

Anxiety disorders and somatoform disorders

EW17

Depressive symptoms and bone mineral density in menopause and postmenopausal women: A still increasing and neglected problem

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Objective The objective of current study was to investigate whether association exist between depression and low BMD during menopausal and post-menopausal period.

Methods A cross-sectional descriptive study and 1650 women aged 45–65 years were included during 1182 women agreed to participate (71.6%). Data on body mass index (BMI), clinical biochemistry variables including serum 25-hydroxyvitamin D were collected. The Beck Depression Inventory (BDI) was administered for depression purposes.

Results A total of 1182 women agreed to participate and responded to the study. The mean age and SD of the menopausal age were 48.71 ± 2.96 with depressed and 50.20 ± 3.22 without depressed ($P < 0.001$). Also, the mean and SD of postmenopausal age were 58.55 ± 3.27 depressed and 57.78 ± 3.20 without depressed ($P < 0.001$). There were statistically significance differences between menopausal stages with regards to number of parity, and place of living. There were statistically significance differences between menopausal stages with regards to BMI, systolic and diastolic blood pressure, vitamin D deficiency, calcium deficiency and sheesha smoking habits. Overall, osteopenia and osteoporosis and bone loss were significantly lower in post-menopausal women than in menopausal women ($P < 0.001$). Similarly, T-score and z-score were lower with depressed menopause and postmenopausal women ($P < 0.001$).

Conclusion The multivariate logistic regression analyses revealed that the depression, the mean serum vitamin D deficiency, calcium level deficiency, less physical activity, co-morbidity, number of parity, systolic and diastolic blood pressure and sheesha smoking habits were considered as the main risk factors associated with bone mineral loss after adjusting for age, BMI and other variables.

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

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EW18

Depression, anxiety and stress [DASS21] symptoms in menopausal Arab women: Shedding more light on a complex relationship

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Objective To determine correlation between depression, anxiety and stress in menopausal and post-menopausal women and shedding more light on a complex relationship.

Methods A cross-sectional descriptive study was used and 1468 women aged 45–65 years were included and 1101 women agreed to participate (75.0%). Depression, anxiety and stress were measured using the Depression Anxiety Stress Scales (DASS-21). Data on body mass index (BMI), clinical and other parameters was used.

Results A total of 1101 women agreed to participate after informed consent was obtained. The mean age and SD of the menopausal age was 49.55 ± 3.12 , the mean and SD of postmenopausal age was 58.08 ± 3.26 ($P < 0.001$). There were statistically significant differences between menopausal stages with regards to age, ethnicity, educational status, occupation sta-

tus, and place of living. Also, there were statistically significant differences between menopausal stages with regards to BMI, systolic and diastolic blood pressure, vitamin D deficiency, and diseases. Depression and anxiety were more common among post-menopause women. Also, there were no differences between the groups regarding the frequency of certain levels of stress among menopause and post-menopause. Multivariate regression analyses revealed that age in years, diastolic BP, consanguinity, regular exercise were predictor for depression. Meanwhile, diastolic BP, occupation and physical activity considered the main risk factors for anxiety. Furthermore, age in years, occupation and sheesha smoking habits were considered as the main risk factors associated with stress.

Conclusion A large number of factors were associated with experiencing menopausal and psychosocial problems which had negative effects on the quality of life among Arabian women.

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

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EW19

Neurocognitive deficit in first-episode, drug-naïve obsessive-compulsive disorder

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Objective Obsessive compulsive disorder (OCD) is one of the most common psychiatric chronic disorders (prevalence 2–3%) and has been associated with various neurocognitive impairment, including visual memory function. Although the relapse rate of OCD is highly considerable, little is known regarding the relationship between neurocognitive dysfunction and the chronicity of the illness, mainly because there are confounding factors as the medication effect. Therefore, we compared the difference of neurocognitive functions of the first-episode, medication-naïve OCD patients to chronic, medication-naïve OCD patients.

Method We defined the first-episode (FEOCD) if the illness duration was less than 3-year by DSM-IV criteria. Twenty-one FEOCD and 28 chronic OCD patients performed Korean version of the Wechsler Adult Intelligence Scale (K-WAIS), the Trail Making Test (TMT). All the participants were medication-naïve.

Results There was no differences in the severity of illness (YBOCS), depressive symptoms (Hamilton depression rating scale), general anxiety symptoms (Hamilton anxiety rating scale). FEOCD group showed significant impairment on the block design subtest of the K-WAIS ($P = 0.04$, $t = 1.294$).

