

## Poster Session 2

### Monday, 19 March - Tuesday, 20 March 2007 Poster Session 2: DEPRESSIVE DISORDERS

#### P001

Trends in the use of antidepressant drugs in Lithuania

V. Adomaitiene<sup>1</sup>, E. Kadusevicius<sup>2</sup>, L. Kataiceva<sup>2</sup>. <sup>1</sup> *Department of Psychiatry, Kaunas Medical University and Hospital, Kaunas, Lithuania* <sup>2</sup> *Department of Basic and Clinical Pharmacology, Kaunas Medical University, Kaunas, Lithuania*

**Objective:** To evaluate trends in the use of antidepressant drugs in Lithuania between 2002 and 2004 years.

**Methods:** The data on total sales of antidepressant drugs in all Lithuanian regions over three years (2002–2004) were obtained from IMS Health Inc. Data were calculated by DDD methodology and expressed in DDDs per 1.000 inhabitants per day. DU95% was used as the quality indicator of the drug prescribing. The pharmacoeconomic analysis of antidepressants was performed by cost minimization and reference price methodology.

**Results:** In Lithuania the total antidepressants consumption increased by 30,55% over three years (2002–2004) period reaching the value of 10,00 DDD/1000 inhabitants/day. Since 2002 the proportion of use of SSRIs has increased by 27,82% and the use of TCAs has declined by 10,78%, while the use of other (newer) antidepressants expanded almost three times. The expenditures of antidepressants has reached 26 mln Lit (in 2004 year), of which 68,15% was costs for SSRI agents. Setting the reference price of fluoxetine it would be possible to save costs by 60,7%, up to 18 mln Lit per year (1€ = 3,4528 Lt).

**Conclusions:** The findings suggest that the use of total antidepressant drugs continues to increase because of the increased use of the SSRIs and other (newer) antidepressants. In comparison with the data in other countries the consumption of antidepressants in Lithuania is low. Due to high suicide rates in Lithuania and low consumption of antidepressant drugs we can assume that depression is diagnosed and treated insufficiently

#### P002

Low episodic memory performance as a premorbid marker of depression: Evidence from a 3-year follow-up

E. Airaksinen<sup>1</sup>, Å. Wahlin<sup>2</sup>, Y. Forsell<sup>1</sup>, M. Larsson<sup>2</sup>.  
<sup>1</sup> *Department of Public Health Sciences, Stockholm, Sweden*  
<sup>2</sup> *Department of Psychology, Stockholm, Sweden*

**Background:** This study examined low episodic memory scores as a potential risk factor for developing depression by using longitudinal data from the PART project in Stockholm, Sweden.

**Method:** A population-based sample of non-depressed participants (20–64 years) were re-examined three years after the initial screening (n=708). At baseline, a neuropsychological test battery including tests of episodic memory was administered. Also, information about demographic and socioeconomic factors, alcohol use, and anxiety diagnoses was collected. The psychiatric data for depression diagnoses were collected both at baseline and follow-up.

**Results:** Logistic regressions were conducted on three separate study groups that were defined according to three different assessments of episodic memory (i.e., free + cued recall, free recall or cued recall) among individuals who scored in the 25 lowest or highest percentiles in the memory tests. The results suggest that low episodic memory performance defined as the sum of free and cued recall of organizable words, constitute a risk for depression diagnosis three years later, even after controlling for differences in demographic, socioeconomic, alcohol use and anxiety levels. Also, female gender, low educational level, and financial strain constituted significant risk factors for developing depression.

**Conclusion:** This study indicates that low episodic memory performance predates depressive diagnosis and might be considered as a premorbid marker of incipient depression.

#### P003

Risk factors for postpartum depression: A preliminary study

A. Algul<sup>1</sup>, U.B. Semiz<sup>1</sup>, M. Cetin<sup>1</sup>, O. Dundar<sup>2</sup>, M.A. Ates<sup>1</sup>, C. Basoglu<sup>1</sup>, S. Ebrinc<sup>1</sup>, H. Gunay<sup>1</sup>, S. Iyisoy<sup>1,3</sup>. <sup>1</sup> *Department of Psychiatry, GATA Haydarpasha Training Hospital, Istanbul, Turkey* <sup>2</sup> *Department of Obstetric and Gynecology, GATA Haydarpasha Training Hospital, Istanbul, Turkey* <sup>3</sup> *Department of Psychiatry, Etimesgut Military Hospital, Ankara, Turkey*

**Background:** Postpartum psychiatric disorders constitute an important field of problems due to the fact that they lead to an increase in mortality both in infant and mother. A history of mental disorders and stressful life events during pregnancy and post partum period, poor familial and social relations are stated as important risk factors. The aim of this study is to specify the risk factors associated with PPD in Turkish women.

**Methods:** Among 185 women that gave birth in a state hospital, 80 were suitable and admitted to the study. One month after the birth, subjects were interviewed with an assessment battery including SCID-I, Edinburgh Postnatal Depression Scale and a semistructured interview form concerning the sociodemographic and risk factors for PPD.