

for Suicide Ideation, Suicide Behaviors Questionnaire scales were applied to the participants.

Results: Patients with bipolar disorder had significantly higher scores for emotion dysregulation and impulsivity than the healthy control group. A statistically significant correlation was found between emotion dysregulation, impulsivity, suicide ideation, and suicide behavior scores. DERS Total and Barratt Total scores were found higher for bipolar patients with suicide attempts than bipolar patients with suicide ideation and bipolar patients with neither attempt nor ideation. The hierarchical regression analysis has indicated that strategies, clarity, and non-planing impulsiveness were the predictors of suicide ideation in bipolar patients.

Conclusions: The results suggested a strong association between emotional dysregulation, impulsivity with suicide ideation, and behavior in patients with bipolar disorder.

Disclosure: No significant relationships.

Keywords: bipolar disorder; emotional dysregulation; Impulsivity; Suicide

EPV0100

Comorbidity of CRHR2 gene variants in type 2 diabetes and depression

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Introduction: The corticotropin-releasing hormone receptor 2 (CRHR2) gene encodes CRHR2, which is an important element in the hypothalamic-pituitary-adrenal physiologic response towards stress culminating in hyperglycemia, insulin resistance, mood disorders and depression (MDD). CRHR2^{-/-} mice are hypersensitive to stress, and the CRHR2 locus in humans has been linked to type 2 diabetes (T2D) and MDD.

Objectives: Several variants in the CRHR2 gene have been reported in patients with bipolar disorder, post-traumatic stress disorder, and T2D, but variants in the gene have not been investigated in families with T2D and MDD.

Methods: We genotyped 212 Italian families with T2D and MDD. We tested 17 SNPs in the CRHR2 gene using two-point parametric-linkage and linkage-disequilibrium (LD) analysis with the following models: dominant with complete-penetrance (D1), dominant with incomplete-penetrance (D2), recessive with complete-penetrance (R1) and recessive with incomplete-penetrance (R2).

Results: We detected linkage to and/or LD with: MDD for 3 SNPs/D1, 2 SNPs/D2, 3 SNPs/R1, and 3 SNPs/R2; and, T2D for 3 SNPs/D1, 2 SNPs/D2, 2 SNPs/R1 and 1 SNP/R2. Two independent SNPs were comorbid. Interestingly, the variants linked to or in LD with MDD had in general higher statistical significance level than the variants linked to T2D, despite that the families were primarily ascertained for T2D.

Conclusions: Our study shows for the first time that the CRHR2 gene which encodes CRHR2 is in linkage to and linkage disequilibrium with MDD and T2D, thereby contributing, in families with T2D, to both disorders and underlying the shared genetic pathogenesis of their comorbidity

Disclosure: No significant relationships.

Keywords: Type 2 diabetes; Depression; CRHR2; MDD

EPV0101

A Case of Ruminative Hypomania Induced by High Dose Venlafaxine

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Introduction: Obsessive phenomena, when present, are usually seen in the depressive phase of bipolar disorder.

Objectives: The peculiar case with aggravation in ruminative and obsessive thinking with simultaneous hypomania may widen our understanding of the phenomenology of antidepressant induced hypomanic symptoms.

Methods: We present a case of ruminative hypomania induced by high dose venlafaxine. Young Mania Rating Scale (YMRS), Hamilton Depression Rating Scale (HAM-D) and Yale Brown Obsessive Compulsive Scale (YBOCS) were used for symptom ratings.

Results: The patient was 30 years old and she had treatment history of depression for 3 months. She had two consecutive suicide attempts with drugs in the week before she was hospitalized for suicidal risk. She was using venlafaxine 300 mg/day and olanzapin 2,5 mg/day; continuous ruminative thinking about the past and imaginary sexual affairs with former friends were apparent with an unremitting pattern, leading to intense psychomotor agitation and suicide attempts. Irritable mood, and increased energy was observed with continuous ruminations. She was diagnosed with bipolar-II-disorder, with mixed features and anxious distress (YMRS:17, HAM-D:22, YBOCS:34). After discontinuing venlafaxine and starting anti-manic treatment with haloperidol 10 mg/day in the first week, both affective symptoms and ruminations were improved (YMRS:2, HAM-D:4, YBOCS:8). Aripiprazol 20 mg/day and quetiapine 100 mg/day which were given for continuation treatment were also effective for preserving full remission.

