

Introduction: Isolation, life changes and increased stress lead to widespread concerns about the effects of the Covid-19 pandemic on psychiatric patients. The rise in depressive disorders is one of the negative effects associated directly and indirectly to the pandemic.

Objectives: The purpose of this study was to investigate the impact of the COVID-19 pandemic on the prevalence of depressive disorders among the patients admitted to our hospital. The state of pandemia was declared on the 11th of March but it had already become a main stream media subject in our country at the beginning of the month with real life changes for our citizens.

Methods: A retrospective study was performed at the Psychiatric Hospital 'Elisabeta Doamna' Galati, using the exact same period, between 01.03 and 30.09, in 2019 and 2020. ICD-10 criteria were used and patients with either F32.x, F33.x or F38.x as discharge diagnosis were included.

Results: In total, 7638 cases were admitted during the period in 2019, of which 751 (9,83%) had depressive disorders. In comparison with 2020 where out of 4050 admitted patients, the number had risen to 1034 (25,53%) a net increase in total number of cases by 37.6%.

Conclusions: Analysis of the data shows a 2.5 times increase in the percentage of depressive disorders among our patients. Even taking in account the lower admission rates, we have seen a clear shift in the psychiatric profile of the average patient and this has to be taken into consideration in the long and short term treatment of any psychiatric patient.

Keywords: Covid-19; Depressive disorders; Pandemic

EPP0566

The role of zinc, albumin, c reactive protein, and interleukin-6 in differentiation of unipolar depression and depression in bipolar disorder

T. Bagaric^{1*}, M. Zivkovic¹, P. Marinovic¹, A. Kozmar², N. Jaksic¹, M. Sagud^{1,3} and A. Mihaljevic-Peles^{1,3}

¹Department Of Psychiatry, University Hospital Center Zagreb, Zagreb, Croatia; ²Department Of Laboratory Diagnostics, University Hospital Center Zagreb, Zagreb, Croatia and ³School Of Medicine, University of Zagreb, Zagreb, Croatia

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.917

Introduction: There is no clinical difference between depressive episodes in bipolar disorder compared to major depressive disorder, which is why bipolar disorder remains unrecognized. Correctly distinguishing these disorders is of great importance because the therapeutic approach differs significantly. According to previous research, zinc, albumin, C reactive protein (CRP), and interleukin-6 (IL-6) seem to play a role in differentiating these two types of depressive episodes.

Objectives: To determine zinc, albumin, CRP and IL-6 serum concentrations in patients with major depressive disorder and depressive episode of bipolar disorder.

Methods: Research involved 60 participants. Participants signed informed consent prior to inclusion in the study. Sociodemographic data have been collected using a previously structured questionnaire. The severity of depressive symptoms has been measured by the Montgomery Asberg Depression Rating Scale (MADRS) and the Hamilton Depression Scale (HAM-D-17). Blood samples were obtained from each study participant's brachial vein, to determine zinc, albumin, C reactive protein and interleukin-6 serum concentrations.

Results: Statistically significant difference was found in zinc serum levels between the two analysed groups. In the overall sample, there is a significant positive correlation between the results on the rating scales and the serum level of CRP.

Conclusions: We confirmed an association between serum levels of CRP and the severity of the illness. Regardless, these are preliminary results of the research. Sufficient final conclusion cannot yet be drawn because it is being limited by the sample size and further investigation is needed.

Keywords: depression; bipolar disorder; C-reactive protein

EPP0567

The magnitude of depression in heart failure patients and its association with NYHA class

J. Botto^{1*}, S. Martins², E. Moreira³, J. Silva Cardoso^{3,4,5} and L. Fernandes^{2,6}

¹Fmup, Faculty of Medicine - University Porto, Porto, Portugal; ²Department Of Clinical Neuroscience And Mental Health And Center for health technology and services research (cintesis), Faculty of Medicine - University Porto, Porto, Portugal; ³Center For Health Technology And Services Research (cintesis), Faculty of Medicine - University Porto, Porto, Portugal; ⁴Department Of Medicine, Faculty of Medicine - University Porto, Porto, Portugal; ⁵Department Of Cardiology, Centro Hospitalar Universitário S. João (CHUSJ), Porto, Portugal and ⁶Psychiatry Service, Centro Hospitalar Universitário de São João, Porto, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.918

Introduction: Depression is commonly present among HF patients and is associated with adverse clinical outcomes. However, research regarding its association with New York Heart Association (NYHA) class is still scarce.

Objectives: To evaluate the presence of depression symptoms in HF outpatients and analyze its association with NYHA class.

Methods: This study is part of a larger research project (Deus Ex-Machina/NORTE-01-0145-FEDER-00026). HF patients were recruited from an outpatient clinic at a University Hospital. Exclusion criteria were: unable to communicate, severe visual acuity deficit or NYHA class IV. Sociodemographic data and NYHA class were registered. The Patient Health Questionnaire-9 (PHQ-9) was used to assess depression, with a score ≥ 10 indicating clinically relevant depression.

Results: A sample of 136 HF patients was included, with a median age of 59 (range: 24-81) years old, where 66% were men. Almost half of the patients (49%) were in NYHA class II, followed by class I (36%) and class III (15%). The median score of PHQ-9 was 4 (range:0-18), with 26% showing clinically relevant depression. PHQ-9 total score was associated with NYHA class ($p=0.001$), with higher median scores in worse NYHA classes [class I: 3 (IQR: 5.5), class II: 4 (IQR: 8) and class III: 8.5 (IQR:9.3)].

Conclusions: In this study, depression was present in 26% of HF outpatients and was associated with more severe HF symptoms. Consequently, preventing, monitoring, and treating depression in the management of these patients is recommended. Further research is needed for a deeper analysis of this association.

Keywords: NYHA class; heart failure; Depression