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Conclusions: The results revealed that overexpression of C.207 induces a depressive-resistant behavioural phenotype. These results point out the cannabinoid C.207 as a potential target in the treatment of depression-related disorders.

P-02-014
A specific memory profile in depression remitters following electroconvulsive therapy: Preliminary findings

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Objectives: Remitted depression is frequently associated with persistent memory dysfunction in pharmacologically treated patients. Anterograde, retrograde, and semantic memory deficits following electroconvulsive therapy (ECT) are also consistently reported. However, the memory profile of depression remitters after ECT has not been specifically studied. We aimed to compare memory function in remitters and nonremitters from depression after ECT. Secondly, we explored possible relationships between variables where specific memory impairments were identified.

Methods: This prospective study was conducted in patients with Major Depressive Disorder (MDD) treated with bilateral or high-dose right unilateral ECT. Depressive symptoms were assessed with the 24-item Hamilton Rating Scale for Depression (HRSD). Remission was defined as HRSD score of 10 or less. Memory function was assessed at both baseline and following end of ECT with Buschke Selective Reminding Test (BSRT), Autobiographical Memory Interview (AMI-SF), Impaired Pseudoclinical Events Questionnaire (IPEQ), and Semantic Fluency. Remitters were compared to nonremitters on all memory variables by t-tests with Bonferroni corrections for multiple comparisons. Exploratory correlation analyses were conducted to investigate possible relationships between memory variables.

Results: Remitters (n=8) and nonremitters (n=9) showed comparable age and baseline HRSD score. Remitters performed significantly better than nonremitters on Semantic Fluency at baseline (p=0.012) and on AMI-SF after ECT (p=0.03). No other significant difference was observed between the two groups. After ECT, positive correlations were found between IPEQ-previous-year scores and BSRT learning (p=0.03), while Semantic Fluency correlated positively with IPEQ-5-previous-years (p=0.01), IPEQ-10-previous-years (p=0.05), and AMI-SF (p=0.05).

Conclusions: At both baseline and end of ECT, remitters and nonremitters showed comparable levels of functioning with regards to anterograde memory and retrograde memory for Impersonal events. However, remitters showed better baseline semantic memory and their autobiographical memory was less affected by ECT. Retrograde memory function appeared related to semantic memory, but not to learning abilities in depressive patients treated with ECT.

P-02-015
Prevalence of perinatal depression in Portuguese women preliminary results

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Objectives: To determine the prevalence of depressive disorders in a community-based sample of pregnant and postpartum Portuguese women.

Methods: To date 446 women in their third trimester of pregnancy (M=32.57 weeks of gestation; SD=3.470), mean age 29.78 years (SD=4.498) and 454 three months postpartum women (M=13.07 weeks post-partum; SD=1.880), mean age 30.52 (SD=4.176), were evaluated. Women who were waiting for their prenatal/postnatal medical appointment at their Local Health Medical Centers were invited to participate. After their written consent, all women were interviewed (face-to-face) using the Diagnostic Interview for Genetic Studies Mood Disorders Section which assesses the presence of signs and symptoms according to a number of different diagnostic systems. Operational Criteria Checklist for Psychotic Illness (OPCRIT) was completed and data from this checklist were entered in the software system to generate diagnoses according to DSM-IV and ICD-10 criteria.

Results: In pregnancy the prevalence of major depressive disorder (MDD) was 1.3% and the prevalence of depression (MDD), ODD-10 was 3.1% (mild depression, 7%; moderate depression, 7%; mild depression with somatic syndromes, 4%; moderate depression with somatic syndromes, 1%; severe depression without psychotic symptoms, 2%). In the postpartum these percentages were 3.9% and 4.7%, respectively (mild depression, 1.9%; moderate depression, 2%; mild depression with somatic syndromes, 2%; moderate depression with somatic syndromes, 1.7%; severe depression without psychotic symptoms, 6%).

