intruder test, reflects decreased aggressive motivation. Behavioral changes in recipients were accompanied with cytokines brain changes: decreased IL-1β, IL-2, IL-6, INFγ in the hippocampus; increased IL-4 and decreased INFγ in the hypothalamus; decreased IL-1β in the frontal cortex.
Conclusions: Chlorpromazine - modulated immune cells have a positive aggressive behavior editing effect being involved in the central mechanisms underlying the development of aggressive reactions.

Disclosure: No significant relationships.
Keywords: aggression; immune cells

O0087

SSRIs treatment did not completely restore affective state in patients with the initial clinically confirmed major depressive disorder/generalized anxiety disorder after COVID-19 disease

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Introduction: The major clinical outcomes of COVID-19 in the brain are associated with its deleterious neurological and mental health actions.
Today, there are limited findings concerning the studying of neuropsychiatric action for SARS-Cov-2 in humans after COVID-19 disease.
Objectives: The aim of the present study was to compare the efficacy of SSRIs (escitalopram, sertraline and fluoxetine) for 6 months therapy on the affective profile of man and women with the clinically confirmed Major Depressive Disorder (MDD) or Generalized Anxiety Disorder (GAD) cases following COVID-19 disease.
Methods: . For the assessment of affective profile in man and women (30-55 years) with the initial clinically confirmed MDD or GAD cases after COVID-19 disease, we used the different tests: Montgomery-Asberg Depression Rating Scale (MADRS) and anxiety scale (ShARS Scale). The hormonal and monoamines levels in the serum blood were measured by ELISA tests before and after SSRIs therapy.
Results: After 6 months of SSRIs therapy, MADRS Scale showed a incomplete disappearance of the depressive/anxiety manifestations in both men and women with the initial clinically confirmed MDD case after COVID-19 ($p<0,05$). We found that SSRIs were able to reduce depression/anxiety levels only on 20% in man or on 30% in women with the initial MDD case after COVID-19 before treatment.
Conclusions: SSRIs treatmet alone failed to produce the decrease of depression/anxiety in the patients of both gender with the initial MDD or GAD diagnosis after COVID-19. The further randomized clinical trials involving new pharmacological therapies for psychiatric pations after COVID-19 disease are needed.

Disclosure: No significant relationships.
Keywords: Covid-19; depression; anxiety; SSRIs; pharmacotherapy

O0089

Clinical, genetic and environmental influences on weight gain and metabolic disorders induced by psychotropic drugs

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Introduction: Weight gain and obesity are important health problems associated with psychiatric disorders and/or with psychotropic drug treatments. There is a high inter-individual variability in the susceptibility to drug induced weight gain and/or other cardiometabolic disorders.
Objectives: To study the genetic and environmental risk factors for weight gain and onset of metabolic syndrome during psychotropic treatment
Methods: Analysis in PsyMetab, a large (n>3000) ongoing longitudinal prospective cohort study investigating cardiometabolic disorders in psychiatric patients.
Results: Aside from well-known clinical risk factors for metabolic worsening (e.g. young age, first episode status, rapid weight gain during the first month of treatment and/or low initial BMI), additional risk factors have been recently identified. We showed an inverse association between socio-economic status (SES) and worsening of cardiometabolic parameters, adult patients with a low SES having a three-fold higher risk of developing metabolic syndrome over one year versus patients with a high SES (n=366). In addition, a causal inverse effect of educational attainment on BMI was revealed using Mendelian randomization in the UKBiobank (n=30'069). Results from an epigenome-wide association study (EWAS) performed in 78 patients before and after one month of treatment and from a genome-wide association study (GWAS) in 1924 patients will also be presented.
Conclusions: Differences in clinical, genetic and environmental factors contribute to the differences in weight gain and metabolic disorders induced by psychotropic drugs. When starting a psychotropic drug at risk, a prospective monitoring of clinical (e.g. weight and blood pressure) and biochemical (fasting glucose, lipid levels) parameters is essential.

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Keywords: Genetics; metabolic syndrome; psychotropic drugs; epigenetics

O0090

Comparative efficacy and safety of escitalopram, desvenlafaxine, and vortioxetine in the acute treatment of anxious depression: A randomized rater-blinded, 6-week clinical trial

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