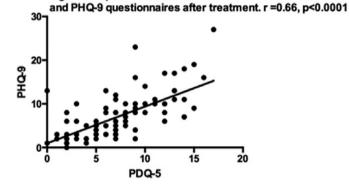
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Figure 1: Spearman correlation between total scores PDQ-5 and PHQ-9 questionnaires before treatment. r =0.50, p<0.0001

Figure 2: Spearman correlation between total scores PDQ-5





Conclusions: Significant improvements were found in the symptoms of depression, cognition and QOL in patients with MDD after treatment. Depression severity significantly inversely correlated with QOL and cognition of MDD patients.

Disclosure of Interest: None Declared

EPV0435

Measurement-based care vs. standard care for major depressive disorder in Pakistan: protocol for a randomized control trial

I. Husain¹, M. Umer^{1*}, Z. Nigah², T. Kiran², A. Bukhsh², M. Ansari³, M. R. Bhatia⁴, O. Husain¹, H. Naqvi⁵, A. Qadir², M. Saqib², A. H. Rajput³, M. A. Zeb⁶, S. A. Khan⁷, K. M. S. Siddiqui⁸, S. Sherzad⁶, B. Mulsant¹, N. Chaudhry², I. Chaudhry⁹ and N. Husain¹⁰

¹Centre for Addiction and Mental Health, Toronto, Canada; ²Ishrat Husain Pakistan Institute of Living and Learning, Karachi; ³Liaquat University of Medical & Health Sciences, Cowasjee Jehangir Institute of Psychiatry, Hyderbabad; ⁴Peoples University of Medical and Health Sciences, Nawabshah; ⁵Dow University of Health Sciences, Karachi; ⁶Baluchistan Institute of Psychiatry and Behavioral Sciences, Quetta; ⁷North West General Hospital, Peshawar; ⁸National Psychiatric Hospital, Multan; ⁹Ziauddin University, Karachi, Pakistan and ¹⁰Division of Psychology and Mental Health, School of Health Sciences, University of Manchester, Manchester, United Kingdom *Corresponding author.

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Introduction: Low and middle-income countries (LMICs) hold the majority of disease burden attributed to major depressive disorder (MDD). Despite this, there remains a substantial gap for access to evidence-based treatments for MDD in LMICs like Pakistan. Measurement-based care (MBC) incorporates systematic administration of validated outcome measures to guide treatment decision making and is considered a low-cost approach to optimise better clinical outcomes for individuals with MDD but there is a paucity of evidence on the efficacy of MBC in LMICs.

Objectives: This protocol highlights a randomized trial which will include Pakistani outpatients with moderate to severe major depression.

Methods: Participants will be randomised to either MBC (guided by schedule), or standard treatment (guided by clinicians' judgement), and will be prescribed with paroxetine (10–60mg/day) or mirtazapine (7.5–45mg/day) for 24 weeks. Outcomes will be evaluated by raters blind to study protocol and treatment.

Results: National Bioethics Committee (NBC) of Pakistan has given full ethics approval. The trial is being conducted and reported as per recommendation of the CONSORT statement for RCTs.

Conclusions: With increasing evidence from high-income settings supporting the effectiveness of MBC for MDD, it is now necessary to explore its feasibility, utility. and efficacy in low-resource settings. The results of the proposed trial could inform the development of a low-cost and scalable approach to efficiently optimise outcomes for individuals with MDD in Pakistan.

Disclosure of Interest: None Declared

EPV0436

Electroconvulsive therapy vs Esketamine among patients with Major Depressive Episode

M. D. R. D. R. F. D. A. Basto*, O. Nombora, L. Santa Marinha, J. L. Simães and A. Horta

Psychiatry and Mental Health, Centro Hospitalar de Vila Nova de Gaia e Espinho, Vila Nova de Gaia, Portugal *Corresponding author. doi: 10.1192/j.eurpsy.2023.1771

Introduction: Major depressive disorder is one of the most common and disabling mental disorders. More than 30% of individuals do not achieve remission after several trials of antidepressants and treatment-resistant depression (TRD) is associated with premature mortality. Electroconvulsive therapy (ECT) is considered the goldstandard for TRD treatment, unfortunately it's underused due to health care barriers and association with adverse cognitive impairment. So, scientists have sought to identify alternative treatments that approach ECT-equivalent efficacy. Trials with Ketamine and more recently with its S-enantiomer (Esketamine) has been made, revealing a rapid and robust antidepressant effect, emerging as an option for TRD treatment.