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Depression and its correlation with the risk of cardiovascular mortality in primary care population in Latvia

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Introduction Depression is one of several preventable causes of disability worldwide, with coronary heart disease (CHD) being the largest cause of disability. Depression has been confirmed as a risk factor for CHD.

Objectives Few studies tried to find an interrelation between depression and a risk of cardiovascular mortality according to systematic coronary risk evaluation (SCORE) chart.

Aims The aim of study was to examine the correlation of depression with the risk of cardiovascular mortality (SCORE).

Methods Study was conducted in 2015 within the framework of National Research Programme BIOMEDICINE. All patients aged 18 and older at 24 primary care facilities were interviewed with a sociodemographic questionnaire supplemented by measurements of blood pressure and total cholesterol. Within 2 weeks after the visit psychiatrist administered the Mini International Neuropsychiatric Interview (MINI) by telephone. SCORE was assessed using high risk chart.

Results Totally 920 patients age 40–69 were included in the data analysis. According to the MINI 9.3%(95%CI 7.5–11.5%) of 40–69 years old patients had current depression. Current depression was more common among women than men, 10.4% and 6.8%, respectively. The prevalence of current depression was highest among patients with SCORE 3–4%. Multivariate logistic regression did not suggest statistically significant odds ratio for having depression based on SCORE.

Conclusions Only one of the measurements used for SCORE (smoking status) was significant predictor for having current depression, while systolic blood pressure and total cholesterol were not significant predictors for depression. As pharmacotherapies for reducing blood pressure and cholesterol are widely used by patients further research should include use of these medicines as potential mediators.

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Dermatological manifestations in pregnancy with primary psychiatric findings

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Introduction Even though the association between dermatological conditions in pregnancy with psychiatric findings is vital for patient management, studies on these issues are limited.

Objective To determine the frequency and nature of dermatological problems in pregnant women having primary psychiatric illness.

Aim To establish an association between cutaneous manifestations in pregnancy with the hypothesis that psychiatric illness also has a role in pregnancy.

Methods This was a case control study and non probability convenient sampling was used on 50 pregnant patients with cutaneous manifestations along with psychiatric illness and 50 age matched non pregnant patients free from dermatological conditions and psychiatric illness. The Diagnostic and Statistical Manual of Mental Disorders (DSM IV) Criteria was used to diagnose psychiatric illness and for skin manifestations patients underwent a physical examination of skin.

Results Pregnant patients with depressive disorders were associated with atopic eruption of pregnancy [odds ratio (OR) 1.19; 95% (CI): 1.13–1.49], pruritic urticarial papules [(OR) 2.89; 95% (CI): 2.55–2.97], plaques of pregnancy [(OR) 2.14; 95% (CI): 2.01–2.39], prurigo of pregnancy [(OR) 1.33; 95% (CI): 1.17–1.45], intrahepatic cholestasis of pregnancy [(OR) 2.45; 95% (CI): 2.29–2.67], pemphigoid gestationis [(OR) 1.57; 95% (CI): 1.50–1.68], impetigo herpeticiformis [(OR) 1.83; 95% (CI): 1.65–2.24], and pruritic folliculitis of pregnancy [(OR) 2.34; 95% (CI): 2.20–3.62], psoriasis [(OR) 1.75; 95% (CI): 1.64–2.37], melasma [(OR) 1.88; 95% (CI): 1.63–2.49], intrahepatic cholestasis [(OR) 2.77; 95% (CI): 2.14–3.48].

Conclusion The results of the study support the hypothesis, that there is an association between psychiatric and skin diseases in pregnancy.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV510

Group interpersonal psychotherapy for maternal depression an exploratory randomized control trial

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Introduction The global burden of depression is high for women in both high income and low-and-middle income countries WHO. Depression is particularly common during pregnancy and in the postnatal period and phenomenology said to be the same as in

non-child bearing age. Despite high prevalence of prenatal and postnatal depression in Pakistan, research on the effectiveness of psychological interventions is limited.

Aims This study aimed to assess the feasibility of group interpersonal psychotherapy (IPT) intervention for maternal depression in Karachi, Pakistan.

