

Introduction: Major depression (MD) is associated with cognitive and behavioral alterations in many domains. It is not well clear what cortical structures and functional alterations characterize MD patients during resting state, a condition during which mind wandering process is prevailing.

Objectives: In MD patients with severe levels of depression we expected, during resting state, an altered asymmetry of cortical activity in the EEG bands that generally mark neurological impairment, i.e. Delta and Theta EEG bands.

Methods: 30 MD patients under pharmacological treatment and 32 matched controls underwent an EEG recording (38 scalp sites) during 5 min resting state with open eyes. Eye movements were corrected by ICA modeling and the 5 min recording was divided in 2 sec epochs from which Delta and Theta spectral powers were extracted.

Results: Spectral analysis of the 5 min resting state revealed a significant difference between the two groups at the level of left temporal lobe. MD patients showed larger Delta and Theta spectral power in the left superior temporal gyrus at the level of Brodmann's Areas 22 and 42.

Conclusions: Results evidenced a cortical inhibition (greater EEG Delta and Theta activity) in left temporal linguistic areas in severe depression, a result pointing to a different mind wandering process and thought architecture in MD patients during resting state.

Keywords: Major Depression; EEG bands; resting state; psychophysiology

EPP0555

Depressive and anxiety disorders among women with obesity

N. Kornetov^{1*}, O. Yarosh² and E. Sitnikova³

¹Department Of Psychiatry, Addiction And Psychotherapy, Siberian States Medical Unifersity, Tomsk, Russian Federation; ²Psychiatry, Addiction, Psychotherapy, Siberian States Medical Unifersity, Tomsk, Russian Federation and ³4th Year Student Of The Medical Faculty, Medical Unifersity, Tomsk, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.909

Introduction: Abdominal obesity is currently a growing problem in public health and has a high comorbidity with depressive and anxiety disorders. Obesity significantly decreases life quality, causes disability and decreases life expectancy.

Objectives: The objective of this study was to examine anxiety and depressive symptoms among women, who received individual or group psychotherapy sessions due to obesity control.

Methods: 577 women aging from 18 to 65 were examined. Height and weight were measured, Body mass index (BDI) was calculated based on received data. Depressive symptoms were determined with the PHQ-9 questionnaire [Kroenke K, Spitzer RL, Williams JB]. Anxiety symptoms were determined with the GAD-7 questionnaire. The level of social adaptation was examined.

Results: The prevalence of mild depression in our sample of women with obesity was 31.5%, 19.1% - moderate depression, 1% - severe depression, 48.4% had no depression symptoms. Anxiety symptoms were found in 38.2% of examined women, 61.8% showed no anxiety symptoms. Furthermore, when patients were divided into

subgroups accordingly to BMI, anxiety was mostly registered among ones with normal BMI. An average correlation between indicators of anxiety and depressive symptoms was identified ($r=0,62$, $p<0,05$). Average correlation between indicators of anxiety and depression and the level of social adaptation ($r=0,59$ and $r=0,48$ relatively, $p<0,05$). Anxiety and depressive symptoms' dependency on BMI was not established.

Conclusions: The received data showed that anxiety and depression have high prevalence among women with obesity. The study will help medical specialists draw attention to high comorbidity between abdominal obesity and anxiety-depressive disorders.

Keywords: Depressive Disorder; Anxiety; Obesity; Body mass index; Depressive Disorder; Body Mass Index; Anxiety

EPP0556

The bidirectional relationship between epilepsy and depression

S. Belghuith^{1*}, S. Daoud², N. Smaoui³, N. Farhat¹, S. Sakka¹, O. Hdiijl¹, K.S. Moalla¹, M. Damak¹, M. Maalej Bouali³ and C. Mhiri¹

¹Neurology, habib bourguiba hospital, sfax, Tunisia; ²Neurological Department, habib bourguiba hospital, sfax, Tunisia and ³Psychiatry C Department, Hedi chaker University hospital, sfax, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.910

Introduction: The relationship between epilepsy and depression has been recognized for a long time. In fact, the presence of depression could worsen the disease outcome.

Objectives: we aimed to study the prevalence of depression in patients with epilepsy and to assess the determinant factors of its genesis.

Methods: 54 patients with epilepsy, aged more than 18 years, attending the neurology department of Habib Bourguiba Hospital, Sfax, Tunisia, were enrolled for the study. All patients were administered Mini-International Neuropsychiatric Interview (MINI) for evaluation of psychiatric comorbid disorders especially depression. Socio-demographic and clinical data were collected.

Results: A total of 54 patients were included, of whom 63% (n =34) were men. Mean duration of epilepsy was 20.13 years. The most frequent type of seizure was generalized 72.7%. Depression was present in 7.3 % of patients. Alcoholism ($p=0.027$) was significantly associated with occurrence of depression. Drug resistance ($p = 0.03$) and longer duration of epilepsy ($p = 0.046$) were significantly associated with occurrence of depression. No significant association was found between type of seizure, seizure frequency, medication compliance and depression. Depression wasn't associated with anti-epileptic drug. We didn't find any association between depression and other psychiatric comorbidities.

Conclusions: Depression wasn't frequent in our study contrary to literature. The possible explanations are the reduced simple size and the sensitivity of the used tool to assess depression in epilepsy. Pursuant to literature, we found significant association between Alcoholism, drug resistance and long duration of epilepsy.

Keywords: Epilepsy; Depression; psychiatric comorbidity