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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