them women and 70 men. With a diagnosis at discharge of 48% of Psychotic Disorder, 17% of Bipolar Disorder, 11.1% of other affective disorders (T. depressive, adaptive, dysthymia) 14% of Personality Disorder, and 17% of others. Compared to the same period of the previous year, the number of admissions decreased by 98 patients (42%), including the severity of the clinic, with 36% of the total admissions being psychotic disorders.
Conclusions: It can be concluded that the number of hospitalizations has decreased due to the patients' fear of being admitted and therefore being subject to infection, and the higher percentage of psychotic and affective pathology because these patients are more serious, making home containment impossible.

Disclosure of Interest: None Declared

EPP0176

Social media influence on Eating Disorders since COVID-19 pandemic: a pilot study

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Introduction: Several studies show a negative impact of mass media contents on adolescents' mental health, especially on perceived body uneasiness. COVID-19 lockdown determined an increased use of social networks (SN). Psychiatrists highlighted an increase in Eating Disorders' (ED) diagnoses.
Objectives: The aim of this study is to assess the pattern of SN use in patients with ED using a self-administered questionnaire.
Methods: 30 patients with clinical diagnosis of ED (Anorexia nervosa, Bulimia nervosa or Binge eating disorder) admitted to the ED unit, underwent clinical assessment, and filed a questionnaire on SN use. The questionnaire assesses time spent on SN, weight-control apps use, exposure to fitness- or food-related contents and to ED-promoting contents, distractibility, weight changes and feeling of body uneasiness.
Results: Mean age was 20.63 (SD 4.71), mean BMI 20.24 (SD 5.27); 93.3% (28) of patients were females. Eating behaviours were divided into restrictive type (66.7%, 20) or binge/bulimic (33.3%, 10). 16.7% (5) of patients reported self-injury behaviours. In 46.7% (14) of cases, the onset of the ED occurred during COVID-19 pandemic; the remaining 53.3% (16) experienced a relapse of a previous ED during this period. 66.7% (20) of subjects reported an increased use of social media and fitness apps. 90% (27) experienced weight changes during the pandemic, with 76.7% (23) seeking nutritional or psychological interventions. 53.3% (16) perceived an increase in body- or food-related contents on their SN feeds, with 50% declaring of knowing the meaning of the terms pro-ana and pro-mia.

Table 1 displays reported answers to the questionnaire. Table 2 shows mean age of patients according to self-injury behaviours and to the onset time of ED.

Table 1.

Questionnaire subscales (n)	Rarely occurred % (n)	Often occurred % (n)
Increase of time spent on SNs (30)	33.3% (10)	66.7% (20)
Distractibility (30)	70% (21)	30% (9)
Self-injury contents (30)	96.7% (1)	3.3% (29)
Body uneasiness (30)	26.7% (8)	73.3% (22)
Pro-ana/pro-mia contents influence (15)	53.3% (8)	46.7% (7)
Body- and food-related contents influence (30)	20% (6)	80% (24)

Table 2.

Eating disorders features (n)	Mean age (SD)	
Self-injury – Yes (5)	18.20 (1.92)	p<0.05
Self-injury – No (25)	21.12 (4.97)	
Onset during Covid-19 pandemic (14)	18.29 (1.82)	p<0.01
Worsening during Covid-19 pandemic (16)	22.69 (5.51)	

Conclusions: ED onset during the COVID-19 pandemic and self-injury behaviours appear as pivotal characteristics of younger patients, displaying a greater severity of the disorder in our clinical experience. With a more consistent number of patients, it would be possible to correlate SN use and body- and food-related contents to the onset and the severity of ED, focusing on pandemic periods.

Disclosure of Interest: None Declared

Depressive Disorders 02

EPP0177

Association between depression and insulintherapy

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Introduction: Insulin is the basic medical therapy to manage type 1 diabetes and is also a cornerstone of treatment of type 2 diabetes as insulinopenia belongs to its natural history. However, insulintherapy is associated with many challenges especially psychological difficulties such as patient's acceptance and compliance, which may lead to metabolic and psychological disorders.
Objectives: The aim of our study was to determine the association between insulintherapy and depression.
Methods: A cross sectional analytic study was conducted from October 2019 to October 2020 among a group of diabetic patients followed in the Endocrinology Department of Taher Sfar University Hospital in Mahdia, Tunisia. "DSM-V diagnosis criteria for

