European Psychiatry S339

Introduction: Major depression (MD) is associated with cognitive and behavioral alterations in many domains. It is not well clear what cortical structures and functional alterations characterize MD patients during resting state, a condition during which mind wandering process is prevailing.

Objectives: In MD patients with severe levels of depression we expected, during resting state, an altered asymmetry of cortical activity in the EEG bands that generally mark neurological impairment, i.e. Delta and Theta EEG bands.

Methods: 30 MD patients under pharmacological treatment and 32 matched controls underwent an EEG recording (38 scalp sites) during 5 min resting state with open eyes. Eye movements were corrected by ICA modeling and the 5 min recording was divided in 2 sec epochs from which Delta and Theta spectral powers were extracted.

Results: Spectral analysis of the 5 min resting state revealed a significant difference between the two groups at the level of left temporal lobe. MD patients showed larger Delta and Theta spectral power in the left superior temporal gyrus at the level of Brodmann's Areas 22 and 42.

Conclusions: Results evidenced a cortical inhibition (greater EEG Delta and Theta activity) in left temporal linguistic areas in severe depression, a result pointing to a different mind wandering process and thought architecture in MD patients during resting state.

Keywords: Major Depression; EEG bands; resting state; psychophysiology

EPP0555

Depressive and anxiety disorders among women with obesity

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Introduction: Abdominal obesity is currently a growing problem in public health and has a high comorbidity with depressive and anxiety disorders. Obesity significantly decreases life quality, causes disability and decreases life expectancy.

Objectives: The objective of this study was to examine anxiety and depressive symptoms among women, who received individual or group psychotherapy sessions due to obesity control.

Methods: 577 women aging from 18 to 65 were examined. Height and weight were measured, Body mass index (BDI) was calculated based on received data. Depressive symptoms were determined with the PHQ-9 questionnaire [Kroenke K, Spitzer RL, Williams JB]. Anxiety symptoms were determined with the GAD-7 questionnaire. The level of social adaptation was examined

Results: The prevalence of mild depression in our sample of women with obesity was 31.5%, 19.1% - moderate depression, 1% - severe depression, 48.4% had no depression symptoms. Anxiety symptoms were found in 38.2% of examined women, 61.8% showed no anxiety symptoms. Furthermore, when patients were divided into

subgroups accordingly to BMI, anxiety was mostly registered among ones with normal BMI. An average correlation between indicators of anxiety and depressive symptoms was identified (r=0,62, p<0,05). Average correlation between indicators of anxiety and depression and the level of social adaptation (r=0,59 and r=0,48 relatively, p<0,05). Anxiety and depressive symptoms' dependency on BMI was not established.

Conclusions: The received data showed that anxiety and depression have high prevalence among women with obesity. The study will help medical specialists draw attention to high comorbidity between abdominal obesity and anxiety-depressive disorders.

Keywords: Depressive Disorder; Anxiety; Obesity; Body mass index; Depressive Disorder; Body Mass Index; Anxiety

EPP0556

The bidirectional relationship between epilepsy and depression

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Introduction: The relationship between epilepsy and depression has been recognized for a long time. In fact, the presence of depression could worsen the disease outcome.

Objectives: we aimed to study the prevalence of depression in patients with epilepsy and to assess the determinant factors of its genesis.

Methods: 54 patients with epilepsy, aged more than 18 years, attending the neurology department of Habib Bourguiba Hospital, Sfax, Tunisia, were enrolled for the study. All patients were administered Mini-International Neuropsychiatric Interview (MINI) for evalution of psychiatric comorbid disorders especially depression. Socio-demographic and clinical data were collected.

Results: A total of 54 patients were included, of whom 63% (n = 34) were men. Mean duration of epilepsy was 20.13 years. The most frequent type of seizure was generalized 72.7%. Depression was present in 7.3 % of patients. Alcoholism (p=0.027) was significantly associated with occurrence of depression. Drug resistence (p = 0.03) and longer duration of epilepsy (p = 0.046) were significantly associated with occurrence of depression. No significant association was found between type of seizure, seizure frequency, medication compliance and depression. Depression wasn't associated with anti-epileptic drug. We didn't find any association between depression and other psychiatric comorbidities.

Conclusions: Depression wasn't frequent in our study contrary to literature. The possible explanations are the reduced simple size and the sensitivity of the used tool to assess depression in epilepsy. Pursuant to literature, we found significant association between Alcoholism, drug resistance and long duration of epilepsy.

Keywords: Epilepsy; Depression; psychiatric comorbidity

S340 E-Poster Presentation

EPP0557

Distribution of inpatients with cardiovascular diseases and major depression

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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 cardiologic 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

EPP0558

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 patientsadmitted 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 obtainingconsent 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 depressionwas 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

EPP0559

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)