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 associaction 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 postmenopause 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.

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EW19

Neurocognitive deficit in first-episode, drug-naive 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-naive OCD patents 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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