Conclusions These results suggest that visual spatial cognitive dysfunction in patients with OCD may deteriorate as the untreated duration of illness get longer.

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EW21

Dynamics of biochemical changes in anxious-depressed patients under treatment with antidepressants with different mechanisms of action on serotonin reuptake

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Objectives Pharmacodynamics of serotonergic antidepressants differently influencing on serotonin reuptake receptors is poorly investigated.

Aim To compare biochemical profiles at patients with anxious depression under treatment with tianeptine–serotonin reuptake enhancer and sertraline–selective serotonin reuptake inhibitor.

Methods Platelet monoamine oxidase (MAO) and serum amine oxidase (AO) activities, level of middle mass endotoxigenic molecules (MMEM) and serum albumin functional properties – effective albumin concentration (EAC) and reserve of albumin binding (RAB) were investigated at 43 patients with anxious depression (F 32.1 and F 33.1). Clinical severity of illness was assessed using Hamilton Depression (21 items) and Hamilton Anxiety Scales. All patients were divided in two groups: group I (21 person) received tianeptine (37, 5 mg/day), group II – sertraline (50 mg/day).

Results It was established that patients with anxious depression were characterized by significant increase in MAO activity (by 95%) and the level of MMEM (by 86%) and significant decrease in AO activity (by 28%) and EAC and RAB parameters by 43 and 38%, respectively, in comparison with healthy volunteers. Under tianeptine and sertraline treatment, there were revealed contrary directed changes of all investigated parameters.

Conclusion Results of study show that both tianeptine and sertraline are equally effective in treatment of anxious depression. Present biochemical investigation, however, suggest that underlying biochemical changes are more complete following tianeptine treatment.

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Bipolar disorders

EW23

Determining the cut-off for recurrent depressive episode to predict diagnostic conversion from unipolar depression to bipolar disorder: 5-year retrospective study in one university hospital

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Objectives The aim of this study was to determining the cut-off for recurrent depressive episode to predict diagnostic conversion

from unipolar depression to bipolar disorder by means of retrospective reviews of medical records.

Methods The medical records of 250 patients with a diagnosis of major depressive disorder for at least 5 years were retrospectively reviewed for this study. We reviewed DSM-IV diagnosis and detailed clinical information at the index admission with assessments made every year after discharge to determining the cut-off for recurrent depressive episode to predict diagnostic conversion from unipolar depression to bipolar disorder.

Results Receiver operating characteristic curve analysis indicated cut-off scores for recurrent depressive episode of more than three times (area under curve=0.647, sensitivity=0.435, specificity=0.819, positive predictive value=0.351, negative predictive value=0.865).

Conclusions These findings suggest that it could predict the best diagnostic conversion from unipolar depression to bipolar disorder when depressive episodes are recurrent more than three times. Based on these findings, it will be able to promote the accuracy of diagnosis and the efficiency of treatment.

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EW25

First rank symptoms in mania: An indistinct diagnostic strand

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First rank symptoms (FRS) are considered to be pathognomic for schizophrenia. However, FRS is not distinctive feature of schizophrenia. It has also been noticed in affective disorder, albeit not inclusive in diagnostic criteria. Its existence in the first episode of bipolar disorder may be predictor of poor short-term outcome and decompensating course of illness.

Objective To determine the frequency of first rank symptoms in manic patients.

Method The cross sectional study was done at psychiatric services of Aga Khan University Hospital, Karachi, Pakistan. One hundred and twenty manic patients were recruited from November 2014 to May 2015. FRS was assessed by administration of validated Urdu version of Present State Examination (PSE) tool.

Result The mean age of the patients was 37.62 ± 12.51. The mean number of previous manic episode was 2.17 ± 2.23. In total, 11.2% males and 30.6% females had FRS. This association of first rank symptoms with gender in patients of mania was found to be significant with a *P* value of 0.008. All-inclusive, 19.2% exhibited FRS in their course of illness, 43.5% had thought broadcasting, made feeling, impulses, action and somatic passivity, 39.1% had thought insertion, 30.4% had auditory perceptual distortion, and 17.4% had thought withdrawal. However, none displayed delusional perception.

Conclusion The study confirms the presence of FRS in mania in both male and female, irrespective of the duration of current manic illness or previous number of manic episodes. A substantial difference was established between both the genders.

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