

**Disclosure:** No significant relationships.

**Keywords:** covid-19 pandemic; Family; Autism spectrum disorder (ASD); school- aged children

## Depressive Disorders 05

### EPP0539

#### The Relation of Environment to Unipolar Recurrent Depression

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**Introduction:** Recurrent Unipolar and Bipolar affective disorders are considered paradigms of biological entities in psychiatry. However recent theories have underlined the role that environment plays in the genesis of these disorders in interaction with genetic diatheses.

**Objectives:** This study examined the relationship between stressful life events (SLE) and recurrent major depressive disorders.

**Methods:** Three groups of 50 subjects were assessed: Patients with recurrent major depressive disorder with melancholic features; patients with borderline personality disorder; and healthy controls. Interviews for DSM-V Disorders were used for diagnosis. Beck Depression Inventory, The Israel Psychiatric Research Interview Life Event Scale and the Coddington Events Schedule were used to measure life events and depression and were confirmed with an interview. **Results:** The proportions of loss-related events in childhood and in the year preceding the first episode was higher in the depressed group than in the control groups during the same time period. Proportions of SLE, uncontrolled and independent events were also more common in the depressed patients in the year preceding the first episode.

**Conclusions:** The study's conclusion is that SLE plays an important role in the onset of depressive disorders. There are specific kinds of SLE that occur in childhood and in the year preceding the first episode. SLE has a less significant role in the maintenance of this illness.

**Disclosure:** No significant relationships.

**Keywords:** life events; depression; recurrent mood disorder

### EPP0540

#### Prediction of Treatment Response in Patients with Major Depressive Disorder: A Meta-Analysis of Functional Magnetic Resonance Imaging Studies

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**Introduction:** Identifying the optimal treatment for individuals with major depressive disorder (MDD) is often a long and complicated process. Functional magnetic resonance imaging (fMRI)

studies have been used to help predict and explain differences in treatment response among individuals with MDD.

**Objectives:** We conducted a comprehensive meta-analysis of treatment prediction studies utilizing fMRI in patients with MDD to provide evidence that neural activity can be used to predict response to antidepressant treatment.

**Methods:** A multi-level kernel density analysis was applied to these primary fMRI studies, in which we analyzed brain activation patterns of depressed patients (N= 364) before receiving antidepressant treatment.

**Results:** The results of this analysis demonstrated that hyperactivity in six brain regions significantly predicted treatment response in patients with MDD: the right anterior cingulate, right cuneus, left fusiform gyrus, left middle frontal gyrus, right cingulate gyrus, and left superior frontal gyrus.

**Conclusions:** This study provides evidence that neural activity, as measured by standard fMRI paradigms, can be used to successfully predict response to antidepressant treatment. This may be used in the future clinically to improve decision-making processes and treatment outcomes for patients.

**Disclosure:** No significant relationships.

**Keywords:** treatment response; meta-analysis; Functional Magnetic Resonance Imaging; major depressive disorder

### EPP0541

#### Effects of a brief psychodynamic intervention on depressive patients. The “unfreezing” of psychic activity.

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**Introduction:** While psychotherapy is an essential aspect of the treatment of depression, there are few studies focusing on the effectiveness of psychoanalytic and psychodynamic group therapies for depressed patients.

**Objectives:** In this presentation, we will study the effects of a brief, 4-session psychodynamic intervention (BPI) led by a group of therapists, as inspired by the Lausanne model.

**Methods:** The patients were recruited in a therapeutic setting. A free consent form was completed and the ethics of research explained to each participant. Our sample consisted of 32 patients (average age = 43.81 years, sex ratio: 1M/ 4F). The therapists gathered data by completing several assessment scales after each therapy session: MADRS, ESM, EFP, HAQ-IT, EDICODE, Counter-Transfer Scale. The SPSS software (V21) was used to analyze the data.

**Results:** The patients' mean MADRS score dropped by more than 11 after the four sessions. This improvement matches a more positive and committed self-reported counter-transference of the therapists towards the patients. As their insight increases, patients show greater behavioral and psychic activity. We name this exit of the depressive inhibition the “unfreezing” process. It enables more satisfactory human interactions and a more focused and structured self-narrative.