

protocol (both H1 and H7 coils) to be both safe and effective in decreasing suicidality intensity and depression symptoms among inpatients with severe mental disorders accompanied by suicidality. Further studies are needed to differentiate H1 and H7 coils effectiveness in different depression sub-types and common psychiatric comorbidities.

Disclosure of Interest: None Declared

EPV0609

Evaluating the relation between trait anxiety and stressful life events: implications for stress-induced depression vulnerability

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Introduction: Major Depressive Disorder (MDD) significantly impacts global disability and quality of life. Some variables such as the trait anxiety and experiencing stressful life events (SLEs) are usually related to the MDD. However, the relationship between these variables in depression needs further investigation. Emerging research suggests the STAI-trait could be a nonspecific measure of negative effect and increase susceptibility to stress-induced depression.

Objectives: This study assesses the State-Trait Anxiety Inventory (STAI) trait scores and SLEs, depressive symptoms, outcome and functionality in MDD patients, with the hypothesis that STAI-trait may predispose individuals to stress-induced depression.

Methods: A prospective observational study was conducted with 25 MDD patients recruited at Hospital Universitari de Bellvitge. The STAI-trait and SLE exposure were measured during the initial visit. Depression symptom and outcome variables were assessed in three sequential clinical evaluations.

Results: Preliminary findings show a significant association between anxiety trait and SLEs, high STAI-trait scores correlated positively with increased SLEs. This, correlating with more severe MDD symptoms and a complex disease course.

Conclusions: These findings support the notion of the STAI-trait as a possible mediator between life stressors and depression. They highlight that increased STAI-trait anxiety might lead to greater vulnerability to stress and its potentially depressive effects, underscoring the need to consider this trait in clinical practice and the development of preventive strategies.

Disclosure of Interest: None Declared

EPV0610

Motives and Goals for Sports and Exercise Therapy during Treatment of Depression

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Introduction: A growing body of evidence suggests that physical activity can be an effective treatment for depression. In consideration of individual conditions, Sports and Exercise Therapy may be used as standalone or complementary treatment during partial or full-time inpatient treatment. However, current data indicate that only a minority of patients make use of it during the course of their treatment. The beneficial health effects of exercise on mental health can only be realized if the exercise is actually undertaken. Therefore, further research is required on the motivational psychological aspects of participation in Sports and Exercise Therapy. It can be assumed that it is crucial to consider the individual patient preferences when initiating and sustaining physical activity. Moreover, there are notable differences between men and women in terms of their motivation for engaging in exercise.

Objectives: The present study examines gender-based differences in the motivation underlying the participation in Sports and Exercise Therapy during the course of inpatient treatment for depression, whether on a partial or full-time basis.

Methods: In a psychotherapeutic and psychosomatic hospital, motives for Sports and Exercise Therapy of female and male (age 35-64) patients with a primary diagnosis of depression were recorded using the Bernese Motive and Goal Inventory in Leisure and Health Sports. The motives analysed include contact, body/appearance, competition/performance, distraction/catharsis, health, fitness and aesthetics. The survey was conducted within seven days of admission to either partial or full-time inpatient treatment setting.

Results: The total number of patients included in the analysis was 140, comprising 65.0% male (mean-age=48.0, 21.0% full-time treatment) and 35.0% female (mean-age=50.7, 43.0% full-time treatment). The most important motives for both men and women are health (M male=4.29, M female=4.37), fitness (M male=4.20, M female=4.20) and distraction/catharsis (M male=3.72, M female=3.80) due to the highest mean scores. Compared to women (M=1.60, SD=0.77) men (M=2.19, SD=1.93) reported significantly higher mean score for the competition/performance motive (U-test, $z=3.987$, $p<.001$). No further significant gender differences were identified.

Conclusions: Significant gender differences were found only for the motive competition/ performance, despite this motive rated lowest on average. The absence of further gender differences may be due to the fact that gender differences may be of less importance for Sports and Exercise Therapy in the treatment context. On average health, fitness, and distraction/ catharsis were rated highest by both genders. This is consistent with typical symptoms during depression, which involve distraction from negative thoughts as well as recovering physical fitness to cope with everyday life. All authors of this study declare that they have no conflicts of interest.

Disclosure of Interest: None Declared

EPV0611

Clinical Features and Severe Outcomes of Depressive Disorders among Healthcare Workers

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Introduction: Depressive disorders among healthcare workers (HCWs) exhibit a range of clinical manifestations, from mild to severe forms, leading to significant consequences such as hospitalization, extended sick leave, and suicide attempts. Understanding these clinical features is essential for the implementation of effective mental health interventions and support services.

