

existing models noted: a shift of attention to a specialist, but not to a client; borrowing static and absolutistic ideas about cultures, without consideration of cultures development and interaction.

Conclusions: There is a trend in contemporary global world for broad research and development of cultural competence that improve professional qualities of healthcare professionals and provide psychological assistance to representatives of different ethnic and culture groups, confessions and minorities. The reported study was funded by the Russian Foundation for Basic Research, project number 17-29-02506.

Disclosure: No significant relationships.

Keywords: mental health; cultural competence; global world

Depressive disorders

O098

Adolescent oral contraceptive use and future major depressive disorder

A. De Wit^{1*}, C. Anderl², E. Giltay³, T. Oldehinkel¹ and F. Chen²

¹Psychiatry, University Medical Center Groningen/University of Groningen, Groningen, Netherlands; ²Department Of Psychology, University of British Columbia, Vancouver, Canada and ³Department Of Psychiatry, Leiden University Medical Center, Leiden, Netherlands

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.306

Introduction: Previously reported associations between oral contraceptives (OCs) use and depression have been conflicting. Insight into the impact of analytical choices on the association may help to reconcile previous heterogeneous findings.

Objectives: We aimed to examine the association between adolescent OC use and subsequent depression risk in early adulthood analyzing all theoretically justifiable models.

Methods: Women from the prospective cohort study Tracking Adolescents' Individual Lives Survey (TRAILS) were included in this study. All justifiable associations between adolescent OC use (ages 16-19 years) and major depressive disorder (MDD) in early adulthood (ages 20-25 years) as assessed by the Diagnostic and Statistical Manual of Mental Disorders-IV oriented Lifetime Depression Assessment Self-Report and the Composite International Diagnostic Interview were tested.

Results: A total of 818 analytical models were analyzed in 534 adolescent OC users and 191 nonusers. Overall, there was a tentative association of adolescent OC use and an episode of MDD in early adulthood (median odds ratio [OR]_{median}=1.41; OR_{min}=1.08; OR_{max}=2.18, permutation testing p-value 1 = .052, and p-value 2 = .046), which was primarily driven by the group of young women with no history of MDD (OR_{median}=1.72; OR_{min}=1.21; OR_{max}=2.18, both permutation testing p-values = .02).

Conclusions: Adolescent OC use was associated with an increased risk for experiencing an episode of MDD, but only among women with no history of MDD in adolescence. Understanding the potential side effects of OCs will help women and their doctors make informed choices when deciding among possible methods of birth control.

Disclosure: No significant relationships.

Keywords: Oral contraceptives; adolescence; Depression

O099

Exploring predictors of depressive symptoms in patients with multiple sclerosis: The effect of neuropathic pain, shame, and mindfulness

T. Carvalho^{1,2}, L. Benedito¹ and C. Gomes^{3*}

¹Psychology, Instituto Superior Miguel Torga, Coimbra, Portugal;

²Faculty Of Psychology And Educational Sciences, University Of Coimbra, Center for Research in Neuropsychology and Cognitive-Behavioral Intervention (CINEICC), Coimbra, Portugal and ³Clínica de Saúde Psiquiátrica de Coimbra – Casa da Oliveira, Coimbra, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.307

Introduction: Multiple Sclerosis (MS) is a chronic inflammatory, immune-mediated, demyelinating disease of the central nervous system, with a progressive course. It is potentially disabling and affects mainly young adults. Depression is the mental disorder with the greatest comorbidity with MS and tends to worsen its symptomatology and course. However, knowledge about the predictors of depression in patients with MS is scarce.

Objectives: This preliminary study aimed to verify whether neuropathic pain (NP), internal (IS) and external (ES) shame and mindfulness predict depressive symptoms in patients with MS.

Methods: This cross-sectional study included a convenience sample of 95 patients diagnosed with MS and without other identified neurological diseases. Participants completed the Depression Subscale of the Depression, Anxiety and Stress Scales-21, the Analogue Pain Scale of the Pain Detect Questionnaire, the External and Internal Shame Scale, and the Mindfulness Subscale of the Self-Compassion Scale.

Results: All potential predictors exhibited significant correlations with depressive symptoms and significantly predicted this symptomatology in simple linear regression models. Thus, they were included as covariates in the multiple linear regression model. This model explained a high percentage of the variance of depressive symptoms (40.5%) and identified NP, IS and mindfulness as significant predictors.

Conclusions: Interventions aimed at preventing/reducing depression in patients with MS should minimize IS and develop mindfulness and NP coping skills, in order to promote mental health in this target population and possibly prevent the exacerbation and progression of MS symptomatology.

Disclosure: No significant relationships.

Keywords: Multiple sclerosis; depressive symptoms; predictive model

O101

Baseline EEG-correlates of responders/non-responders to combined antidepressive treatment including transcranial magnetic stimulation

E. Iznak^{1*}, A. Iznak¹ and I. Oleichik²

¹Laboratory Of Neurophysiology, Mental Health Research Centre, Moscow, Russian Federation and ²Clinical Department Of Endogenous Mental Disorders And Affective States, Mental Health Research Centre, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.308