Results: The findings of our study demonstrated that prevalence of depression, anxiety and sleep disorders among Turkish immigrant patients with endocrine diseases is high. The mean scores of depression and anxiety were 31.39 and 32.61 respectively. The most common endocrine diseases were hypertension (51.6 %) and obesity (49.6%). Analysis of our research showed that there was no significant gender differences in the anxiety and depression scores. However, there was a significant relationship between income of participants and prevalence of anxiety, depression ($p<0.05$).
Conclusions: The results of this research suggest that anxiety and depression disorders are highly prevalent among Turkish psychiatric patients with endocrine diseases Using the data of this study, the frequency of endocrine diseases among immigrant psychiatric patients can be analyzed.

Disclosure: No significant relationships.
Keywords: Depression; Turkish immigrants; Endocrine diseases; Anxiety

EPV0615

Do malignant self-regard and depressive personality account for appearance evaluation? Preliminary results

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Introduction: Despite the growing number of studies focusing on the relationship between appearance evaluation and personality dimension, few is known regarding the role of depressive personality and malignant self-regard regarding this topic. Moreover, there is a lack of studies investigating the potential role of both clarity of self-concept and interpersonal exclusion feelings in this relationship.
Objectives: To extend the knowledge regarding the relationships between malignant self-regard, depressive personality and appearance evaluation.
Methods: We administered to a very large sample of adults a battery of self-report questionnaires including the subscale Appearance evaluation of the Multidimensional Body-Self Relations Questionnaire, the Self Concept Clarity Scale, the Malignant self-regard questionnaire, the Depressive Personality Inventory and the Core Exclusion Schema Questionnaire.
Results: We found that depressive personality negatively predicted positive appearance evaluation whereas the inverse pattern of results was obtained in relation to malignant self-regard. Moreover, we found that both poor self-concept clarity and feelings of exclusion mediate the relationship between malignant self-regard and positive appearance evaluation.
Conclusions: Depressive personality and Malignant self-regard appear to be promising construct to investigate in the field of eating disorders.

Disclosure: No significant relationships.
Keywords: depressive personality; appearance evaluation; malignant self-regard

EPV0619

Intranasal Esketamine + CBT: a 6 months follow-up of a resistant depression complicated case

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Introduction: TRD is a highly disabling condition, often responsible for chronic clinical course, high number of relapses and elevated suicide risk. Intranasal esketamine is currently the only available pharmacological therapy specifically indicated for TRD, as add-on therapy to antidepressant treatment with SSRI or SNRI.
Objectives: The purpose of the study was to evaluate the safety and efficacy of intranasal esketamine associated with CBT in a complex clinical case of TRD, over a six-month follow-up.
Methods: A 67-year-old patient with TRD was selected for treatment with intranasal esketamine+CBT as add-on to antidepressant therapy. Before each treatment session the HAM-D rating scale was administered. The patient underwent weekly CBT sessions throughout the 6 months follow-up. The effect on physical well-being and social functioning was evaluated by means of Short-Form-Health-Survey-36.
Results: After the first two administrations of intranasal esketamine the total score on HAM-D decreased by 10 units (from 26 to 16). After 6 weeks of treatment decreased from 26 to 12 with the disappearance of suicidal ideation present at T0. After 6 months the total HAM-D score decreased from 26 to 8. Treatment was well tolerated, with mild adverse effects, confined to the first two hours post-administration. In particular, mild sedation, dizziness, slight transient blood pressure rise were reported, never required medical intervention and resolved spontaneously during the observation period.
Conclusions: Intranasal esketamine add-on therapy + CBT was an effective and safe treatment allowing to achieve and maintain symptomatic remission in a complex case of TRD, improving quality of life, social functioning, and reducing suicidal ideation over a six-month follow-up.