depression screening" and "Hamilton score scale" were used to evaluate the severity of depression.
Results: A total of 260 patients were recruited in our study. The mean age was of 57.36±15.4 years with extremities ranging from 20 to 91 years. The sex ratio M/F was situated at 0.59. The mean diabetes duration was of 10.92 years. The majority of patients had type 2 diabetes (92.3%). The micro vascular long-term complications of diabetes were the most frequent (67.7%): neuropathy (39%), retinopathy (37%) and nephropathy (24%). According to the "DSM-V diagnosis criteria", 15% of the study population suffered from a Major Depressive disorder (MDD). Hamilton score scale showed that thirty-eight patients had severe depression symptoms (14.6%). Insulintherapy was associated with MDD and depression severity (19.1% vs 10.1% ; p=0,041 and 20% vs 8.4% ; $p<10^{-3}$).
Conclusions: Diabetic patients treated with insulin seem to be exposed to severe depressive syndromes. Once insulin initiated, doctors should be careful at the psychological aspects and the burden of this decision and use in consequence appropriate tools to screen depressive symptoms and anxiety. The role of family doctor is crucial providing early psychological support and preventing complications associated with depression especially poor glycemic control.

Disclosure of Interest: None Declared

EPP0178

Intergenerational concordance of brain structure between depressed mothers and their never-depressed daughters

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Introduction: Parents have significant genetic and environmental influences, which are known as intergenerational effects, on the cognition, behavior, and brain of their offspring. These intergenerational effects are observed in patients with mood disorders, with a particularly strong association of depression between mothers and daughters.
Objectives: The main purpose of our study was to investigate female-specific intergenerational transmission patterns in the human brain among patients with depression and their never-depressed offspring.
Methods: We recruited 78 participants from 34 families, which included remitted parents with a history of depression and their never-depressed biological offspring. We used source-based and surface-based morphometry analyses of magnetic resonance imaging data to examine the degree of associations in brain structure between four types of parent-offspring dyads (i.e. mother-daughter, mother-son, father-daughter, and father-son).
Results: Using independent component analysis, we found a significant positive correlation of gray matter structure between exclusively the mother-daughter dyads within brain regions located in the default mode and central executive networks, such as the bilateral anterior cingulate cortex, posterior cingulate cortex, precuneus, middle frontal gyrus, middle temporal gyrus, superior parietal lobule, and left angular gyrus. These similar observations were not identified in other three parent-offspring dyads.
Conclusions: The current study provides biological evidence for greater vulnerability of daughters, but not sons, in developing depression whose mothers have a history of depression. Our findings extend our knowledge on the pathophysiology of major psychiatric conditions that show sex biases and may contribute to the development of novel interventions targeting high-risk individuals.

Disclosure of Interest: None Declared

EPP0179

Major Depressive Disorder in Youth: A Meta-Analysis of Functional Magnetic Resonance Imaging Studies

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Introduction: Major depressive disorder (MDD) is a highly prevalent mental illness that frequently originates in early development and is pervasive during adolescence. Despite its high prevalence and early age of onset, our understanding of the potentially unique neural basis of MDD in this age group is still not well understood, and the existing primary literature on the topic includes many new and divergent results. This limited understanding of MDD in youth presents a critical need to further investigate its neural basis in youth and presents an opportunity to also improve clinical treatments that target its neural abnormalities.
Objectives: The present study aims to advance our understanding of the neural basis of MDD in youth by identifying abnormal functional activation in various brain regions compared with healthy controls.
Methods: We conducted a meta-analysis of functional magnetic resonance imaging (fMRI) studies of MDD by using a well-established method, multilevel kernel density analysis (MKDA) with ensemble thresholding, to quantitatively combine all existing whole-brain fMRI studies of MDD in youth compared with healthy controls. This method involves a voxel-wise, whole-brain approach, that compares neural activation of patients with MDD to age-matched healthy controls across variations of task-based conditions, which we subcategorize into affective processing, executive functioning, positive valence, negative valence, and symptom provocation tasks.
Results: Youth with MDD exhibited statistically significant (p<0.05; FWE-corrected) hyperactivation and hypoactivation in multiple brain regions compared with age-matched healthy controls. These results include significant effects that are stable across