

EPV0600**Early real-life evaluation of the efficacy of esketamine in resistant depressive disorder**

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Introduction: The efficacy and of current antidepressants is insufficient. Esketamine, a new antidepressant administered by nasal route, is available since 2019 in the management of resistant characterized depressive episodes.

Objectives: To evaluate the response profile of patients to Esketamine in our institution specialized in mental health.

Methods: We included all patients treated with Esketamine in our institution from November 2019 to September 2021. We collected efficacy and tolerability data using the computerized and paper patient record, prescribing support software, and nursing staff.

Results: Since 2019, we treated 11 patients with Esketamine in combination with an antidepressant as indicated in the MA. Two patients from the 11 were found resistant, three discontinued due to adverse events, four relapsed after an initial clinical response, and two were still ongoing at the end of the study.

Conclusions: Despite an initial and rapid response, our study does not highlight any long-term efficacy of Esketamine in resistant depressive disorder. This highlights the fact that its use in the acute phase of depression or earlier in the management strategy could be a good alternative because of its rapid onset of action. Esketamine was initiated as a last line therapy, which may represent a bias in the evaluation of the molecule, as the later the depression is treated, the lower the response rate. The place of Esketamine in the therapeutic strategy is not yet well determined due to a lack of hindsight, and the question of pharmacological tolerance and dependence on the molecule arises.

Disclosure: No significant relationships.

Keywords: esketamine; therapeutic strategy; resistant depressive disorder; antidepressant

EPV0599**Bright Light Therapy for MDD in Children and Adolescents: a narrative review of literature**

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Introduction: Major Depressive Disorder (MDD) is a common mood disorder diagnosed in children and adolescents. Bright light therapy has been effective for seasonal affective disorders, however its role in the treatment of MDD is under studied.

Objectives: Our objective is to evaluate if bright light therapy (BLT) is a practical approach in treating Child and Adolescents having MDD.

Methods: We performed an extensive literature search using a wide range of MeSH terms in PubMed, PubMed Central and Google Scholar. We reviewed the literature for studies (published between 1983-2021) assessing the efficacy of BLT in the treatment of MDD in children and adolescents.

Results: The final search results yielded 8 randomized clinical trials and 1 case report from 1983 to 2021. BLT showed a superior effect in children and adolescents with MDD compared to the control group in the majority of the randomized trials and a case report. In six studies BLT showed good effect, however in a study by Magnusson et al. and Sonis et al., found a milder degree of improvement in depression symptoms when compared to the control group. In the majority of the studies, patients' age range was 7 years 18 and in most of the studies, patients were not on antidepressants.

Conclusions: The use of BLT in children and adolescents suffering from MDD can be a promising alternative method of biological treatment, which is effective as well as well tolerated. Future long-term studies on large sample size are necessary in this field.

Disclosure: No significant relationships.

Keywords: MDD; Bright light therapy

EPV0600**Relation between Vitamin D level and severity, symptomatology and cognitive dysfunction of Major Depressive Disorder - A sample of Egyptian patients**

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Introduction: Vitamin D helps in the regulation of neurotransmission and neuroprotection. Therefore, vitamin D deficiency might lead to inactivated receptors and may result in depression.

Objectives: The study assessed the relation between serum level of vitamin D and severity, symptomatology and cognitive dysfunction of Major Depressive Disorder (MDD) in a sample of Egyptian patients.

Methods: Serum levels of 25-hydroxy vitamin D were measured with electro-chemiluminescence binding assay technique in 75 patients with major depressive disorder. Patients were recruited from Psychiatry and Addiction Hospital, Kasr Al Ainyy outpatient clinic. Patients were subjected to the Structured Clinical Interview for DSM-IV Axis I Disorders (SCID), Hamilton depression scale (HAM-D), Mini-mental status examination (MMSE), Wechsler memory subtests (story A and paired associate learning test (PALT)), Benton visual retention test (BVRT) and Trail B test.

Results: 94.6% of patients had vitamin D deficiency. There was no significant correlation between levels of vitamin D and severity of depression according to HAM-D. Regarding symptoms of depression, there was a statistically significant difference between levels of vitamin D, being more deficient with decreased concentration, decreased libido and menstrual disturbances. There was no statistically significant correlation between level of vitamin D and cognitive functions tests.