introduction: Depression is a common illness worldwide, with an estimated 3.8% of the population affected, including 5.0% among adults and 5.7% among adults older than 60 years. Lactose intolerance affects 70% of the world population. With both conditions being common there are a lot of people having both lactose intolerance and depression. People with lactose intolerance are unable to fully digest lactose. As a result, they have diarrhea, bloating and gas after eating or drinking dairy products. Lactose is one of the most used excipients in drug formulations and is ofteny overlooked when prescribed.

Objectives: To quantify and identify the amount of lactose in medications used for the treatment of depression and to identify ‘lactose-free’ medication registered in Croatia.

Methods: Medications used for the treatment of depression were identified from the Agency for medicinal products and medical products of Croatia (HALMED). Their formulation including excipients was obtained from the Agency.

Results: Wide range of antidepressants contains lactose. We have quantified the lactose amount using information on medicinal products with marketing authorisation granted by HALMED.