Conclusions: In Portuguese perinatal women the prevalence of depressive disorders was lower than the figures recently found in a rigorous meta-analysis (Gamez et al., 2005). To our knowledge, this is the first study presenting prevalence rates of perinatal depression using a polydiagnostic approach. *Data for this study were drawn from a research project on Postpartum Depression and Sleep, funded by FCT (POCI/SAU591/57068/2004).

P-02-016
Efficacy and Safety of Desvenlafaxine 50 and 100 mg/d in the Treatment of Major Depressive Disorder: Results From 2 Placebo-Controlled Studies

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Objectives: To assess the efficacy of 50- and 100-mg doses of the serotonin-norepinephrine reuptake inhibitor (SNRI) desvenlafaxine (administered as desvenlafaxine succinate) in the treatment of major depressive disorder (MDD).

Methods: Two identically designed, multicenter, randomized, double-blind, placebo-controlled studies were conducted. One study took place in the United States (US) and the other was international (INT, European Union and South Africa). Participants were ≥18 years of age and met criteria for MDD per the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, with a 17-item Hamilton Rating Scale for Depression (HAMD-17) total score ≥20 at screening and baseline. Patients were randomly assigned to treatment groups, which included desvenlafaxine 50 mg/d, desvenlafaxine 100 mg/d, or placebo. Treatment was administered for 8 weeks (including ECT) in the 50-mg/d titration period for the 100-mg/d group. The primary efficacy variable was change from baseline on the HAMD-17 at the final on-therapy evaluation. Analysis of covariance model was used for the efficacy analysis.

Results: In the US study (n=447), compared with placebo, a significant difference was observed in the adjusted least-squares mean change from baseline on the HAMD-17 in the 50-mg/d group (−11.5 vs. −9.5; P=0.002; 100-mg/d: −13.7; P<0.001) compared with placebo (−10.7). Each dose of desvenlafaxine was generally well tolerated and adverse events were consistent with the SNRI class.

Conclusions: These results demonstrate the efficacy of desvenlafaxine 50 and 100 mg/d in the treatment of MDD.

P-02-017
Analysing depression using DASS-21 scale among diabetes in Malaysia

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Objectives: The study was aimed to verify the correlation and relationship that exist between depression and diabetes, through analysing demographic and disease related variables that may predict depression symptoms among diabetes patients.
P-02-018
Depression and rheumatoid arthritis — case report
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Objectives: There are 127 forms of arthritis, where disorders range from relative minor, to the serious infections such as rheumatoid arthritis (RA), where 37% of patients experience reduced work ability. Creed and Ash (1992) have concluded that RA major depression prevalence ranges 17-22%, based on the studies using structured diagnostic interviews. A female patient case report: T. J., 49 years, married, divorced, has one child, RA patient for 20 years, with visible joint deformations of feet and hands, total working disability for 12 years, when the period when she was tied to wheelchair. Nineteen years earlier she was cured of TBC pulmonum, and first depression symptoms date from the march 2008.

Methods: The standard psychiatric interviews are done along with Hamilton Depression Rating Scale (HDRS). At the same time, anamnestic data are collected on RA and TBC pulmonum illness and took the existing deformities photographs, along with the appropriate medical documentation.

Results: T. J. have had all medical treatments outside the hospital utilizing, that is, in her flat. At first interview, HDRS scale score 24. It is diagnostically recognized as F 32.2 (Depressive episode), and in therapy included escitalopram 5mg and alprazolam 0.5mg/day, besides the RA medications. The next interview, two weeks later gave HDRS score 12; escitalopram raised to 10mg, alprazolam raised also to 0.75mg/day. The third interview made 6 weeks after the first one, gave HDRS score of 6, so previous therapy is continued without corrections.

Conclusions: Early recognizing of the correct diagnose of the RA depression, as well as adequate therapy, effect in great extent to the patient wellness and his life quality. In this case, a late depression appearance is reported (depressive exhaustion) at RA, and showed that the introduction of therapy resulted in reduced pain and elimination of anesthetic.

P-02-019
The study of the relationship between depression and trust in god among undergraduate students
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P-02-020
Revealing of psychological problems at women
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