

Table 3 Historical data about age of drug use in both groups.

		Women (N=10; 15%)	Male (N=56; 85%)	P value
Age of first use of cocaine, years	Mean (SD)	21,71 (6,3)	19,39 (5,3)	0,752
Age of first use of cannabis, years	Mean (SD)	15,67 (1,0)	14,86 (2,9)	0,510
Age of first use of alcohol, years	Mean (SD)	16,22 (3,0)	14,41 (4,1)	0,230
Age of first use of opioid, years	Mean (SD)	25,50 (19,4)	20,19 (5,4)	0,373
Age of first use of sedatives, years	Mean (SD)	19,80 (3,0)	27,11 (10,1)	0,132
Age of first use of amphetamines, years	Mean (SD)	19,67 (2,1)	18,82 (5,6)	0,260
Age of first use of nicotine years	Mean (SD)	15,33 (1,9)	14,49 (2,9)	0,568
Age of regular use of cocaine, years	Mean (SD)	27,17 (7,2)	25,93 (8,9)	0,391
Age of regular use of cannabis, years	Mean (SD)	18,00 (2,8)	15,00 (2,0)	0,839
Age of regular use of alcohol, years	Mean (SD)	22,20 (6,2)	20,94 (8,4)	0,749
Age of regular use of opioid, years	Mean (SD)	27,00 (11,3)	21,91 (6,6)	0,397
Age of regular use of sedatives, years	Mean (SD)	23,00 (1,4)	26,40 (9,2)	0,619
Age of regular use of amphetamines, years	Mean (SD)	25,00 (0,0)	18,90 (6,0)	0,663
Age of regular use of nicotine years	Mean (SD)	15,89 (2,2)	15,17 (2,4)	0,410

*. The chi-square statistic is significant at level 05.

Table 4 Severity Scores for both groups of study.

		Women (N=10; 16%)	Male (N=66; 85%)	P value
GAF score at admission	Mean (SD)	44,50 (7,50)	38,98 (10,57)	0,36
GAF score at discharge	Mean (SD)	67,00 (10,24)	60,60 (9,86)	0,30
OEP score at admission	Mean (SD)	18,30 (6,53)	15,10 (5,40)	0,01*
OEP score at discharge	Mean (SD)	9,80 (4,43)	9,52 (3,92)	0,01*

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EV0229

GERD is associated with the outcome of MDD treatment

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Introduction Gastroesophageal reflux disease (GERD) is more prevalent among patients with major depressive disorder (MDD) than in general population, and vice versa. Bidirectional association of GERD and MDD is well documented. Although protective effect for gastric symptoms has been indicated for several antidepressants like trazodone, citalopram, fluoxetine, mirtazapine or fluvoxamine, these findings are sometimes contradictory. Similar may be claimed for antidepressive effect of some proton pump inhibitors. We decided to examine the association of GERD with the long-term efficacy of MDD treatment.

Objective To examine the association of GERD and efficacy of MDD treatment.

Methods This nested cross-sectional study was done during 2016 at Psychiatric hospital Sveti Ivan, Zagreb, Croatia on the sample of 1008 psychiatric patients. Key outcome was the number of psychiatric rehospitalizations since the first diagnosis of MDD. Predictor was patient-self-declared diagnosis of GERD. Covariates controlled by multivariate analysis of covariance were sex, age, duration of MDD in years, education, marital status, number of household members, work status, clinical global impression scale–severity of MDD at diagnosis, treatment with tricyclic antidepressants (TCA), selective serotonin reuptake inhibitors (SSRI),

serotonin-norepinephrine reuptake inhibitors (SNRI), noradrenergic and specific serotonergic (NaSSA) and antipsychotics.

Results MDD patients with GERD had significantly larger number of psychiatric rehospitalizations (mean = 5.4 (SD 6.82)) than MDD patients with no GERD (mean = 3.1 (SD 4.45)). After adjustment for all covariates, GERD significantly moderated the efficacy of treatment of MDD ($P = 0.048$; $\eta^2 = 0.05$) (Figure 1).

Conclusion To treat MDD effectively we should treat GERD as well.



Figure 1 Number of psychiatric rehospitalizations in patients with MDD and GERD; error bars represent 95% confidence intervals ($n = 1008$).

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Comorbidity of major depressive disorder and personality disorder increase the risk for suicide

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Introduction Personality disorder (PD) with an associated diagnostic of major depressive disorder (MDD) is a common occurrence, being considered a factor of treatment resistant depression. In this study, we compare two groups of patients' one group having Major Depressive Episode (MDD) and the other with MDD and PD as comorbidity.

Methods This is an observational study of all patients admitted with diagnosis of MDD during one month period in an acute psychiatric hospital. Data collection is made using patients files. During one month period a total number of 105 MDD cases were recorded (group A-75 cases with MDD and group B-30 patients with PD and MDD). The diagnosis was recorded in files by a specialist psychiatrist. Data is analyzed using SPSS v.20.

Results A significant difference is found when comparing age groups, mean age for group A being 60 years and for group B 35 years ($P = 0.05$). Regarding suicide attempts a higher prevalence is found in Group B (Group A 6.7%, Group B 20%) although with statistical relevance ($P = 0.04$). Study limitation: small sample size of group B does not allow analysis on different type of personality