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phase2 as compared to 8.24% in phase1 (p<0.00). Those aged 50 years and above (vs 21-34 years) (p<0.02), highest educational attainment of primary school (vs University) (p<0.05), being economically inactive (vs employed) (p< 0.01), having mild levels of anxiety (p<0.007) and having severe levels of depression, anxiety or, stress (p<0.005) was seen to be significantly associated with insomnia.

Conclusions: Insomnia prevalence rose from 8.24% in phase1 to 8.83% in phase2 and was significantly associated with anxiety disorder, psychological distress, and perceived stress among Singapore residents in both phases. These findings could be ascribed to the failure in re-establishment of pre-COVID-19 pandemic norms, social situations and working dynamics that might have led to sleep curtailment and insomnia. Study findings can be utilised to design effective targeted interventions like cognitive behavioural therapy, therapist assisted relaxation and meditation programs to improve sleep and reduce psychological distress. Mentioned interventions can be delivered via smartphone applications enabling easy access, monitoring, delivery, and utilization by the vulnerable groups.

Disclosure of Interest: None Declared

Depressive Disorders

EPP125

Investigating amygdala habituation in major depressive disorder: an fMRI study in UK Biobank

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Introduction: Major depressive disorder (MDD) is a severe psychiatric condition with a high risk of suicide. Research on MDD and suicidality has identified structural and functional abnormalities in the cortico-limbic network as candidate biomarkers, but little is known about the temporal dynamics of these brain regions. Recently, abnormal amygdala habituation to emotional stimuli has been highlighted as a reliable fMRI phenotype linked to emotional dysregulation and increased suicide risk.

Objectives: Our study aimed to assess amygdala habituation to emotional stimuli in MDD and explore differences between suicide attempters (SA) and non-attempters (nSA). Additionally, we examined the relationship between amygdala habituation and depressive symptoms.

Methods: 414 MDD patients (239 SA, 175 nSA) selected from the UK Biobank underwent fMRI during a block-designed emotion processing task, including faces and shapes conditions. We obtained bilateral amygdala activation for each block using FSL. Habituation was quantified using two methods: the regression approach (REG) and First minus Last block (FmL). One sample T-tests were used to investigate whether habituation rates

significantly differed from zero. Group differences were analysed using Mann-Whitney U-tests. Generalized linear models (GLM) were applied to examine relationships between habituation and depression severity, controlling for age, sex, group (SA vs. nSA), and handedness.

Results: In both MDD and SA groups, no significant habituation was observed for either emotional or non-emotional stimuli (p_{FDR} >.05). However, the nSA group showed significantly positive habituation rates for left amygdala in both conditions and for right amygdala in faces condition using REG (p_{FDR} <.05), suggesting a possible sensitization process. Moreover, nSA showed significantly higher habituation rates than SA in all conditions with REG (p_{FDR} <.01). GLM analyses revealed no significant associations with depression severity.

Conclusions: Our results suggest that MDD is characterized by a lack of amygdala habituation to emotional stimuli, potentially offering new insights into its pathophysiology. This biomarker may help in developing novel therapeutic strategies targeting the amygdala and its regulation within the cortico-limbic system.

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EPP126

Is there a risk of addiction to ketamine during the treatment of depression? A systematic review of available literature

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Introduction: Depression is a leading cause of disability globally, and while conventional treatments, such as antidepressants and psychological therapy, benefit many patients, a significant proportion fail to achieve symptom relief. Ketamine has demonstrated both rapid and sustained efficacy in treating depression, especially in treatment-resistant cases. However, concerns regarding the addictive potential of ketamine during long-term depression treatment persist among clinicians.

Objectives: The review aimed to assess the prevalence of addiction phenomena associated with ketamine treatment of depression in adult populations.

Methods: The review followed PRISMA guidelines and was preregistered on PROSPERO (CD42023435468). A comprehensive search was conducted in Medline, Embase, PsycInfo and Global Health databases, with additional relevant studies identified through reference lists. Data extraction and study selection were performed by two independent reviewers. Risk of bias was assessed using appropriate tools based on study design.

Results: Sixteen studies were included, comprising six randomised controlled trials, three single-arm open-label studies, one retrospective study, three case series and three case reports, for a total of 2174 patients. The studies employed various routes of administration, including intravenous, intramuscular, intranasal, oral and sublingual. Ketamine was administered in the racemic