Methods A total of 50 mothers aged 18 years and above with children below 3 years of age, and experiencing mild to moderate depression were recruited. Assessments were done using Edinburgh Postnatal Depression Scale (EPDS) Rosenberg's Self-Esteem Scale and EuroQol-5D at baseline, 3 months, and 6 months. Rosenberg's Self-Esteem Scale and EQ-5D were also used to measure self-esteem and health related quality of life. Participants were randomly assigned into IPT plus treatment as usual (TAU) and TAU groups. Ten sessions of group IPT were delivered to intervention group.

Results Results indicated significant difference between intervention and control group on EPDS. The mean score at baseline for the IPT group (mean = 14.76) reduced to (mean = 6.40) ($P < 0.000$) at 3-month and to (mean = 6.64) ($P < 0.001$) at 6-month intervals as compared to TAU (mean = 11.44) ($P < 0.000$) at 3-month and to (mean = 11.08) at 6-month ($P < 0.001$) after randomisation.

Conclusion IPT is a successful fit for women with maternal depression in low-income areas and IPT can be the appropriate treatment option as it is time limited, specific, and evidence based.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV511

Change your life with seven sheets of paper: A pilot randomized controlled trial for postnatal depression (CREATOR)

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Introduction Prevalence of Common Mental Disorders (CMD) is high in low and middle-income countries. The prevalence rate of postnatal depression in Pakistani women and its effect on the growth and development of young children and child mortality is very high. Despite availability of interventions to improve maternal health, the major issue in implementation of those interventions is because of limited availability of trained health professionals.

Aims The aim of this study is to deliver CBT based intervention called "change your life with 7 sheets of paper" to women with mild to moderate PND through trained Traditional Birth Attendants (TBAs).

Methods During first stage of this rather blind feasibility randomized control trial 5 TBAs were trained to deliver CBT. Total 36 participants with PND having child between the ages 0–12 months will be recruited from community. Participants will be assessed using Edinburgh Postnatal Depression Scale, Patient Health Questionnaire (PHQ-9) and World Health Organization Quality of Life scale at baseline and then at 3 months. Eight group sessions of CBT will be delivered by trained TBAs.

Results Outcome assessments will be done after completion of intervention of intervention i.e., 3 months after baseline. Preliminary findings will be presented in the conference.

Conclusion Findings from this trial will help us to understand how the involvement of TBAs can help in overcoming the challenge of non-availability of trained health professionals and in attain-

ment of millennium development goals of reducing mother and child mortality.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV513

Does the supplementation of vitamin D affect depressive symptoms?

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Introduction Depression has been linked to decreased levels of vitamin D in adults and the altered dietary intake of calcium and vitamin D has been reported to have implications for the development of depressive symptoms. Although, the relation between vitamin D and depression has been established, it is not yet clear whether the supplementation of vitamin D could affect the clinical manifestation of depression. Therefore, the aim of this study was to determine whether the supplementation of vitamin D could affect the development/course of depression.

Material and methods A systematic literature search was performed for randomized control trials (RCTs) in which vitamin D was supplemented and depression was measured.

Results and discussion Six studies were identified as being eligible to be included in this review. The results regarding the supplementation of vitamin D and its effect on the course and manifestation of depression were conflicting. One study concluded that the supplementation of vitamin D3 had beneficial effect in depression and another study reported no improvement in the indices of mental well-being in the vitamin D supplemented group and rejected the hypothesis that an annual high dose of vitamin D3 could prevent depressive symptoms. The remainder four studies reported inconclusive results regarding vitamin D supplementation and the course of depression.

Conclusion As current literature displayed contradictory results and no sound conclusion could be drawn regarding the supplementation of vitamin D and its effect on depression, there is a need of RCTs to determine whether the supplementation of vitamin D levels could affect depression.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV514

The meaning of loss in the context of elderly homes

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Introduction Family plays a pivotal function in life of all human being and their significance even increases with the age. However, living in an elderly home may result in a multitude of losses which must be addressed by individual through the process of grief.

Aim The purpose of this study was to explore situations of loss and grief among institutionalized elders.

Methods It is a qualitative, descriptive and exploratory research. Data was collected from two Portuguese elderly homes in the municipality of Viseu, Portugal. A purposeful sample of 7 elders was recruited, and audiotaped face-to-face semi-structured interviews were conducted.

Results Three dimensions of emotional loss were created: loss by death, loss by separation and other losses. Loss by separation was further divided into three subcategories: marriage separation, family separation and separation of peers living in the elderly home.