Objectives: This study aims to analyze the clinical features of depressive disorders among HCWs, and to assess the relationships between these factors.

Methods: A retrospective descriptive study was conducted over an 11-year period on HCWs in Sousse, Tunisia, who took long-term sick leave for depressive disorders. Data were collected from medical records, and completed with a telephone questionnaire.

Results: Out of 650 cases examined, 48% were classified as having severe depression, while 50% experienced moderate depression, and 2% had mild forms. Anxiety was the predominant clinical feature, occurring in 71.4% of cases and showing a significant correlation with depression severity ($p = 0.001$). Melancholic features were identified in 33% of the cohort and were also significantly linked to severe depression ($p = 0.005$). Hospitalization due to depression was necessary for 11.2% of cases, with 4.2% requiring multiple hospitalizations; notably, all hospitalized patients exhibited severe depression ($p = 0.001$). Additionally, 1.2% of the study population reported a history of suicide attempts, all of whom presented severe depression, although this finding did not attain statistical significance.

Conclusions: This study highlights the importance of understanding the clinical specifications of depressive disorders in HCWs, as severe forms are often associated with hospitalizations and a higher risk of suicide attempts. The results emphasize the need for early intervention and targeted support strategies to address these severe outcomes.

Disclosure of Interest: None Declared

EPV0612

Limited Changes in Red Blood Cell Parameters after Probiotic Supplementation in Depressive Individuals: Insights from a Secondary Analysis of the Pro-Demet RCT

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Introduction: There is an ongoing need to explore new treatment options not just for depression, but also for its associated conditions. Depression often coexists with hematologic health issues, especially anemia, and both can be influenced by factors such as inflammation and imbalances in gut microbiota. Therefore, investigating interventions that target microbiota holds promise for developing safe and effective adjunctive therapies for both depression and its related disorders.

Objectives: The main objective of this secondary analysis was to evaluate the impact of probiotic supplementation on parameters related to red blood cells in individuals suffering from depressive

disorders. The secondary goal was to evaluate several potential pretreatment determinants of probiotic activity on RBC, such as dietary habits, inflammatory or metabolic condition, severity and dimensions of psychiatric symptoms, and taken medications. The third goal was to evaluate probiotics' effects on RBC parameters in addition to their effectiveness in treating depression.

Methods: The parent study was a two-arm, 60-day, prospective, randomized, double-blind, controlled study involving eighty-nine participants. The probiotic formulation used in the trial included *Lactobacillus helveticus* Rosell®-52 and *Bifidobacterium longum* Rosell®-175. The current analysis assessed changes in red blood cells-related markers following the intervention using the X^2 test. Linear regression and two-way ANOVA analyses were performed to assess the effects of all major clinical variables on the changes (post- minus pre- intervention values) of RBC parameters.

Results: Probiotic intake did not significantly alter the levels of red blood cell parameters, including red blood cell count, hematocrit, hemoglobin, mean corpuscular volume, mean corpuscular hemoglobin concentration, and red cell distribution width, in comparison to placebo.

None of the linear regression, nor ANOVA models were statistically significant.

In the PLC group, increases in RBC counts and HCT levels were associated with a deterioration in self-assessed depressive and anxiety symptoms. Furthermore, this group also exhibited a positive correlation between MCH and MCHC changes and the differences in MADRS score.

Conclusions: Despite the potential benefits of probiotics in treating anemia, our study found limited evidence of significant changes in red blood cell parameters following probiotic supplementation. However, the precise details regarding the clinical sample characteristics, intervention duration, dosage, and specific probiotic strain used are not fully elucidated.

But, probiotic supplementation appeared to may help prevent some alterations in RBC and HCT levels, as well as in MCH and MCHC in depressed individuals.

ClinicalTrials.gov identifier: NCT04756544.

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EPV0613

Efficacy of Collimated Light Therapy for Seasonal Affective Disorder: study protocol

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Introduction: Light therapy is a treatment that involves daily exposure to bright light. It is most commonly used to treat seasonal affective disorder (SAD). The standard light therapy regimen for SAD typically involves sitting in front of a light box that emits 10,000 lux of light at a distance of 20 cm from the eyes for 30 minutes per day, preferably in the morning. Sandkühler et al. suggested that increasing the illuminance in light therapy, using a Bright, whole-ROom, All-Day (BROAD) approach, may enhance its effectiveness. Both the standard light therapy regimen and BROAD light therapy involve radiant light sources, which emit light that disperses quickly and produces shadows that vary in size