

## **P-1445 - IDENTIFYING SUBDEPRESSED STUDENTS NEEDING TREATMENT: STUDY ON THE FRENCH SEYLE DATA**

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In the past years, research has shown that screening patients for depression created a too clear-cut selection leaving a group of patients showing clinical signs of depression without reaching the validated DSM-IV cut off for MDE. These patients are impacted in their quality of life, but aren't generally referred for treatment. Nevertheless, subthreshold depression is a condition of its own that should be cared for.

The SEYLE project has shown that a significant number of adolescents suffer from subthreshold depression (30,4% for the French sample).

Considering this significantly large number of potential patients, all of them can't be referred without blocking up mental health facilities. We have to discriminate which of these students are more likely to be or become at risk.

Among the 30,4% of students of the French sample, 17,52% show suicidal ideas, a strong indication for treatment. Indeed, these students should be referred.

But what about the subthreshold depressive students without suicidal ideas? Should they all be considered at low risk or can we discriminate some more? We can see that, among those students, some of them show a more degraded state of well being than others. A subthreshold patient without suicidal ideas but with a poor well being can be set as a criterion for referral to a mental health facility.

This refined screening could be confirmed by upcoming SEYLE 3 and 12 months data, by analysing the evolution of the quality of life of these subthreshold non-suicidal depressive patients.