Conclusions: Psilocybin-assisted therapy is a very appealing new possibility in the treatment of depression. However, due to the small populations of the existing trials, future studies are needed to prove this positive association and to fully understand Psilocybin's mechanisms of actions and effects.

Disclosure: No significant relationships.
Keywords: Depression; Psilocybin; treatment-resistant depression

EPV0258

Postpartum depression and perceived stress among Tunisian parturient

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Introduction: The postpartum depressions (PPD), rank first postpartum complications and therefore pose a public health problem by their frequencies and their adverse consequences.
Objectives: To detect the depression among a Tunisian parturient, to evaluate their perceived stress and to study the link between these entities
Methods: A cross-sectional, analytical study of 40 first week postpartum women hospitalized in the gynecology department in Hedi Cheker hospital in Sfax-Tunisia, during the month of September 2019. We used the Arab version of Edinburgh Postnatal Depression Scale (EPDS) and the Cohen perceived stress scale (PSS).
Results: The average age of the participants was 31.07 years old. The Parturient have a rural origin in 62.5% of cases, they have a secondary school level in 52.5% of cases. There were exaggerated sympathetic signs in 52.5% of the cases. An organic pathologies were present during pregnancy in 47.5%. The postpartum period was simple in 77.5% of cases. For the post-natal period, 90% of parturient were going to receive help of a family member. EPDS: the average score was5.35 and the risk of developing a PPD was 20%. PSS we found that life represents a perpetual threat in 27% of cases. The factors correlated with the PPD were: a high level of perceived stress ($p < 0.00$) and organic pathology during pregnancy ($p=0.02$).
Conclusions: Our study shows that the risk of postpartum depression is high among Tunisian parturient and it is associated with high level of stress, because of this a precocious screening is necessary.

Disclosure: No significant relationships.
Keywords: parturient; post partum; Depression; stress

EPV0259

Comparative indicators of atherogenicity, body weight, gender differences in the group of depressive and non-depressive patients with cardiovascular diseases

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Introduction: Many studies show that obesity, dyslipidemia, and physical inactivity are closely related to depressive spectrum of symptoms (DSS), depressive disorder (DD). DD significantly reduces the patient's quality of life and vital activity.
Objectives: To study laboratory and physical parameters with DSS, DD in patients with cardiovascular diseases (CVD) to determine the number of patients requiring complex antidepressant therapy.
Methods: The cross-sectional study of 127 inpatients with CVD was conducted. Depression and anxiety symptoms were evaluated using HADS, anhedonia by Snaith-Hamilton Pleasure Scale (SHAPS) and pain by visual analog scale (VAS). Acquired data was statistically processed.
Results: The non-depressive patients was observed in 67 (53.0%) and 60 (47%) with DSS in CVD patients. When clinical assessing 29 (22.5%) met the criteria for major (DD), 39 (31%) for minor DD. When comparing body mass index (BMI) in patients with depression, the indicator was 31 (28.5; 33.5), in patients without depression 30 (26; 32) $p < 0.2828$; atherogenic coefficient in patients with depression was 2.93 (2.41; 3.575), in non-depressive patients - 2.375 (2.07; 3.07) $p<0.0083$.
Conclusions: More than 1/5 of patients with CVD need antidepressant therapy. >90% of all patients had a high BMI regardless of gender and the presence of depression. Depressive patients in 95% of cases were obese or overweight. Severe dyslipidemia in women with depression increases the risk of CVD. Conflict of interest: No.

Disclosure: No significant relationships.
Keywords: Depressive Disorder; Cardiovascular diseases; obesity; Dyslipidemia

EPV0260

Postpartum depression: How it differs from the "baby blues"

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Introduction: Despite many signs and symptoms of depression get dismissed as normal physiologic changes associated with childbirth, depressive disorders are a common complication of pregnancy and postpartum period. The so-called "baby blues" have a minor functional impact and respond well to social support, whilst postpartum depression causes significant functional compromise, requiring more aggressive therapy. There is an extreme type of postpartum depressive disorder, postpartum psychosis, when patients present psychosis, mania, or thoughts of infanticide. It is imperative to promptly recognize and differentiate these entities, in order to minimize its impact on both mother and child. Antidepressant treatment may be necessary for some women, but risks and benefits should always be considered prior to institute pharmacotherapy.
Objectives: To identify current approaches and evidence-based treatment options for postpartum depression.
Methods: Review of the most recent literature regarding postpartum depression. The research was carried out through the Cochrane, UptoDate, PubMed, MedLine, LILACS and SciELO