Disclosure: No significant relationships.
Keywords: esketamine; treatment resistant depression; CBT; Quality of Life

EPV0621

Cold water swimming as an add-on treatment for depression. A feasibility study

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Introduction: In Denmark, about 14% of patients with depression develops treatment resistant depression (TRD) in the following year after the first hospital contact. Possible explanations for TRD include lack of adequate clinical effect of pharmacological treatment and reluctance to treatment due to unacceptable side

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effects. Cold water swimming (CWS), also known as winter swimming, describes swimming outdoors - mainly during the winter season in cold to ice-cold water on a regular basis. Many winter swimmers believe that exposure to cold water is beneficial for their health. However, evidence of health effects have been anecdotal or based on results from small sample-size studies. The availably studies report that winter swimming abolishes general tiredness, boosts self-esteem and improves mood and/or general well-being.
Objectives: To test if it is possible for patients with depression to participate in two weekly sessions of CWS and to measure the effects of CWS on general well-being and depression among the participating patients.
Methods: All psychiatric in- and outpatients from the department of psychiatry at Little Belt Hospital, Vejle with a diagnose of depression are eligible for inclusion. CWS-sessions will include a dip in an inlet - and if desired a short swim for a few minutes – depending on individual preferences. The CWS sessions will take place at the local inlet at a recreational area with sauna and changing facilities available.
Results: The study starts in October 2021 and we expect to have results by April 2022.
Conclusions: Conclusion: Awaiting.

Disclosure: No significant relationships.
Keywords: Depression; prevention; cold water swimming

EPV0623

Attitudes towards death in adolescents hospitalized with depressive disorder

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Introduction: The study of attitudes towards death in patients of different nosological groups is an urgent task for modern science. It becomes especially relevant when working with adolescents with severe depressive disorder: for many of them, thoughts about death in various forms become the main reason for contacting specialists and the most subjectively painful symptom.
Objectives: Revealing the characteristics of attitudes towards death in adolescents with severe depressive disorder.
Methods: The study involved 135 adolescents (12-17 years old) with depressive disorder, hospitalized in a psychiatric hospital. Participants completed the following methods: Hamilton Rating Scale for Depression, Columbia Suicide Severity Rating Scale, Death Attitude Profile-Revised, Fear of Personal Death Scale, Death Anxiety Scale.
Results: The severity of depressive symptoms is significantly associated with the "death-as-flight" scale ($r = 0.639$, $p = 0.000$). The values on the "fear of death" scale are positively associated with the indicators on the scales "death anxiety" ($r = 0.432$ $p = 0.025$), "consequences of death for the individual" ($r = 0.658$, $p = 0.000$), "transcendental consequences of death" ($r = 0.711$, $p = 0.000$), "the consequences of my death for loved ones" ($r = 0.496$, $p = 0.008$). Indicators on the "active death search" scale are negatively associated with indicators on the "neutral acceptance of death" scale ($r = -0.503$, $p = 0.007$) and positively with the "fear of oblivion" scale ($r = 0.432$, $p = 0.024$).
Conclusions: The attitude towards death in adolescents with depressive disorder has a pronounced specificity, which can become one of the targets of psychotherapeutic work.

Disclosure: No significant relationships.
Keywords: Adolescents; attitudes towards death; depressive disorder

EPV0624

Atrial fibrillation debut following first electroconvulsive therapy combined with venlafaxine: a case report and a literature review

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Introduction: Cardiovascular events (CVE) are infrequent adverse effects in patients receiving electroconvulsive therapy (ECT). Nonetheless, it constitutes a threat for patient's life and may compromise continuing ECT.
Objectives: To describe a case of acute-onset atrial fibrillation under combined therapy with ECT and venlafaxine.
Methods: We present a 76-year-old man diagnosed of delusional disorder and without any previous CVE, who was hospitalized in our acute psychiatric unit by major depressive episode with psychotic symptoms resistant to pharmacological treatment (valproic-acid 100mg/d, haloperidol 6mg/d, venlafaxine 300mg/d). ECT was initiated presenting atrial fibrillation after first session of ECT, requiring amiodarone and anticoagulant treatment for stabilization. Second session of ECT was delayed for three-weeks, worsening the psychiatric symptoms. Haloperidol was discontinued initiating lurasidone with better cardiovascular profile.
Results: CVE occur in 2% of the patients receiving ECT, being acute arrhythmia the most frequent one. Among them, few cases of atrial fibrillation (AF) under ECT have been reported. It has been hypothesised that initial vagal response followed by catecholamine surge secondary to ECT could facilitate the development of AF. In addition venlafaxine, an antidepressant drug, may also predispose to arrhythmia in high-risk individuals. High doses of venlafaxine (>300mg/d) combined with ECT have been related with an increment of CVE.
Conclusions: Although clinically effective for the treatment of major depression disorder, combined therapy of ECT and