of depressed older patients, who need multimodal treatment strategies integrating physical, cognitive, and psychological functioning.

Disclosure: No significant relationships.
Keywords: cognition; Older Adults; Frailty; Depression

EPP0061

Association of FKBP5 gene methylation and adolescents' sex with depressive symptoms outcomes: a nested case-control study among Chinese adolescents

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Introduction: Altered DNA methylation in the FK506 binding protein 5 (*FKBP5*) gene has been shown to regulate stress response, which may serve as a biomarker of depression and a promising candidate for explaining sexual differences. However, there is no consistent conclusion so far.
Objectives: The present study aimed to test the associations of *FKBP5* DNA methylation with depressive symptoms and whether these associations were influenced by sex.
Methods: A nested case-control study comprising 87 cases and 151 controls was conducted in South China from January 2019 and December 2019. Peripheral blood for DNA extraction and DNA methylation analysis of *FKBP5* gene promoter was collected, and severity of depressive symptoms was assessed at baseline and after one year follow-up.
Results: Compared to healthy controls, lower methylation percentage of *FKBP5*-12 CpG 1 was observed in adolescents with depressive symptoms after adjusting covariates (case: 0.94 ± 2.00, control: 0.47 ± 0.92; $F = 5.41$, $P = 0.021$). In addition, hypomethylation of *FKBP5* CpG sites was not an independent risk factor for depressive symptoms after adjustment for environmental stress factors ($P > 0.05$). No significant sex differences were found in the association of *FKBP5* gene methylation with depressive symptoms.
Conclusions: Lower levels of *FKBP5* methylation were found in adolescents with depressive symptoms. Our study supported that the epigenetic factors did not act alone in the development of depressive symptoms. Taken together, these findings contribute to a better understanding of complex mechanisms of gene-environment interactions involved in depression.

Disclosure: No significant relationships.
Keywords: FKBP5; DNA methylation; depressive symptoms; sex differences

EPP0062

Specifics of depression in epilepsy

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Introduction: The strong comorbidity between depression and epilepsy is widely acknowledged. However, depression in epilepsy can manifest atypically, leading to its low detection rate and lack of access to treatment in patients with epilepsy
Objectives: To study the specifics and pattern of depression in epilepsy for its timely diagnosis and therapy and to prevent suicide risk and improve the quality of life in patients with epilepsy
Methods: Clinical, statistical, psychometric. A total of 149 patients, mean age 45.0 ± 11.7 years, 74 males, 75 females, were examined
Results: It was found that depression was manifested in 46.3% of patients before the onset of epileptic seizures, and in 20.8% of patients it developed after treatment with some AEDs. The incidence of symptoms characteristic of depression in epilepsy, such as unstable mood, irritability, euphoria, episodes of pain and sleep disturbances, and its' impact on the quality of life in patients with epilepsy were analysed. Gender differences were identified for a range of symptoms
Conclusions: The authors expanded their understanding of the clinical specifics of depressive manifestations in patients with epilepsy to allow timely detection and medical and rehabilitative care for these patients

Disclosure: No significant relationships.
Keywords: comorbidity; Depression; epilepsy

EPP0063

Routine treatment pathways of patients with major depression and active suicidal ideation with intent in Italy: interim results from the ARIANNA observational study

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Introduction: Major depressive disorder (MDD), especially in case of suicidal risk, is a psychiatric emergency, associated with high patient burden and healthcare resource utilization. Although active and urgent treatment is crucial, little is known on comprehensive care management of this condition in Italy.
Objectives: Here we report the ARIANNA study [NCT04463108] interim results to primarily describe the treatment utilization pathways of patients with MDD and active suicidal ideation with intent in the current clinical practice in Italy.
Methods: This observational prospective cohort study included adult patients with a moderate-to-severe major depressive episode (MDE) and active suicidality from 24 Italian sites. Real-world data

