

formed out of 16 questions. The questionnaire is structured on three parts: general information about the participants, the nurse's knowledge about the postpartum depression, and the identification and the management of the patient's cases.

Results: 73 of the nurses questioned, consider that they were not properly prepared for this role and they were not able to identify and manage the patients with post-partum depression. They also consider that the ideal training should contain more theoretical information. Amongst these (32, 87%) do not know the symptomatology, and 38, 35% are not aware of the risk factors of post-partum depression.

Conclusions: Postpartum depression is seen in approximately 10% of women who have recently given birth, but also in 3, 3% of men. Despite of this numbers, the Romanian medical staff is not yet well prepared in facing this affection.

Disclosure: No significant relationships.

Keywords: post-partum depression; nursing; management of post-partum depression

EPP0397

Basal and LPS-stimulated inflammatory markers and the course of individual symptoms of depression and anxiety

W. Van Eeden

Leiden university medical center, Psychiatry, Leiden, Netherlands
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Introduction: A cross-sectional relationship between low-grade inflammation –characterized by increased blood levels of C-reactive protein (CRP) and pro-inflammatory cytokines– and both MDD and anxiety has been reported, but the potential longitudinal symptom-specific relationships has been less well studied.

Objectives: We aimed to test our hypothesize that inflammation is predictive of the severity and the course of a subset of MDD and anxiety symptoms, especially symptoms that overlap with sickness behavior, such as anhedonia, anorexia, low concentration, low energy, loss of libido, psychomotor slowness, irritability, and malaise.

Methods: We tested the association between basal and lipopolysaccharide (LPS)-induced inflammatory markers with individual MDD symptoms (measured using the Inventory of Depressive Symptomatology Self-Report) and several measures for symptom domains of anxiety over a period of up to 9 years using multivariate-adjusted mixed models in up to 2872 Netherlands Study of Depression and Anxiety (NESDA) participants.

Results: At baseline, 53.9% of the participants had a current mood or anxiety disorder. We found that basal and LPS-stimulated inflammatory markers were more strongly associated with sickness behavior symptoms at up to 9-year follow up compared to non-sickness behavior symptoms of depression. The associations with anxiety symptoms attenuated by 25%-30% after adjusting for the presence of (comorbid) MDD.

Conclusions: Inflammation was related to the presence and the course of specific MDD symptoms, of which the majority overlapped with sickness behavior. The associations between inflammatory

markers and anxiety symptoms were partly driven by co-morbid MDD. Anti-inflammatory strategies should be tested in the subgroup of MDD patients who report depressive symptoms related to sickness behavior.

Disclosure: No significant relationships.

Keywords: Anxiety; inflammation; Course trajectory; Depression

EPP0398

The risk of depressive symptoms in offspring exposed to prenatal alcohol and tobacco use: evidence from a population-based longitudinal study.

B. Duko^{1*}, G. Pereira¹, K. Betts¹, R. Tait², J. Newnham³ and R. Alati¹

¹Curtin University, Curtin School Of Population Health, Perth, Australia; ²Curtin University, National Drug Research Institute (ndri), Perth, Australia and ³The University of Western Australia, Division Of Obstetrics And Gynecology, Faculty Of Health And Medical Sciences, Perth, Australia

*Corresponding author.

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Introduction: Evidence from epidemiological studies indicated that intrauterine exposure to alcohol and tobacco is linked with a number of adverse outcomes in offspring. However, few studies have linked prenatal alcohol and tobacco exposures to offspring depressive symptoms with mixed results.

Objectives: The objective of this study was to examine the link between maternal prenatal alcohol and tobacco exposures and depressive symptoms in offspring.

Methods: Using data from the Raine Study, a prospective multi-generational observational study, we examined the associations between maternal prenatal alcohol and tobacco use and the risk of depressive symptoms in offspring at age 17 years (N=1168). Depressive symptoms in offspring were measured using the Beck Depression Inventory for Youth. Log-binomial regression was used to estimate relative risk (RR) for associations between exposures and outcome. To better investigate the role of potential confounders, risk factors were sequentially added as adjustment variables in separate models.

Results: After adjustment for potential confounders, depressive symptoms in offspring remained related to maternal alcohol use of six or more standard drinks per week during the first trimester of pregnancy [RR 1.59 (95% CI: 1.11-2.26)]. Further, the risk of depressive symptoms was 50% higher for offspring exposed to prenatal tobacco use when compared to non-exposed. The Associations did not appear to be mediated by the effects of prenatal alcohol and tobacco use on adverse pregnancy outcomes.

Conclusions: Early screening and prevention of these exposures could possibly reduce depressive symptoms in offspring. Moreover, future examinations such as Mendelian Randomization that allow a stronger causal inference is warranted.

Disclosure: No significant relationships.

Keywords: tobacco; offspring; alcohol; depressive symptoms