antidepressant treatment, several studies of antidepressants, including SRIs, have found that rating scale scores of suicidal ideation decreased along with other depressive symptoms.

An hypothesis has been reported that the brain-derived neurotrophic factor (BDNF) may be related to both suicidality and poor clinical response to antidepressants.

The authors presents a broad oveview on the topic based on unpublished and published meta-analysises as well as new data regarding response to antidepressant by suicidal patients that appear to be innovative in the interantional literature.

P078

Depression in hemodialysis patients: association with inflammatory and nutritional markers

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Depression, malnutrition and inflammation are highly prevalent in hemodialysis (HD) patients, representing important predictors of morbidity and mortality.

The aim of the study was to screen for depression in HD patients and analyze, among other factors, its association with inflammatory and nutritional indices. C-reactive protein, Body Mass Index, albumin, cholesterol, phosphate and hemoglobin levels, dialysis adequacy, the presence of co-morbidities, stages of rehabilitation, education level and marital status were observed.

Thirty five patients (19F,16M) aged 53.1±9.4 years, on thrice-weekly HD for 77.7±57.1 months were studied. Depression was assessed via Beck Depression Inventory (BDI). The scores on the BDI ranged from 0 to 45 (16.9±11.1). 31.4% and 28.6% prevalences of inflammation and malnutrition were observed.

Patients were divided into two groups according to score obtained: 9 not depressed (NonD) subjects (2F, 7M, BDI 0-9) and 26 patients (17F, 9M) with depressive symptoms (D group, score of 10+). Depression was significantly more frequent in females (p=0.05). None of the patients working full or part time had depressive symptoms, as opposed to 3 without job and 13 who were retired (p=0.02). Insignificant diference in prevalence of inflammation, malnutrition and other analyzed parameters was found. Subdivision of D group revealed mild depressive patients (10-15) to be significantly younger than both nonD patients and subjects with moderate or severe depression (16 +); p= 0.02.

Depression, inflammation and malnutrition are common in HD patients. It is of great importance for long-term outcome of this population to identify them early and initiate treatment.

P079

Affective temperament-types and suicidal behaviour

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Background: As the different affective temperament-types (depressive, hyperthymic, cyclothymic, irritable and anxious) play a significant role in the development and symptom-formation of bipolar and unipolar major mood episodes, the aim of this study was to examine these affective temperaments in persons making suicide attempts.

Method: Using the Hungarian version of the full-scale 110-item version of the TEMPS-A questionnaire. we compared the affective temperament profiles of 150 nonviolent (106 female and 44 male) suicide attempters (121 of them have had current major depressive episode) and 717 normal controls (438 females and 279 males).

Results: Compared to controls, both female and male suicide attempters scored significantly higher in four of the five temperaments, containing mWre or less depressive component (depressive, cyclothymic, irritable and anxious). On the other hand, however, no significant difference between suicide attempters and controls was found for the hyperthymic temperament scores. Significantly higher rate of suicide attempters (135/150=90.0%) than controls (138/717=19.2%) have had some kind of dominant (mean score + 2 SD or above) affective temperament (p=0.0001).

Conclusion: The findings support the strong relationship between depression and suicidal behaviour even on temperamental level, suggesting that hyperthymic temperament has no predisposing role for suicidal behaviour at least in case of nonviolent attempters. As current depression and dysregulated central serotonergic function are well-known suicide risk factors, these findings are also in good agreement with recent results on the significant relationship between the s allele of the serotonin transporter gene and depressive, cyclothymic, irritable and anxious temperaments, but not with hyperthymic temperament.

P080

The relationships between the severity of depression and behavioral attitudes

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The tasks of the investigation were to estimate behavioral attitudes in major depression and to check whether they are determined by the level of depression.

Subjects: 44 patients with major depression.

Methods: 21-item Hamilton Rating Scale for depression; Test BASE (projective questionnaire) for the estimation of: search activity (SA), stereotyped activity (St), chaotic behavior (Ch), passive behavior (Pa). As a normal configuration of BASE we have estimated BASE with positive values (>0)of Sa and St and negative values (<0) of Ch and Pa (without taking into consideration the absolute values).

Results: 1. SA is decreased and Pa is increased in patients. Patients with the Hamilton scale <22.7 and > 31.1 do not display significant differences in BASE scales. Both groups displayed abnormal configuration of BASE. Correlations between behavioral attitudes and Hamilton scale are absent. 2. In patients with the abnormal configuration of BASE Hamilton scale was significantly higher (27.7) than in patients with normal configuration (24.6).

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Conclusion: The severity of depression does not determine the indexes of the single behavioral attitudes. The level of depression is related to the configuration of behavioral attitudes.

