inclusion and exclusion criteria. Specifically, studies were only included if they reported on the side effects of VNS therapy for depression. Studies were excluded if they did mention the side effects, or if they were not accessible to the investigators due to pay-walls, for example.
Results: A total of 380 articles were identified from searching in both databases, and screening with application of our inclusion and exclusion criteria left 14 articles to be considered. The side effects of VNS therapy can range from mild and transient to more significant, and most frequently mentioned side-effects included: headache, local skin irritation, intolerable pain, and voice alteration (Jung 2023). Headache and dizziness was common for all forms of VNS, while local skin irritation was far more common in non-invasive methods of VNS involving electrodes, and serious complications from damage to the vagus nerve resulting in arrhythmias and aspiration (Bruer 2022) potentially impacting the overall quality of life and adherence to treatment.
Conclusions: Vagus Nerve Stimulation (VNS) offers a promising treatment option for patients with treatment-resistant depression, providing symptom relief when other therapies fail. However, side effects, particularly laryngeal, and variability in patient response highlight the need for personalized approaches. Future research on transcutaneous VNS and optimized protocols is essential to enhance outcomes.

Disclosure of Interest: None Declared

EPV0652

Depression and Acute Myocardial Infarction: What's New in Their Association?

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Introduction: Depression and myocardial infarction (MI) are leading causes of disability worldwide. Their interconnectedness, along with the burden that these impose on patients, is of particular clinical interest.
Objectives: We conducted a systematic review, that aimed to synthesize recent data on the association between depression and MI, highlighting their outcomes and identifying contributing risk factors.
Methods: Data were extracted from 17 studies, including only prospective and longitudinal cohort studies, published between 2019 and 2024. These studies were selected from an initial pool of 67 relevant articles, retrieved from PubMed, PsycINFO, and Embase databases.
Results: Prevalence of depression was higher among MI survivors (OR 1.21; 95% CI 1.15-1.27), with increased rates observed in patients with comorbid type 2 diabetes (IR 131.1; 95% CI 109.6-155.6). A significant correlation was found between depression and adverse clinical outcomes post-MI (HR 3.41; 95% CI 2.49-2.674), including 30-day hospital readmissions (HR 1.11; 95% CI 1.07-1.15). Additionally, individuals diagnosed with depression had a higher likelihood of experiencing MI (HR 2.07; 95% CI 1.79-2.40), particularly those from lower socioeconomic backgrounds (HR 1.47; 95% CI 1.36-1.60) or with chronic kidney disease (HR 1.29; 95% CI 1.03-1.62). However, depressed men and patients using SSRIs had a reduced risk of MI compared to women and non-SSRI users (HR 1.39; 95% CI 1.35-1.42 and HR 0.91; 95% CI 0.64-1.29, respectively).
Conclusions: Depression increases the risk of developing MI and worsens clinical outcomes, and vice versa. Comorbid conditions, including type 2 diabetes and chronic kidney disease, gender differences, and no antidepressant use, are critical factors that compound their association.

Disclosure of Interest: None Declared

EPV0653

Can Esketamine Become a Viable Alternative for Treating Treatment-Resistant Depression in Ecuador?

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Introduction: Treatment-resistant Depression (TRD) nowadays it is consider a public health problem. Studies had demonstrate that TRD has higher prevalence of psychiatric comorbid conditions, twice the utilization of outpatient health care resources, 3 times the number of inpatient bed-days, and 23% higher all-cause mortality. -Esketamine, the *S*-enantiomer of ketamine, has been recently approved for depression that has failed to respond to two or more antidepressants [2]. Nevertheless, considering its steep cost, accessibility in Ecuador becomes a crucial factor. Comprehensive studies are essential to substantiate its efficacy
Objectives: Evaluate the effectiveness and safety of esketamine nasal spray in a clinical sample of patients with TRD
Methods: This is an observational, retrospective and multicentric study comprising a total of 16 TRD patients treated with esketamine nasal spray, the sample was collected over a period of 2 years. Anamnestic data and psychometric assessment (MADRS and Columbia scale for suicidal ideation) were collected from -medical records at baseline (T0), one month (T1) and two month (T2) follow-ups.
Results: Clinical response was achieved in 68% at T1 and 81% by T2. Remission rates of 50% was detected by T2. Few side effects were seen in this study, 25% (4) present disossiacion 13% (3) hypertension and anxiety 12% (2) all of them were autolimited and no treatment was required. Based on the Columbia scale to assess suicidal ideation, the disappearance of suicidal risk was observed before T1 in all cases. It is important to emphasize that 2 of the patients taken into account for the study abandoned treatment before the time established. The first patient abandoned

it in the second application for economic reasons and the second patient because he observed total remission of the symptoms by T1
Conclusions: Taking into account the results, it can be concluded that esketamine is a safe medication, given the low percentage of observed adverse effects, all of which were mild and self-limiting. Moreover, the high rates of clinical response and remission allow us to conclude its effectiveness. However, the restriced accessibility should be taken into acount due to the elevated cost of esketamine which also limits this study due to the small sample size

