[2] *Department of Cardiology,Bispebjerg University Hospital, Copenhagen, Denmark* [3] *Department of Psychiatry, Copenhagen University Hospital Rigshospitalet, Copenhagen, Denmark*

Background and Aims: Prevalence of depression and anxiety in patients recovering from acute coronary syndrome (ACS) i.e., myocardial infarction and unstable angina is higher than in general population and both depression and anxiety are associated with poor cardiac outcomes and higher mortality. Despite the prognostic role of post-ACS depression no clinical trials of prevention of depression and anxiety in this population of patients has been undertaken. The aim of the study is to evaluate the efficacy of preventive treatment with SSRI (escitalopram) in the first year after ACS.

Methods: 234 non-depressed patients will be enrolled within 8 weeks after ACS and will be randomly assigned to treatment with escitalopram/placebo (5-20 mg) in 52 weeks. There will be 9 psychiatric and 3 cardiologic assessments during the year of the study. Primary outcome measures are the diagnosis of depression and HDS (Hamilton Depression Scale). Psychiatric measurements: SCAN (Schedules for Clinical Assessment in Neuropsychiatry), HDS, HAS (Hamilton Anxiety Rating Scale), UKU Side Effect Rating Scale, ESSI (ENRICHD Social Support Instrument), SF-36 (SF-36 Health Survey), SCL-92 (Symptom Check List) and BDI (Beck Depression Inventory). Cardiologic measurements are blood pressure, electrocardiography, echocardiography (left ventricular ejection fraction), heart rate variability and use of medicine.

Conclusion: ACS patients with mental illness often remain untreated with an increased risk of somatic comorbidity and mortality. DECARD study is the first study evaluating the effect of prophylactic treatment of depression in patients with ACS. The study is ongoing and on 15th October 2007 there were 216 patients enrolled.

P0200

Depression prevalence and its related factors in nursing homes elderly

M. Hosseinian [1], Z. Tagharrobi [1], K.H. Sharifi [1], Z. Sooky [2], S. Esalat Manesh [3]. [1] *Nursing Department, Nursing and Midwifery Faculty, Kashan University of Medical Sciences & Health Services, Kashan, Iran* [2] *Midwifery Department, Nursing and Midwifery Faculty, Kashan University of Medical Sciences & Health Services, Kashan, Iran* [3] *Medical Department, Iran University of Medical Sciences & Health Services, Tehran, Iran*

Backgrounds and Aims: Depression, especially in nursing homes elderly, is one of the most important mental health disorders. There is many controversy about depression's related factors ; so this study was carried out in order to asses depression prevalence and related factors in nursing homes elderly in Kashan — Iran 2007.

Methods: In this cross-sectional study, all of people aged ≥60 years old who were resident in Golabchi center of Kashan city (n=52) were selected. The GDS-30 questionnaires were completed through interview using self-reporting method. Depression status was determined in 0-30 scale .The sample were divided two groups. 0-9 and 10-30 scores was spotted as no-depressed and depressed groups respectively. The data analyzed using T-test and exact fisher test.

Results: Prevalence depression was 85/5%. Depression prevalence was more in men, unmarried people, uneducated people, people who were under the treatment insurance, people who had specific income source, people who had visitors at least monthly, ill people, optional inhabitancy, people who had religious beliefs in medium level and less, and they had participated in religious ceremonies in medium

level and less; But these differences were not significant. Age, duration of inhabitancy and child number was not also different between two groups.

Conclusion: Prevalence of Depression in nursing homes elderly is numerous. In order to improve old people quality of life must attend to this topic.

Key words: Geriatric, Depression, related factors

P0201

An alternative approach to treatment of depression

Y. Ishizuka. *Independent Private Practice, Rye, NY, USA*

Objective: To demonstrate through 3 classic case examples that depression can be predictably overcome through 'Breakthrough Intimacy' - closeness between committed couples far greater than their previous maximum experience, eliminating depression by making it unnecessary.

Method: Lifetrack therapy works with couples (the patient and his/her partner in life) bringing them far closer than ever before, guided by their own daily self-rating on 41 parameters that allow accurate graphic tracking via Internet of subtle changes in their personalities during each therapy session. Working in three-way teamwork, the therapist actively help the couple to achieve closeness far greater than their previous maximum level, overcoming waves of symptom spikes (such as depression) until they disappear by exhaustion, as the couples undergo personality transformation.

Results: Of the 1,170 patients treated (all of them showing varying degree of depression) over the last 20 years, 48% of patients reached a level of adjustment beyond their previous maximum level. Among them, 31% reached a level more than twice, 24% reached more than three times, 20% reached more than four times, 16% reached more than five times, and 7.6% reached more than ten times their previous maximum level of adjustment according to their own daily subjective self-rating, far beyond symptom elimination.

Conclusion: Depression may be better understood and treated as the consequence of one's personality which can be transformed through 'Breakthrough Intimacy'. The results of this study over the last 20 years support an alternative approach in treatment of depressive disorder.

P0202

Impairment of memory function by computer operation demands in recurrent depressive disorder

K. Israel-Laubinger [1], V. Gapp [1], S. Hornung [1], B. Wiebel [2], T. Wetterling [3], B. Weber [1]. [1] *Clinic for Psychiatry, Psychosomatics and Psychotherapy, J. W. Goethe University, Frankfurt, Germany* [2] *Department of Psychological Medicine, Evangelisches Krankenhaus Lütgendortmund, Dortmund, Germany* [3] *Clinic for Psychiatry and Psychotherapy - Gerontopsychiatry, Vivantes Klinikum Hellersdorf, Berlin, Germany*

Impairment of memory function in depressive patients is discussed controversially. At least memory impairment might be expected in more complex and effortful memory tasks.

80 patients with recurrent depressive disorder (ICD-10: F33) were compared to healthy controls in two computerized memory tasks (NEUROBAT verbal recognition and nonverbal free recall). Psychopathology (HDRS, BDI, mood scales) and computer attitude as well as computer experience were controlled as possible co-variables. A correlation between performance in computerized