P081

Behavioral attitudes and subjective sleep estimation in depression

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Sleep complaints are common in depression. The goal of this investigation was to check relationships between sleep estimation and the values of behavioral attitudes.

Subjects: 44 patients with major depression.

Methods: 21-items Hamilton Rating Scale for depression. BASE Test for the estimation of behavioral attitudes. Sleep questionnaire.

Results: 1. In patients satisfied with night sleep stereotyped behavior (St) was higher than in patients not satisfied with their sleep (3.16 vs. 0.6, p=0.03). 2. Patients with the negative values of search activity (SA) and/or St and positive values of passive behavior (Pa) are more often dissatisfied with their sleep than the opposite group. 3. In patients who report the increase of dreams after the positive emotional experience St is higher than in patients who do not report it (2.62 vs. −0.16, p=0.02). 4. In patients who like to see dreams in comparison to those who do not like it SA is higher, Pa is lower, while Hamilton Rating Scale is also lower.

Conclusion: The configuration of behavioral attitudes is more important for subjective sleep estimation than the level of depression.

P082

Pharmacological validation of a chronic social stress model in rats: effects of citalopram, reboxetine, haloperidol and diazepam

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The present study has been designed for pharmacological validation of chronic social stress paradigm as a model of depressive symptoms in rats. For this, rats were subjected to 5 weeks of daily social defeat and in parallel treated for clinically relevant period of 4 weeks with antidepressant drugs citalopram and reboxetine and neuroleptic drug haloperidol. Anxiolytic diazepam was administered acutely at the end of the stress period. The effects of social stress and the treatments were investigated in behavioural paradigms such as sucrose preference, forced swim test, open field test and elevated plus maze. Four weeks of oral treatment with applied antidepressants ameliorated the adverse effects of social stress and normalized behaviours related to motivation and reward sensitivity. The treatment with haloperidol worsened the adverse effects of chronic social stress having effects similar to stress on reward and motivation related behaviours. Treatment with diazepam caused reduction of anxiety related behaviours as measured in elevated plus maze in control animals having no effects on socially stressed individuals. Neither sucrose preference nor performance in forced swim test was affected by diazepam treatment. Effectiveness and selectivity of antidepressant treatment in ameliorating socially induced behavioural disturbances proofs validity of chronic social stress as a model of depressive symptoms in rats.

P083

Painful physical symptoms (PPS) in depressed patients: how is the correlation between physician- and patient assessment?

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Background and aims: In an interim evaluation on baseline data of the German PADRE observational study the correlation between physician- and patient assessment of emotional and physical symptoms of depressed patients was evaluated.

Methods: This multicenter, prospective, 6-month observational study focused on adult outpatients with a depressive episode as diagnosed according to ICD-10 criteria, chosen by their physician to start new anti-depressive treatment with duloxetine. Correlations between the applied depression and/or pain scales were calculated via Spearman's correlation coefficient. Symptoms were evaluated via clinician rated 'Inventory for Depressive Symptomatology' ([IDS-C], total score, including item 25), patient rated 5-item scale 'KUSTA', (rating mood, activity, tension-relaxation, sleep and appetite on visual analog scales [VAS]), and patient rated VAS for 'Pain'.

Results: All participating physicians are psychiatrists/neurologists. 2.748 patients (71% female, mean age 52.7 yrs) were evaluated. Any pain symptoms were documented in 88.9% of patients at baseline. When comparing patient- with physician-assessments, correlation of PPS scales was low to moderate and varied for different pain types: IDS-C item 25 (="somatic disorders") vs. overall pain-VAS: r=0.421 (95% CI 0.390, 0.452), IDS-C item 25 vs. abdominal pain: r=0.189; IDS-C item 25 vs. chest-pain: r=0.179. When comparing IDS-C total vs. the KUSTA items, correlation was moderate in all cases (e.g.: r= -0.510 for IDS total vs. KUSTA mood).

Conclusions: Only a low to moderate correlation was observed between physician- and patient assessment for PPS in depressed patients. Therefore, patient pain ratings should explicitly be included in the assessment of depressed patients.

P084

Relationship between kind of delivery and postpartum depression

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Background and aims: Postpartum depression (PPD) is one of the most common psychiatric disorders following delivery. This disorder makes serious problem for mother, child and family; therefore the identification of its risk factors is a must. One of these factors is kind of delivery. This study has been carried out to evaluate relationship between kind of delivery and PPD in kashan IRAN 2006.

Methods: This case control-study evaluated 460 women during 2-3 first months after delivery divided in 2 equal groups (depressed and normal group who were named case and control group respectively).The Beck standard test and a researcher-made questionnaire were used for evaluation. Some factors effecting on depression were omitted in the study and some mother age and birth order were matched in 2 groups. X2 and T test were used to analyze the data.

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