

emphasizes the role of specific cells like neutrophils and monocytes in inflammation and depression. These findings offer valuable insights for improving depression treatment strategies as inflammation state may be relevant for treatment response. We also show the merit of DNA methylation signatures for the profiling of patients' inflammation status, i.e., immunomethylomics.

Disclosure of Interest: None Declared

EPP0381

Personality Traits in Patients with Depression: Association with Symptoms of Depression and Anxiety

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doi: 10.1192/j.eurpsy.2024.543

Introduction: The symptoms of depression and anxiety, which are frequently comorbid, may be significantly impacted by the individual's personality, even considering the complex etiology of depression. Several studies have shown that while certain personality traits may act as protective factors, others may increase vulnerability to depression and anxiety. Understanding these relationships may be important since personality traits have gained attention as potential determinants of symptom severity and treatment outcomes.

Objectives: To identify and evaluate the association of personality traits with symptoms of depression and anxiety in patients with depression.

Methods: The study involved 80 inpatients (≥ 18 years), hospitalized in University psychiatry department with depression diagnosis based on the ICD-10-AM classification. Subjects were asked to fill the Overall Anxiety Severity and Impairment Scale ("OASIS"), the Big Five Personality Dimensions scale and the Patient Health Questionnaire-9 (PHQ-9). Data analysis included descriptive data, Shapiro-Wilk test, Spearman correlation, Kruskal-Wallis test and Chi-Square test, with a significance threshold of $p < 0.05$.

Results: Severe (26.3%) and very severe (41.3%) depressive symptoms were the most prevalent. Extraversion was associated with minimal ($p = 0.002$), conscientiousness with mild ($p < 0.001$), neuroticism with very severe depressive symptoms ($p = 0.003$). The majority of depressed patients had severe (33,75 %) or very severe (32,5 %) anxiety symptoms. Anxiety symptoms were associated with more severe depressive symptoms ($r = 0.704$, $p < 0.001$). The association of conscientiousness and moderate anxiety symptoms was found ($p = 0.004$). In the presence of expressed neuroticism, most of the respondents showed very severe anxiety symptoms, in the absence of neuroticism – moderate anxiety symptoms ($p < 0.001$).

Conclusions: The results showed that personality traits were associated with severity of depression and anxiety symptoms in psychiatry inpatient with depression. Therefore, recognition of predominant personality traits in patients with depression may be helpful in selecting treatment and predicting treatment outcomes.

Disclosure of Interest: None Declared

EPP0382

The impact of ruminative thought style on the maintenance of depressive mood

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doi: 10.1192/j.eurpsy.2024.544

Introduction: Ruminations are a cognitive style of "thought recycling", which involves passively and repeatedly focusing on disorder and distress symptoms, or their causes, without attempting to alleviate them. They are a significant indicator of cognitive vulnerability, predicting the emergence, maintenance, and recurrence of depressive symptoms.

Objectives: To estimate the impact of the ruminative thought style on the maintenance and escalation of depressive mood.

Methods: The research sample consisted of 60 students between the ages of 19 and 30 ($M = 23$), divided into two experimental groups with 30 participants each. The participants took part in a 5-minute experiment that involved recalling an autobiographically sad event, assessing their mood on the Scale for Self-Assessment of Emotions (EAS) before and after the induction, and then splitting into two groups of 30 participants for random ruminating or distraction. The Beck Depression Inventory-II, the Ruminative Response Scale, the Ruminative Thought Style Questionnaire, and the EAS were used as research instruments. The progressive group relaxation approach was used at the end of the experiment with all participants to promote relaxation and lessen the psychophysical tension brought on by the experimental induction (10 minutes total).

Results: The experimental groups did not differ in mood intensity prior to the induction of sadness. Both experimental groups experienced significant impacts on depressed mood following the induction of sadness ($F(1,58) = 92.05$, $p < 0.001$): participants who ruminated demonstrated persistence in their negative mood, whereas participants who engaged in distractions demonstrated a decrease in their negative mood, even below the initial level ($F(2,116) = 12.69$, $p < 0.001$).

Conclusions: This result provides an additional experimental validation of the phenomenon of maintaining a depressive mood through ruminations. An essential psychotherapy goal should be the treatment (metacognitive therapy, rumination-focused CBT, mindfulness, cognitive bias correction, etc.) of such mechanisms, recognized as crucial for the maintenance of depression.

Disclosure of Interest: None Declared

EPP0383

Assessment of various dimensions of impulsivity and their expression in unipolar and bipolar affective disorder

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doi: 10.1192/j.eurpsy.2024.545