

lar major depression, among psoriatic patients. Depressive disorder with the presence of psoriasis may constitute a separate etiology with a greater contribution of early environment.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EV0378

Modifications of depression-like behavior in the adult ovariectomized female rats treated with different doses of cholecalciferol

J. Fedotova^{1,2,*}, T. Dudnichenko³

¹ I.P. Pavlov Institute of Physiology RASci, Laboratory of Neuroendocrinology, St. Petersburg, Russia

² I.M. Sechenov Institute of Evolutionary Physiology and Biochemistry of RASci, Laboratory of Comparative Somnology and Neuroendocrinology, St. Petersburg, Russia

³ North-Western State Medical University named after I.I. Mechnikov, Department of Obstetrics and Gynecology named after S.N. Davydov, St. Petersburg, Russia

* Corresponding author.

The aim of the preclinical study was to examine the effects of chronic the effects of chronic cholecalciferol administration (1.0, 2.5 or 5.0 mg/kg/day, s.c., once daily, for 14 days) on depression-like behavior following ovariectomy in rats. Cholecalciferol was administered to the ovariectomized (OVX) rats and OVX rats treated with 17 β -estradiol (17 β -E₂, 0.5 μ g/rat, s.c., once daily, for 14 days). Depression-like behavior was assessed in the forced swimming test (FST) and the spontaneous locomotor activity was assessed using the open field test (OFT). Treatment with cholecalciferol in high dose (5.0 mg/kg/day, s.c.) significantly decreased immobility time of OVX rats in the FST. Co-administration of cholecalciferol in high dose with 17 β -E₂ exerted a markedly synergistic antidepressant-like effect in the OVX rats on the same model of depression-like behavior testing. Cholecalciferol in high dose administered alone or together with 17 β -E₂ significantly enhanced frequency of grooming of the OVX rats in the OFT. Moreover, cholecalciferol in high dose administered alone or together with 17 β -E₂ significantly decreased the elevated corticosterone levels in the blood serum of OVX rats following the FST. These results indicate that cholecalciferol in high dose has a marked antidepressant-like effect in the adult female rats with low levels of estrogen. The data also indicate that the combination of cholecalciferol in high dose and 17 β -E₂ is more effective than 17 β -E₂ alone in OVX rats inducing a more profound antidepressant-like effect in the FST.

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Does committed action act as a buffer against the impact of shame on depression?

C. Ferreira*, J. Marta-Simões, I.A. Trindade, A.L. Mendes

Faculty of Psychology and Education Sciences University of Coimbra, CINEICC, Cognitive Behavioural Centre for Research and Intervention, Coimbra, Portugal

* Corresponding author.

Committed action is defined as the ability to take action guided by personal life values, i.e., to be persistent in valued behaviours even when such pursuit implicates facing setbacks and experiencing discomfort. This is a key process for acceptance and commitment therapy, and is linked to several positive mental health outcomes. Although current literature has stressed the pervasive impact of shame on psychopathology, especially on depression, data concerning the role of committed action on the impact of shame on depression is considered insufficient. Considering these premises, the current study intended to explore the moderator role of committed action in the relationship between external shame and depressive symptomatology, in an adult sample of 178 participants of both sexes. Path analysis' results showed that shame holds a positive effect on depression ($\beta = 1.19, P < .001$), and that committed action serves as a moderator of the effect of shame on depression ($\beta = -.63, P < .010$). The tested model accounted for 45% of the variance of depression symptoms. A graphical representation allowed to observe that committed action presents a buffer effect for the harmful impact of shame on symptoms of depression. That is, at any level of shame experienced, those individuals who revealed higher levels of committed action showed less depression symptoms. This study has corroborated the powerful effect of external shame on depression symptoms, which was found to be buffered by committed action. The present findings thus highlight the pertinence of identifying personal life values and motivating committed action, particularly in prevention and intervention programs for depression.

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Depression and chronic immune system dysfunction—a longitudinal study in patients with lupus

M. Figueiredo-Braga^{1,*}, M. Bernardes², M. Figueiredo¹, G. Terroso², B. Poole³

¹ Faculty of Medicine, University of Porto, Clinical Neurosciences and Mental Health, Porto, Portugal

² Hospital of São João EPE, Rheumatology Department, Porto, Portugal

³ Brigham Young University, Department of Microbiology and Molecular Biology, Provo, USA

* Corresponding author.

Introduction Depression is a common companion of systemic lupus erythematosus that substantially contribute to patient's suffering and a decreased quality of life. The relationship between depressive symptoms and disease immune processes is not well understood.

Objectives To further understand the relationship between lupus and depression, a patient cohort was examined for correlations between clinical presentation, biological parameters and psychosocial evaluation.

Methods Seventy-two lupus patients were screened for depressive symptoms, clinically and psychologically characterized using a battery of instruments, including assessments for depression, anxiety, fatigue, pain and overall health. Scores from these assessments were correlated with lupus clinical profile and biological parameters namely the immune profile.

Results Forty-two percent of the patients had scores indicative of depression using the HADS Depression scale. Strong correlation was found between pain and depression. Moderate correlation was found between several lupus symptoms, such as mouth ulcers, rash, and arthritis, and psychological evaluation. There was low to moderate correlation between complement levels, C-reactive protein and psychological indicators, but no other lab tests correlated well with the psychological tests.