

Mental Health And Sensory Organs, Sapienza University of Rome, Rome, Italy and ⁵Department Of Neuroscience, Rehabilitation, Ophthalmology, Genetics, Maternal And Child Health (dinogmi), Dipartimento di Neuroscienze, Università di Genova, Genoa, Italy

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.313

Introduction: Stressful life events (SLE) may influence the illness course and outcome.

Objectives: The present study aimed to characterize socio-demographic and clinical characteristics of euthymic major depressive disorder (MDD) outpatients with SLE relative to those without.

Methods: This sample included 628 (mean age=55.1 ± 16.1) currently euthymic MDD outpatients, among them 250 (39.8%) reported SLE and 378 (60.2%) did not.

Results: After univariate analyses, outpatients with SLE were most frequently widowed and lived predominantly with friends/others. Furthermore, compared to outpatients without SLE, those with SLE were more likely to have a family history of suicidal behavior, manifested melancholic characteristics and higher Coping Orientation to the Problems Experienced (COPE) positive reinterpretation/growth and less likely to manifest a comorbid panic disorder, residual interepisodic symptoms, have used psychiatric medications, and use current antidepressant medications. After regression analyses, having a family history of suicide (OR=9.697; p=≤.05), history of psychotropic medications use (OR=2.888; p=≤.05), and reduced use of antidepressants (OR=.321; p=.001) were significantly associated with SLE. Mediation analyses demonstrated that the association between current use of antidepressants and SLE was mediated by previous psychiatric medications.

Conclusions: Having a family history of suicide, history of psychotropic medications use, and reduced use of antidepressants may confer a specific “at risk” profile related to the enhanced vulnerability to experience SLE.

Disclosure: No significant relationships.

Keywords: Antidepressants; major depressive disorder; family history of suicide; negative distressing/stressful life events

E-mental health

O110

Screening for depression: The added value of actigraphy and smartphone-based intensive sampling of depressive affect and behaviors

O. Minaeva^{1*}, H. Riese¹, F. Lamers², N. Antypa³, M. Wichers¹ and S. Booi¹

¹Department Of Psychiatry, University of Groningen, University Medical Center Groningen, Groningen, Netherlands; ²Department Of Psychiatry, Vrije Universiteit, Amsterdam UMC, Amsterdam Public Health research institute, Amsterdam, Netherlands and ³Department Of Clinical Psychology, Leiden University, Institute of Psychology, Leiden, Netherlands

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.314

Introduction: In many countries, depressed individuals often first visit primary care settings for consultation, but a considerable number

of clinically depressed patients remains unidentified. Introducing additional screening tools may facilitate the diagnostic process.

Objectives: This study aims to examine whether Experience Sampling Method (ESM)-based measures of depressive affect and behaviors can discriminate depressed from non-depressed individuals. In addition, the added value of actigraphy-based measures was examined.

Methods: We used data from two samples to develop and validate prediction models. The development dataset included 14 days of ESM and continuous actigraphy of currently depressed (n=43) and non-depressed individuals (n=82). The validation dataset included 30 days of ESM and continuous actigraphy of currently depressed (n=27) and non-depressed individuals (n=27). Backward stepwise logistic regression analyses were applied to build the prediction models. The performance of the models was assessed with the goodness of fit indices, calibration curves, and discriminative ability (AUC, the area under the receiver operating characteristic curve).

Results: In the development dataset, the discriminative ability was good for the actigraphy model (AUC=0.790) and excellent for the ESM (AUC=0.991) and combined-domains model (AUC=0.993). In the validation dataset, the discriminative ability was reasonable for the actigraphy model (AUC=0.648) and excellent for the ESM (AUC=0.891) and combined-domains model (AUC=0.892).

Conclusions: ESM is a good diagnostic predictor and is easy to calculate, and, therefore, holds promise for implementation in clinical practice. Actigraphy shows no added value to ESM as a diagnostic predictor, but might still be useful when active monitoring with ESM is not feasible.

Disclosure: No significant relationships.

Keywords: Prediction model; Experience Sampling Method; Actigraphy; Depression

O111

Program esilence 1.0 - self-regulation program in food education via instagram-loricorps, study protocol

V. Lemieux^{1*}, J. Monthuy-Blanc² and N. Moreau³

¹Biomedical Sciences, Université du Québec à Trois-Rivières, Trois-Rivières, Canada; ²Education, Université du Québec à Trois-Rivières, Trois-Rivières, Canada and ³Service Social, Université d'Ottawa, Ottawa, Canada

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.315

Introduction: Social medias are seen as a risk factor for mental health because they increase body dissatisfaction and decrease self-esteem. This program is based on alimentation and physical well-being by relying on integrated intuitive eating and physical self-esteem. This program, implemented in a community setting use social media (i.e. Instagram-Loricorps), is composed of 12 monthly 180-second video capsule that address themes related to the promotion of body sensations and intuitive movement.

Objectives: The main objective of this study is to evaluate the effects of the program into the physical environment targeting the physical self-perceptions (PSP). Specifically, this study evaluates whether the eSILENCE 1.0 Program improves the level of PSP related to nutrition and explores the changes in the level and variability of the PSP.

Methods: This project is a mixed sequential explanatory study. 300 participants (Experimental Group [EG; N=200], Control