

antidepressant treatment, several studies of antidepressants, including SRIs, have found that rating scale scores of suicidal ideation decreased along with other depressive symptoms.

An hypothesis has been reported that the brain-derived neurotrophic factor (BDNF) may be related to both suicidality and poor clinical response to antidepressants.

The authors presents a broad overview on the topic based on unpublished and published meta-analyses as well as new data regarding response to antidepressant by suicidal patients that appear to be innovative in the interantional literature.

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Depression in hemodialysis patients: association with inflammatory and nutritional markers

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Depression, malnutrition and inflammation are highly prevalent in hemodialysis (HD) patients, representing important predictors of morbidity and mortality.

The aim of the study was to screen for depression in HD patients and analyze, among other factors, its association with inflammatory and nutritional indices. C-reactive protein, Body Mass Index, albumin, cholesterol, phosphate and hemoglobin levels, dialysis adequacy, the presence of co-morbidities, stages of rehabilitation, education level and marital status were observed.

Thirty five patients (19F,16M) aged 53.1±9.4 years, on thrice-weekly HD for 77.7±57.1 months were studied. Depression was assessed via Beck Depression Inventory (BDI). The scores on the BDI ranged from 0 to 45 (16.9±11.1). 31.4% and 28.6% prevalences of inflammation and malnutrition were observed.

Patients were divided into two groups according to score obtained: 9 not depressed (NonD) subjects (2F, 7M, BDI 0-9) and 26 patients (17F, 9M) with depressive symptoms (D group, score of 10+). Depression was significantly more frequent in females (p=0.05). None of the patients working full or part time had depressive symptoms, as opposed to 3 without job and 13 who were retired (p=0.02). Insignificant difference in prevalence of inflammation, malnutrition and other analyzed parameters was found. Subdivision of D group revealed mild depressive patients (10-15) to be significantly younger than both nonD patients and subjects with moderate or severe depression (16+); p= 0.02.

Depression, inflammation and malnutrition are common in HD patients. It is of great importance for long-term outcome of this population to identify them early and initiate treatment.

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Affective temperament-types and suicidal behaviour

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Background: As the different affective temperament-types (depressive, hyperthymic, cyclothymic, irritable and anxious) play a significant role in the development and symptom-formation of bipolar and unipolar major mood episodes, the aim of this study was to examine these affective temperaments in persons making suicide attempts.

Method: Using the Hungarian version of the full-scale 110-item version of the TEMPS-A questionnaire. we compared the affective temperament profiles of 150 nonviolent (106 female and 44 male) suicide attempters (121 of them have had current major depressive episode) and 717 normal controls (438 females and 279 males).

Results: Compared to controls, both female and male suicide attempters scored significantly higher in four of the five temperaments, containing mWre or less depressive component (depressive, cyclothymic, irritable and anxious). On the other hand, however, no significant difference between suicide attempters and controls was found for the hyperthymic temperament scores. Significantly higher rate of suicide attempters (135/150=90.0%) than controls (138/717=19.2%) have had some kind of dominant (mean score + 2 SD or above) affective temperament (p=0.0001).

Conclusion: The findings support the strong relationship between depression and suicidal behaviour even on temperamental level, suggesting that hyperthymic temperament has no predisposing role for suicidal behaviour at least in case of nonviolent attempters. As current depression and dysregulated central serotonergic function are well-known suicide risk factors, these findings are also in good agreement with recent results on the significant relationship between the s allele of the serotonin transporter gene and depressive, cyclothymic, irritable and anxious temperaments, but not with hyperthymic temperament.

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The relationships between the severity of depression and behavioral attitudes

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The tasks of the investigation were to estimate behavioral attitudes in major depression and to check whether they are determined by the level of depression.

Subjects: 44 patients with major depression.

Methods: 21-item Hamilton Rating Scale for depression; Test BASE (projective questionnaire) for the estimation of: search activity (SA), stereotyped activity (St), chaotic behavior (Ch), passive behavior (Pa). As a normal configuration of BASE we have estimated BASE with positive values (>0) of Sa and St and negative values (<0) of Ch and Pa (without taking into consideration the absolute values).

Results: 1. SA is decreased and Pa is increased in patients. Patients with the Hamilton scale <22.7 and > 31.1 do not display significant differences in BASE scales. Both groups displayed abnormal configuration of BASE. Correlations between behavioral attitudes and Hamilton scale are absent. 2. In patients with the abnormal configuration of BASE Hamilton scale was significantly higher (27.7) than in patients with normal configuration (24.6).