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databases, using the terms "postpartum depression", "baby blues" and "postpartum psychosis", until December 2020.
Results: Since both depression and antidepressant medications confer risk upon the infant, when postpartum depression develops, psychotherapy is usually the first-line treatment. Antidepressant treatment may be necessary, but its use during pregnancy and postpartum must be weighed carefully.
Conclusions: In order to better prevent postpartum depression, recommendations include the use of screening instruments as a routine clinical practice during pregnancy and referral when necessary. Maternal depression has a severe impact on both mother and child, so mental health professionals have a very important role in reducing postnatal emotional complications.

Disclosure: No significant relationships.
Keywords: baby blues; breastfeeding; Postpartum depression; Antidepressants

EPV0261

The role of the gut-brain axis in depression and anxiety disorders

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Introduction: There is a bi-directional biochemical communication pathway between the gastrointestinal tract and the central nervous system, referred to as the "gut–brain axis". Studies show that bacteria in the gastrointestinal tract, including commensal, probiotic, or pathogenic, can affect brain's function. Since there is a symbiotic relationship between gut microbiota and the brain, changes in its composition can lead to dysbiosis, which plays a role in many psychiatric disorders, such as depression and anxiety, and therefore becomes a potential therapeutic target.
Objectives: To examine data from recent studies regarding the gut-brain axis and its relationship with psychiatric disorders, such as depression and anxiety.
Methods: Review of the most recent literature regarding the gut-brain axis and its relationship with depression and anxiety disorders. The research was carried out through the MedLine, PubMed, UptoDate, ScienceDirect, SciELO and SpringerLink databases, using the terms "gut-brain axis", "depression" and "anxiety", until December 2020.
Results: There is a relationship between dysbiosis of microbiota and some psychiatric disorders, particularly depression. Symbiosis may be restored by purposefully manipulate the gut microbiota using therapies such as probiotics, therefore enhancing beneficial bacteria in the gastrointestinal tract and improving symptoms of depression.
Conclusions: Although probiotics can be used in the treatment of depression, further research is needed in order to carefully determine parameters such as the duration of treatment, dosage and drug interactions. Nonetheless, a better understanding of the gut-brain axis may arise new approaches on how we prevent and treat mental illnesses.

Disclosure: No significant relationships.
Keywords: Gut-brain axis; Depression; anxiety disorders; microbiota

EPV0262

Depressive disorders after mild craniocerebral injuries in amateur athletes

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Introduction: Craniocerebral injuries are serious traumatic situations
Objectives: Aim of this study is to present cases of deppresive disorders after mild craniocerebral injuries in amateur athletes
Methods: 10 cases are presented. Range of age between 20 and 40 years old. All of them reported depressive disorders during the post traumatic period after mild craniocerebral injuries mainly during amateur athletic activities
Results: All of them they receive appropriate neurological, psychiatric, psycological and rehabilitation support and treatment. They managed to have a good outcome after 12 months follow up.
Conclusions: The development of depressive disorders after such traumatic events remains a strong predictor of a variety of difunctions (social, personal, work etc). The emergence of depressive disorders in many cases remains unexplored and poorly understood. The effect into the the overall health remains a very important factor to investigate. The combination and collaboration of the various medical disciplines is essential in order to help young people.

Disclosure: No significant relationships.
Keywords: Depressive disorders; craniocerebral injuries; athletes

EPV0263

The prevalence of depressive disorders among young people in europe: A systematic review and meta-analysis

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Introduction: This systematic review estimates the pooled prevalence (PP) of depressive disorders (DD) among 5-to-18-year-old YP living in Europe, based on prevalence rates established in the last five years (LFY).
Objectives: Trends of prevalence rates across countries, gender and level of education were analysed. The random effects pooled prevalence rate (REPPR) for DD was calculated.
Methods: A search strategy was conducted on three databases. Studies were also identified from reference lists and grey literature. Eligible studies were evaluated for reliability, validity, bias, and the REPPR for DD was calculated.
Results: The European REPPR for DD is calculated at 2.0% (95%CI: 1.0%-4.0%). (Figure 1). The REPPR for each depressive disorder is shown in Figure 1. The prevalence among secondary school children is 4.2 times higher than that among primary school children.