

therapeutic profile towards the pathophysiological mechanisms involved in pathologies involving depressive and metabolic disorders.

Disclosure of Interest: None Declared

EPV0394

Effects of light therapy in the anxious-depressive clinic

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Introduction: Major depressive disorder (MDD) is defined as a mental disorder of multifactorial etiology, which presents with mood disturbance, mainly sadness associated with loss of interest or pleasure. Light therapy (LT) is a therapeutic intervention consisting of daily exposure to a light source. This study aims to evaluate the effects of LT on anxious-depressive symptomatology and sleep in a sample of patients diagnosed with depression.

Objectives: This study aims to evaluate the effects of LT on anxious-depressive symptomatology and sleep in a sample of patients diagnosed with depression.

Methods: Prospective case-control study, in which the cases are outpatients diagnosed with MDD and the controls are healthy individuals. Both groups underwent LT sessions and were assessed by means of validated scales, anxiety and depression symptoms before and after LT sessions, as well as changes in sleep patterns through a sleep measuring device.

Results: 11 cases and 18 controls were included in the study. Of the participants, 62.1% were female and 37.9% were male. The mean age of the sample was 54.03 ± 11.55 years. There were significant case differences in the pre and post LT scores of the depression scale. There were no significant differences in the changes in superficial, deep and total sleep and in the anxiety scale scores.

Conclusions: In the sample analysed, LT has significant effects on the cases at the level of the depression scale.

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EPV0395

Esketamine new tool for resistant depressive disorder. About a case

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Introduction: Depressive disorders represent the main cause of disability in the world, due to its prevalence, its impact on the patient's quality of life and its role as one of the main risk factors for suicide. Current antidepressant treatments can take weeks to take

effect and months to achieve response and remission. It is estimated that up to 30% of patients with major depressive disorder (MDD) are resistant to antidepressant treatment, in addition, approximately 30-45% of patients with depression do not achieve an adequate response to the first antidepressant treatment. According to the STAR*D study, the more lines of treatment are required, the lower remission rates are estimated, as well as higher relapse rates during the follow-up phase. With the appearance of intranasal dosage esketamine allows the release directly to the central nervous system, the mechanism of action of esketamine is based on the antagonism of the NMDA receptor, which entails the modulation of the excitatory transmission of glutamate and the release of BDNF, activating neurotrophic signaling and synaptogenesis.

Objectives: The objective is to expose the response after treatment with intranasal esketamine in a case of resistant depression.

Methods: A 55-year-old female patient, diagnosed with resistant recurrent depressive disorder. The patient had undergone treatment with different therapeutic lines with antidepressants, and potentiators with antipsychotics, observing little response in the current episode, for which reason we evaluated the indication of intranasal Esketamine. Scales: MADRS (Montgomery Asberg Depression rating scale) =37, Hamilton Depression Scale=25, PHQ-9=20, indicating severe depression.

Results: After starting treatment with intranasal esketamine, an early response was observed. After the first month of treatment, mild depression was scored at MADRS=10 and moderate depression at Hamilton=14, PHQ-9=12, and at week 14 of treatment, it was scored mild depression in both MADRS and Hamilton. Intranasal 56mg esketamine plus 20mg escitalopram, 30mg mirtazapine and 5mg aripiprazole.

Conclusions: Intranasal esketamine offers a rapid reduction in depressive symptoms maintained over time, reducing the risk of relapse and with a favorable tolerability profile, so its use in depression resistant to treatment presents a great advance.

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EPV0397

Cold water swimming as an add-on treatment for depression: a feasibility study

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Introduction: In Denmark, 14% of patients with depression develops treatment resistant depression (TRD) after the first hospital contact. Explanations for TRD include lack of clinical effect of pharmacological treatment and reluctance to treatment due to price, discomfort, and unacceptable side effects. Cold water swimming (CWS) describes swimming outdoors during the winter season in cold to ice-cold water on a regular basis. Many winter swimmers believe that exposure to cold water is beneficial for their health. However, evidence of health effects