somatic symptoms. Larger prospective studies are required to define whether alexithymia is a stable personality trait or a state-dependent phenomenon in patients suffering from winter SAD.

P031

Antidepressant treatment during pregnancy: Pros and cons

L. Garcia-Esteve [1], F. Botet [2], J. Pérez [2], C. Soler [2], J. Figueras [2], P. Navarro [1], R. Martín-Santos [3], E. Gelabert [1,3], M.L. Imaz [1,3]. [1] *Programme of Perinatal Psychiatry, Hospital CLINIC Universitari, Barcelona, Spain* [2] *Unit of Neonatology, Hospital CLINIC Universitari de Barcelona, Barcelona, Spain* [3] *Pharmacology Research Unit, Institut Municipal Investigació Municipal (IMIM), Barcelona, Spain*

Background: The prevalence of mood disorders (anxiety and depression) during pregnancy seems to be similar to the women of the same group without pregnancy. Women with recurrent depression and euthimic women who discontinued antidepressants medication during pregnancy are particularly at high risk for depressive illness. Data about perinatal effects of SSRI antidepressants are gradually accumulating and are controversial. Two meta-analyses and some controlled studies don't find increased risk for major malformations in SSRI-exposed newborn. However, other studies find an increased risk of congenital malformations, poor birth outcomes and neonatal complications.

Neonatal morbidity in infant newborn of women treated with antidepressant drugs. We examine the relation between the pharmacological treatment of the maternal anxiety/depression during the pregnancy and acute morbidity in infant newborns.

Material and Methods: Study group of 66 infant newborn of pregnant women with a diagnoses of major depressive episode or defined anxiety disorders according to DSM-IV, who were in treatment with antidepressant drugs during pregnancy. Control group: 120 newborn of healthy pregnant women, who did not receive any treatment, and were contemporary of the same gestational age and sex. Criteria of exclusion: demonstrated toxic consumption (alcohol, cocaine, cannabis, opiates, drug of synthesis). Studied variables: Type of childbirth and analgesia; Weight and age of gestation; pH of umbilical artery and Apgar test; Presence of malformations; Morbidity; Feeding; Withdrawal syndrome.

Results: Infant newborn of mothers exposed to the antidepressant treatment suffered from more pathology than those of the control group (16/66 vs. 14/114; 24.2% vs.12.3%; p=0.038). Two smaller malformations in the study group were observed, a preauricular appendix (group A) and one moderate pielocilicilar ectasy (group C), both in mothers who received paroxetine (2/60; 3.3% vs. 0/114; 0%, p=0.05, Fisher p=0.118, NS). Only one infant newborn displayed compatible clinical signs with moderate withdrawal syndrome (irritability, vomits) from a mother treated with venlafaxine. No case of convulsions was observed. Breast feeding was less frequent in the group of antidepressant treated mothers (38/66, 57.6% vs. 86/116, 74,1%, p=0.032).

Conclusions: The treatment with antidepressant drugs during pregnancy is necessary for some women. The clinician must weigh the relative risks of various treatment options and take into account individual patient wishes. Although the antidepressant drugs suppose an increased risk for the newborn, it could be assumable for the benefit that represents maintain the mother in an euthimic situation. We propose to discuss the clinical management, as well as, the accuracy of the psychiatric and obstetric controls to minimize the neonatal complications.

P032

Escitalopram in clinical practice: The Greek experience- efficacy and tolerability

A. Liakouras [1], T. Hamogeorgakis [2], A. Zouganelli [3], D. Giailoglou [4], I.A. Parashos [4]. [1] *General Hospital of Korinthos, Korinthos, Greece* [2] *Dromokaiteion Hospital, Athens, Greece* [3] *Agia Barbara' Hospital, Athens, Greece* [4] *Lundbeck Hellas SA, Athens, Greece*

Objective: To evaluate the efficacy and tolerability of escitalopram in adult outpatients suffering from major depressive disorder, with or without comorbid anxiety in naturalistic settings.

Introduction: Escitalopram has shown significant antidepressant and anxiolytic effects in placebo-controlled clinical trials of major depressive disorder and anxiety disorders.

Method: A large, observational study was conducted in 106 investigative sites in Greece, including outpatient clinics of psychiatric hospitals participated in this 3-month, open-label, surveillance study. Efficacy assessments included the Clinical Global Impressions - Improvement scale (CGI-I) and - Severity of Illness scale (CGI-S). Tolerability assessment was based on spontaneous reported adverse events and treatment discontinuation rates.

Results: 5153 patients were enrolled (66% women) with a mean age of 46.6±11.6 years. At baseline, the mean score on the CGI-S scale was 4.4±0.9. At the end of treatment, the mean CGI-S score was 2.3±1.1 (LOCF), with 61% of patients rated as 'normal' (CGI-S=1) or 'borderline ill' (CGI-S=2). 5.1% of patients discontinued due to adverse events. The most common adverse events were gastrointestinal symptoms (5.6% of patients), anxiety (2.3%), sleep disturbance (2%), and dizziness (2%).

Conclusions: Escitalopram was effective for the treatment of major depressive disorder in real life clinical practice with a good tolerability profile.

P033

The spinal cord injuries and depression symptoms relation

V. Grigaliuniene, A. Stolygaite, B. Burba, O. Jankuviene. *Department of Psychiatry, Kaunas University of Medicine, Kaunas, Lithuania*

Goal: The goal of this work is to research the relation between the spinal cord injuries and depression symptoms.

Methods: The researched group is made up of 26 patients in early period of trauma treated in KMU Neurorehabilitation department. They were recovering after different level spinal cord injuries. There were 10 women and 16 men, 25-40 years old. All researched patient were given the HAD questionnaire that helped to observe the symptoms of depression.

Results: Research results shows that more than a half of patients (56.25 percent) suffer of depression in early period after trauma. The difference in gender groups is very small: 60 percent of women and 56.25 percent of men after the results of research had depression.

Conclusion: The spinal cord injury makes an influence on patient's emotional state and very often may cause the depression symptoms.

P034

Escitalopram in patients with recurrent unipolar major depression: 6-month clinical follow-up

M. Grigoroiu-Serbanescu, R. Mihailescu, M. Gherlghel. *Alexandru Obregia Psychiatric Hospital, Bucharest, Romania*

https://doi.org/10.1016/j.eurpsy.2007.01.769 Published online by Cambridge University Press