

Conclusions: Major depressive disorder was associated with vitamin D deficiency but no statistical significant correlation could be established neither between levels of vitamin D and severity of depression nor between levels of vitamin D and cognitive dysfunction. Vitamin D level was statistically correlated with decreased concentration, decreased libido and menstrual disturbances.

Disclosure: No significant relationships.

EPV0601

Probiotics as a therapeutic strategy in Major Depressive Disorder

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Introduction: Major depressive disorder is a prevalent disease, in which one third of sufferers do not respond to antidepressants. Disturbance in the equilibrium of the gut microbiota has been involved in the pathophysiology of depression. Probiotics have the potential to be well-tolerated and cost-efficient treatment options. However, there is not enough evidence of the impact of probiotics in patients suffering MDD.

Objectives: The main aim of this revision is to assess those clinical trials that evaluate the effects of probiotic treatment in patients with MDD.

Methods: A research on the database PubMed has been done with the terms “probiotics” AND “MDD” and then a systematic review has been performed between those articles meeting the inclusion criteria.

Results: Most of the articles show an improvement of the depressive symptoms in outpatients with mild to moderate TDM after 8 week treatment with probiotics added to the treatment as usual. Those articles assessing inpatients with severe MDD after four weeks of treatment with probiotics added to their usual treatment didn't find statistical differences between treatment with probiotics from placebo.

Conclusions: Probiotics may be useful in mild to moderate symptoms of MDD after 8 weeks treatment added to usual treatment. Nevertheless, further investigation in larger samples during more time. Moreover, a new awareness is raised about gut- brain axis pathophysiology, that would lead the path to new investigations about this relation so as the difference in depressed patients microbiome, tryptophan metabolism and the pro- inflammatory compounds that reach the blood-brain barrier because of the “leaky-gut”.

Disclosure: No significant relationships.

Keywords: major depressive disorder; probiotics; Treatment; gut microbioma

EPV0602

The characteristics of bipolar dipression

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Introduction: The National Institute of Mental Health describe the main symptoms of bipolar disorder as alternating episodes of high and low mood. Changes in energy levels, sleep patterns, ability to focus, and other features can dramatically impact a person's behavior, work, relationships, and other aspects of life. Most people experience mood changes at some time, but those related to bipolar disorder are more intense than regular mood changes, and other symptoms can occur. Some people experience psychosis, which can include delusions, hallucinations, and paranoia.

Objectives: Through this research we aimed to identify all the special features of bipolar depression which will help the clinical psychiatrists in easier diagnosis and management of the disorder.

Methods: Literature review (PubMed)

Results: Clinical Characteristics in Favour of Bipolarity in Depression: psychomotor retardation, history of psychotic depression, history of psychotic depression shortly after giving childbirth, frequent catatonic symptoms, atypical depressive features, severe impairment in interpersonal relationships, inconsistency in business life, history of hypomania, mania or mixed episode, common feeling of numbness and anhedonia; less common sadness and feelings of guilt, mood instability, volatility in temperament, frequent change in affect, daydreaming during the episode and daily life, short duration of depression <3 months, poor cognitive functions during depressive episode, generally similar symptom severity during the day and night etc.

Conclusions: This leads to misdiagnosis of bipolar depression as unipolar depression, which in turn leads to delayed correct diagnosis and treatment and may severely affect the patient's entire life.

Disclosure: No significant relationships.

Keywords: characteristics; bipolar dipression

EPV0605

Treatment-Resistant Depression – What is the Effective Maintenance Treatment

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Introduction: Treatment-resistant depression (TRD) presents a significant challenge in clinical practice. Besides antidepressant medications, neurostimulation methods (ECT, rTMS) and ketamine are viable treatment options.

Objectives: To objectively evaluate the real effectiveness of treatments within interventional psychiatry in the maintenance treatment.

Methods: The extensive literature review of the efficacy of ECT, rTMS, and ketamine treatment in the maintenance treatment of TRD and the author's clinical and research experience will be included in this presentation.

Results: Neurostimulation, particularly ECT and ketamine treatment are usually effective treatments for patients with TRD. However, both of these treatment modalities do not have sustained benefits and after discontinuing treatment the majority of patients relapse. Ketamine has rapid therapeutic effects in depression, but these effects are short-lived. Continuation treatment with ketamine