Results: A total of 231 patients (mean age, 55.5 years, 27.3% over 65 years, 62% female) were enrolled from Italy and included in the analysis. Mean(SD) SDS total score, PHQ-9, PDQ-5 scores at baseline were 17.8(7.58), 15.7(5.97) and 9.8(4.99), the scores(SE) decreased by 6.6(0.64), 5.9(0.47) and 3.6(0.36) from baseline to last visit. Mean(SE) EQ-5D-5L utility index increased by 0.13(0.01). Safety and tolerability profile of vortioxetine was in line with the established profile.

Conclusions: Improvements in overall functioning, depressive symptoms, cognitive function and quality of life were observed in patients treated with vortioxetine, including a wide proportion of elderly patients in a real-world setting.

Disclosure: A. Pugliese is an employee of Lundbeck Italy. K. Simonsen and H. Ren are employees of H. Lundbeck A/S.

Keywords: Depression; real world evidence; vortioxetine; effectiveness

EPP0636

Genome-wide association study of depression symptoms using online self-questionnaires in the Russian population cohort: preliminary results


1Serbsky National Medical Research Center on Psychiatry and Addictions, Molecular Genetics Laboratory, Moscow, Russian Federation; 2Genotek Ltd., N/a, Moscow, Russian Federation; 3Bekhterev National Medical Center for Psychiatry and Neurology, Translational Psychiatry, Saint-Petersburg, Russian Federation; 4Bekhterev National Medical Research Center for Psychiatry and Neurology, Translational Psychiatry Department, Saint-Petersburg, Russian Federation; 5Mental Health Research Center, Department Of Endogenous Mental Disorders And Affective Conditions, Moscow, Russian Federation; 6Serbsky National Medical Research Center on Psychiatry and Addictions, Department Of Psychiatry, Moscow, Russian Federation; 7Bekhterev National Medical Center for Psychiatry and Neurology, Geriatric Psychiatry, Saint-Petersburg, Russian Federation

*Corresponding author.

Methods: Participants: 2610 Russian-speaking respondents — clients of Genotek Ltd., provider of genetic testing services in Russian Federation. The online survey included HADS-D (Hospital Anxiety and Depression Scale - depression subscale), original questionnaire adapted for self-report from major depression DSM-5 criteria, questions about sex and age. Three research phenotypes were formed independently for each of the research phenotypes.

Conclusions: Preliminary results of the first GWAS of depression symptoms in the Russian population are acceptable and confirm the accuracy of the research strategy using online phenotyping tools based on clinical and psychometric instruments and provide basis for further studies.

Disclosure: The study was supported by Russian Science Foundation Grant # 20-15-00132

Keywords: Depression; GWAS; phenotyping

EPP0637

Factor Structure of Catatonia in Catatonic Depression

A. Barkhatova* and M. Bolgov

Mental Health Research Center, Department Of Endogenous Mental Disorders And Affective Conditions, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.833

Introduction: Depression with catatonic features is a relatively common condition that can pose difficulties in nosological assessment and lead to life-threatening complications.

Objectives: To determine the structure of catatonia associated with depression, and its subtypes.

Methods: The exploratory factor analysis with maximum likelihood (MLE) data extraction and varimax rotation was used in a sample of 96 patients with depressive, bipolar or schizophrenia spectrum disorders, who were depressed and who met the criteria for catatonia according to the Bush-Francis Catatonia Screening Instrument (BFCSI).

Results: The factor analysis revealed four factors of catatonia in depression, accounting for 57.3% of the variance. “Agitated” factor (eigenvalue 5.65, 18.2% of the variance) includes agitation, impulsivity, emotional lability, verbigeration, sudden muscular tone alterations, amotivation, perseveration and stereotypes. “Hypokinetic” factor (eigenvalue 5.05, 16.3% of the variance) includes mutism, withdrawal, stupor, staring, negativism, rigidity, posturing and gegenhalten. “Proskinetic” factor (eigenvalue 3.65, 11.8% of variance) includes automatic obedience, mitgehen, echo-verbalism, posturing and gegenhalten. “Agitated” catatonia is a more specific subtype and is usually associated with bipolar disorder. “Hypokinetic catatonia” is the most common but less specific subtype. “Proskinetical catatonia” in depression does not occur apart from other subtypes of catatonia. “Parakinetical catatonia” is most commonly associated with schizophrenia spectrum disorders.

Conclusions: Our study shows the heterogeneity of catatonic features in depression and facilitates the nosological diagnosis of catatonic depression.

Disclosure: No significant relationships.