Disclosure of Interest: None Declared

EPV0654

Vegan diet and the importance of nutritional self-concept in the treatment of unipolar depression: a new perspective

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Introduction: Studies on the psychological impact of a vegan diet and its effect on mental health are still, although the interdisciplinary literature points to significant diet-related cognitions associated with the active choice of a plant-based diet. This study addresses this research gap by framing veganism as an identity-associated aspect of self-concept in young vegans and examines the influence of self-esteem resulting from the vegan diet on symptoms of unipolar depression in a biopsychosocial framework model.
Objectives: veganism as an identity-associated aspect of self-concept
influence of self-esteem resulting from the vegan diet on symptoms of unipolar depression
alternative perspective on the connections between psyche and nutrition
Methods: In a representative sample of n = 659 students from German universities, the absolute and additional influence of diet-related self-esteem on depressive symptoms was investigated using hierarchical regression, taking biopsychosocial covariates into account.
Results: It was found that the self-esteem experience of the test subjects specifically gained from the vegan diet exerts a statistically significant influence on depressive symptoms (B = - 37, SE(B) = 0.02, p <.001) and can also explain a statistically significant additional proportion of the total variance in a biopsychosocial model of depression (ΔR2 = .18, F [1,649] = 272.34, p <.001). Together, the model of eight covariates and nutrition-related self-esteem can explain 57% of depressive symptoms (R2 = .57, F [9,649] = 94.81, p < .001¸ f2 = 0.13). This statistically significant influence of diet-related self-esteem also persists in an exploratory study of different severity levels of depressiogenic distress
Conclusions: The results provide evidence of a psychological impact factor in relation to a vegan diet and identify psychological consequences and thus open up a new research perspective in clinical psychology.

Disclosure of Interest: None Declared

EPV0656

Clinical Features of Late-Life Depression with Different Neurobiochemical characteristics

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Introduction: Depression is one of the most important medical and social problems in old age due to its high prevalence (10-25%) and a significant increase in the burden on social services and medical institutions. A diverse combination of biological factors of aging contributes to the polymorphism of clinical manifestations of late-life depression.
Objectives: Study of the clinical features of depressed patients of late age of three identified neurobiochemical models of energy, antioxidant and glutamate metabolism.
Methods: The study material consisted of 52 hospitalized patients (40 women and 12 men) aged 60-86 years with a depressive episode of recurrent depressive disorder, bipolar affective disorder and a single depressive episode (ICD-10). The patients were examined by clinical, psychometric, biochemical and statistical methods. Before starting therapy, psychometric assessments were performed using the Hamilton Anxiety and Depression Rating Scales and the Mini-Mental Status Examination. On the same day, the activity of enzymes of energy (cytochrome c oxidase - CO), antioxidant (glutathione reductase - GR and glutathione S-transferase - GST) and glutamate (glutamate dehydrogenase - GDH) metabolism enzymes in blood platelets was determined in patients.
Results: In patients with a decrease in energy and antioxidant metabolism (↓GR, GST, HD and ↑GDH), there was a predominance of shallow apathetic depression of a "seasonal" nature with the presence of mild cognitive impairment, a later age of manifestation, and a high incidence of cerebrovascular pathology. Patients with "disharmonious" metabolism (↓ GR, GST, GD and ↑ CO) were characterized by an early onset of the disease, its longer duration, more severe and complex depression with a pronounced anxiety component. Patients with a conditionally "normal" metabolism were more likely to experience typical melancholy depression and the lowest incidence of severe cerebrovascular pathology.
Conclusions: The relationship has been established between the clinical features of late-life depressions and changes in the activity of enzymes of energy, antioxidant and glutamate metabolism. It was revealed that the type of metabolism with "reduced" and "disharmonious" activity of these enzymes corresponds to the parameters of late and early manifesting depression. Thus, the clinical heterogeneity of late-life depression is closely related to different neurobiochemical types of metabolism.

Disclosure of Interest: None Declared