EV0401A

Comparison between patients with depressive disorders and healthy controls in resilience and coping skills

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Introduction　　Resilience in the psychiatric field, it is defined as the ability to recover from perceived adverse or changing situations through a dynamic process of adaptation. This process is influenced by personal characteristics, family and social resources and is expressed by positive coping skills. It is well known that resilience has an inverse relation with depression, however, the specific role of resilience in disorders like depression, personality disorders and psychosis is not fully understood.

Objectives　　Compare differences in resilience and coping skills in a sample of patients with depressive disorder in acute phase versus healthy controls.

Methods　　We are conducting a cohort study to the date we recruited 82 inpatients admitted in our psychiatric ward. The data have been gathered from the 1st December 2014 and they will continue to be collected until the 1st December 2016, the healthy controls are represented by 67 subjects with similar socio-demographic features.

Inclusion criteria are: diagnosis of depressive disorders or dysthymia according to DSM-IV-TR diagnostic criteria, age > 18 years, proper understanding of Italian language, willingness to give written informed consent. We compared them with healthy controls with similar socio-demographic features.

Patients' assessment includes the following tests:
– Resilience Scale for Adults (RSA);
– Brief-COPE Scale (Brief-COPE);
– Statistical analysis will be performed using SPSS for Windows, 21.0 (Armonk, NY: IBM Corporation).

Results　　Data collection is still ongoing.

Conclusions　　From a preliminary analysis of data, we assume that the levels of resilience and coping of our patients is reduced compared with controls, however the recruitment during the acute phase could significantly influence final results.

Disclosure of interest　　The authors have not supplied their declaration of competing interest.

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EV0402

Efficacy of a hypericum extract (STW3-VI) – A reanalysis

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Introduction　　The course of depression during therapy in studies is usually monitored by scales like HAMD. Also the course of single items of the HAMD during therapy might be of specific interest as some symptoms are of highly predictive value. Furthermore early improvement during antidepressive therapy is a new aspect which came into the focus.

Objectives　　The objectives of this study were to reanalyze clinical data regarding early improvement as well as specific symptoms or symptom cluster – like sleep disturbances.

Aims　　The aim of this study was to get deeper insight into the data structure of 2 RCTs ($n = 398$, 42 days treatment) comparing the efficacy of a hypericum extract (STW3-VI/900 mg once daily) to Placebo.

Methods　　Data structure was evaluated by comparing the total scores of the HAMD-17 to a single item analysis and by calculating the factorial structure of the end of treatment data. The treatment potential was evaluated by calculating a positive predictive value from day 7 to the end of treatment. ANCOVA, factor analysis and regression methods were used.

Results　　The single item analyses were widely comparable to the highly significant treatment differences of the total scores as it were the calculated subscales. The positive predictive value of the treatment was about 75%.

Conclusions　　The results underline the elsewhere proven treatment efficacy of STW3-VI regarding several new subscale aspects.

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EV0403

Major depressive disorder history among patients who sought blepharoplasty operation in a private ophthalmology hospital in Saudi Arabia

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Background　　Much attention has focused on body dysmorphic disorder among patients undergoing plastic surgeries, but there has been little evaluation of their past history of major depressive disorder (MDD).

Aim　　To estimate the prevalence rate of past history of Major Depressive Disorder (MDD) in patients undergoing Blepharoplasty operation in a private ophthalmology hospital in Jeddah, Saudi Arabia.

Methods　　All patients who have undergone blepharoplasty operation during the period from 5 April to 4 October 2016 (6 months) were included. Previous psychiatric history was taken from the patients by psychiatric assessment and self-assessment questionnaire, diagnosis of Major Depressive Disorder (MDD) confirmed previously by consultant psychiatrists in patients' health records was included.

Results　　One hundred and forty-eight persons undergone blepharoplasty in the hospital from 5 April to 4 October 2016. They were 89 females (60%) and 59 males (40%). Among those 148 persons, 10 patients were previously diagnosed with major depressive disorder by consultant psychiatrists with a percentage of 6.8% where 5 were females (5.6% of 89 females) and 5 were males (8.5% of 59 males).

Conclusions　　The number of individuals who present for blepharoplasty operation with a history of Major Depressive disorder needs to take a special consideration. A link between MDD and cosmetic operation decision should be further studied.

Keywords　　Blepharoplasty; Major depressive disorder

Disclosure of interest　　The authors have not supplied their declaration of competing interest.

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