on patient characteristics, treatments, clinical outcomes, and healthcare utilization were collected during a 90-day follow-up. Data collection is still ongoing.
Results: Sixty-four evaluable patients were considered for this interim analysis: 41 (64.1%) females, mean [SD] age 46.0 [15.4] years, a concomitant psychiatric diagnosis in 7 (10.9%), and other comorbidities in 26 (40.6%). The baseline mean [SD] MADRS total score was 37.5 [7.2], with severe MDE and prior suicidal behavior in 30 (46.9%) and 21 (32.8%) patients, respectively. Median [25th;75th percentiles] duration of current MDE was 1.1 [0.3;2.1] months. Acute inpatient hospitalization was provided for 43 (67.2%) patients. Antidepressant augmentation with mood stabilizers and/or antipsychotic drugs and optimization were the most frequent early standard-of-care treatment regimens in 32 (53.3%) and 24 (40.0%) patients with available data (N=60), respectively.
Conclusions: Our preliminary results suggest that initial treatment approaches in this critical population are mostly polypharmacological and delivered as inpatient care, with consequent intensive resource utilization.

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Keywords: suicidal ideation; major depressive disorder; real world; standard of care

EPP0064

Association of genetic variants of Glutamate Metabotropic Receptor 5 gene and state-anhedonia

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Introduction: Andedonia is one of the core symptoms of depression. It is known that in case of depressed individuals experiencing anhedonia, the classical antidepressants are often ineffective, thus investigation of this symptom would be essential. Recent studies highlight the possible role of the glutamatergic system in anhedonia however, the genetic background of these assumptions is still unclear.
Objectives: Our goal was to investigate the possible associations between state-anhedonia and genetic variants from *GRM5* (Glutamate Metabotropic Receptor 5) gene.
Methods: For our analysis we used data from the NewMood (New Molecules in Mood Disorders, LSHM-CT-2004-503474) project. Participants (n = 1820) aged between 18-60, were recruited in Budapest and in Manchester. All volunteers filled out mental-health questionnaires and provided DNA sample. Genotyping was performed by Illumina's CoreExom PsychChip. Altogether 1282 variants from *GRM5* gene survived the genetic quality control steps. State-anhedonia was measured with an item from the Brief Symptom Inventory questionnaire. We performed logistic regression using Plink 2.0. During our analyses, age, gender, population and the top10 principal components of the genome were added into the model as covariates. Correction for linkage-disequilibrium were performed with LDlink.
Results: After the correction of linkage-disequilibrium, three independent variables (r^2<0.2), (rs1827603, rs6483520, rs35669869) yielded significant (p<0.05) results, both in additive and in dominant model. In case of recessive model, only rs11020880 showed significant (p<0.05) effect.
Conclusions: The detected nominally significant associations between state-anhedonia and genetic variants from *GRM5* gene strengthen previous assumptions about the possible relationship between glutamatergic system and anhedonia.

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Keywords: Glutamate; GRM5; Genetics; anhedonia

Eating Disorders 01

EPP0065

Links between posterior pituitary activity, psychometric profile and other endocrine abnormalities in anorexia nervosa: a multimodal evaluation

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Introduction: Opioid system activity was found disturbed in several reward circuit areas in restrictive anorexia nervosa (AN) patients but also at the pituitary level. The role of this specific abnormality in AN physiopathology remains unknown.**O**
Objectives: We aimed to evaluate the relationship of upper mentioned AN abnormality with its classical pituitary features and eating behavior traits.
Methods: PET [^{11}C] diprenorphin binding potential (BP_{ND}) were processed for each pituitary part in three groups of young women: 12 AN, 11 recovered AN patients (ANrec), and 12 Controls. Anterior pituitary hormones and neurohypophysis (NH) 12 points circadian profile including copeptin and oxytocin, psychological scores were evaluated in these subjects as well as in 13 bulimic (BN) patients.
Results: [^{11}C] diprenorphin pituitary binding was found to be fully localized in NH. Only AN patients' NH present lower [^{11}C] diprenorphin BP_{ND} than Controls, interpreted as a higher opioid tone. Both AN and ANrec show lower copeptin/24h than in Controls but no difference in oxytocin. BN showed increased copeptin and low