Results: There was a positive relationship between religiousness and life satisfaction of the depressed patients (r = .608, p= .001). There was also a significant relationship between religiosity and anxiety level (r = - .548, p < .001). However there was no significant difference between male and female patients with regard to their religiousness (t= .149, p= .882).
Conclusions: The findings indicate that while there is a significant relationship between life satisfaction, level of anxiety and religiousness of the patients, the gender of the patients has no impact on the religiosity of participants.

Keywords: Life satisfaction; Depression; Religiosity

EPP0525

Dysthymia through time: A review

M.T. Valadas[1]* and R. Mota Freitas[2]

[1]Serviço De Psiquiatria, Unidade Local de Saúde do Baixo Alentejo, Beja, Portugal and [2]Departamento De Psiquiatria E Saúde Mental, Hospital do Espírito Santo de Évora, Évora, Portugal

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.883

Introduction: Dysthymia is defined in ICD-10 as a chronic depression of mood which does not currently fulfil the criteria for recurrent depressive disorder, mild or moderate severity, in terms of either severity or duration of individual episodes. Although it only entered the psychiatric classifications in DSM-III and ICD-10, this syndrome has been a subject of several changes in conceptualization and classification.
Objectives: We aim to perform an historical review on dysthymia and related concepts.
Methods: We performed an updated review in the PubMed database using the terms "dysthymia", "dysthymic disorder", "persistent depressive disorder", "neurotic depression" and "depressive personality". The included articles were selected by title and abstract. We also consulted reference textbooks.
Results: Depressive symptoms have been recognized since Antiquity, however, depressive disorders with a chronic course were only conceptualized in the 1970s. Dysthymia represents the confluence of older concepts, including neurotic depression and depressive personality and entered the psychiatric classifications in DSM-III and ICD-10. Presently, this syndrome is classified as persistent depressive disorder (dysthymia) in DSM-5 and named dysthymic disorder in ICD-11.
Conclusions: The concepts regarding mental illness and psychiatric diagnoses are constantly evolving. Having knowledge about historical concepts is essential for a clear communication among psychiatrists, adding to the differential diagnosis process and improving patient care.

Keyword: Dysthymia

EPP0526

Depression and hypothyroidism: Literature review and case report.

P. Coucheiro Limeres[1]*, B. De La Torre Cruz[2], A. Cerame Del Campo[1] and A. Franco Soler[1]

[1]Psychiatry, Instituto Psiquiatrico José Germain, Leganés, Spain and [2]Psychology, Hospital Infanta Cristina, Parla, Spain

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.884

Introduction: Multiple neuroendocrine disorders can present themselves through diverse psychiatric symptoms. In the case of hypothyroidism it can manifest itself through mood disorders that will require a comprehensive differential diagnosis.
Objectives: We present a case report and a review of the relevant literature about the relation between mood disorders and hypothyroidism.
Methods: We present the case of a 56-year-old man with no prior psychiatric record who concurring with a grieving process, developed a depressed mood, fatigue, decreased daily activity, and home isolation for months of evolution. He was diagnosed of hypothyroidism and treated with levotiroxine. It was necessary to boost hormonal treatment with antidepressant drugs due to the persistence of the symptoms after the resolution of the hormonal deficit.
Results: The relationship of depression in patients with overt hypothyroidism is widely recognized. Common alterations to both disorders that could make their diagnosis difficult have been observed: existence of psychomotor slowing, attentional and executive disturbance, anxiety, asthenia, weight gain, depressed mood or bradypsychia among others. In the case of subclinical hypothyroidism, certain neuropsychiatric disorders have been linked without having conclusive evidence.
Conclusions: An early screening of thyroid function at the onset of psychiatric symptoms in individuals without prior psychiatric record is essential in the provision of adequate treatment. Clinical improvement has been seen with hormone replacement therapy alone. However, in up to 10% of patients it becomes insufficient, being necessary to complete it with antidepressant drugs for the complete resolution of the condition.

Keywords: hypothyroidism; Depression; mood disorder

EPP0527

Investigation depression prevalence and related effective factors among students at health faculty isfahan university 2019, Iran

M. Aboutalebi[1], G. Mehvari[2]* and E. Heidari[1]

[1]Psychiatry, University, Isfahan, Iran and [2]Psychology, Isfahan University, Isfahan, Iran

*Corresponding author.
doi: 10.1192/j.eurpsy.2021.885

Introduction: The incidence of depression is associated with decreased social, occupational, and educational performance.
Objectives: The aim of this study was assessing the prevalence of depression and its related effective factors among students at health faculty at Isfahan University of Medical Sciences in 2019.
Methods: In this cross-sectional study 177 students were included randomly. The Beak test included 21 questions were applied to collect data. Data were analyzed by SPSS software (version 22) and were presented as descriptive statistics and analyses included One-way analysis of variance, t-test and correlation Pearson.
Results: The mean and standard deviation of the age of students was 22.15±3.88 years. More than 80% of students experienced some