Conclusions: When prescribing high dose venlafaxine for treatment resistant depression, it should be remembered that this may

induce hypomanic symptoms and prominent ruminative thinking which can be ameliorated with anti-manic treatment.

Disclosure: No significant relationships.

Keywords: venlafaxine; BIPOLAR; obsession; Mixed features

EPV0102

Therapeutic characteristics of patients followed for bipolar disorder with rapid cycles: Study on a Tunisian population.

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Introduction: Bipolar disorder is a frequent and particularly severe psychiatric pathology that causes significant morbidity and mortality. The rapid cycling forms are more severe in terms of their expression, evolutionary course, therapeutic responses and associated comorbidities.

Objectives: The aim of this study is to conduct a descriptive assessment of therapeutic characteristics in patients with rapid cycling bipolar disorder.

Methods: Our work involved a population of 97 patients followed for bipolar disorder diagnosed according to DSM5 criteria, including 37 patients meeting the specification "with rapid cycles". The patients were divided into two groups: - Group of patients with bipolar disorder with rapid cycles (TBCR) - Group of patients with bipolar disorder without rapid cycling (TBNCR). We compared the therapeutic features among these two groups.

Results: The dominant polarity was depressive in patients with rapid cycles. They required more mood stabilizers. A greater proportion of them had received treatment with serotonin reuptake inhibitor antidepressants. They were more likely to use hypnotics such as antihistamines and zolpidem.

Conclusions: Rapid cycling TB is a relatively common clinical modality that should be investigated and identified. The use of antidepressants is associated with this course of the disease. Their utilization in the treatment of bipolar depression must be thoughtful and well studied

Disclosure: No significant relationships.

Keywords: antidepressant; course; rapid cycling; bipolar disorders

EPV0103

Mixed features in depression: frequency and associated factors

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Introduction: Mixed states in mood disorders present significant clinical and prognostic challenges. Although the DSM-5 has broadened diagnostic criteria for mixed states with the development of the 'mixed features' specifier and its application to

unipolar depressive disorders, some mixed episodes might still be overlooked.

Objectives: to evaluate the frequency and the factors associated with mixed depression according to the broader Koukopoulos criteria in a sample of patients with a major depressive episode

Methods: We included 99 consecutive patients presenting for a major depressive episode of bipolar (n=10) or unipolar major depressive (n=89) disorder at our outpatient clinic. Major depression was ascertained using SCID- IV criteria, and mixed features were determined using Koukopoulos' diagnostic criteria

Results: Mean age of the sample was 35.5 years [14-58]. Women accounted for 63.6% of patients. Mixed features were found in 19.5% (n=19) of the sample, 80% (n=8) among patients with bipolar disorders (BD) and 12.3% (n=11) among those with major depressive disorder (MDD). Individuals with mixed features had more substance abuse (p=0.005) and more suicide attempts (p=0.01). Individuals receiving antipsychotics had a lower risk of mixed features (p=0.000) while antidepressant treatment did not have any effect. A family history of BD, psychosis, suicide and substance abuse were found in these patients. Mixed features in depression were more frequent in patients with BD than in MDD.

Conclusions: Our study showed a high frequency of mixed features in depression, especially bipolar depression when Koukopoulos criteria are applied. Special attention should be given to these patients given the association with substance use and suicidality

Disclosure: No significant relationships.

Keywords: Mixed features; Depression

EPV0104

Retinal Thickness as a biomarker of cognitive impairment in bipolar disorder.

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Introduction: Ocular Coherence Tomography (OCT) to measure retinal thickness is the current method to observe neurological impairment in neurodegenerative diseases [1] and in mental disorders [2] due to the composition of the retina itself as an anatomic extension of the brain. There can be found some factors to improve the resilience like the years of study.

Objectives: Our aim is to evaluate cognitive and clinical impairment in Bipolar Disorder and see the correlation to the retinal thinning.

Methods: Twenty-seven patients diagnosed with Bipolar Disorder were assessed in the context of the FINEXT programme (3). Selective attention, executive functions and verbal memory were measured among other variables. Using the OCT technique, we measured the thickness of the ppRNFL, the RFNL, GCL and IPL layers in the macula in both eyes through several radial segments. Partial correlations were performed with Bonferroni correction