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The link between two very common illnesses, hypertension and depression, has not yet been adequately examined.

The aim of this research was to determine if the taking of antidepressive therapy in combination with antihypertensive therapy leads to improved blood pressure regulation.

Methods: The research was conducted in two family medicine practices. By using the Beck depression inventory and SCID module for depression among the patients with hypertension and no previous psychiatric history, a group with elevated depression was recognised. Half of them were taking both antihypertensive and antidepressive therapy over the course of 24 weeks while the other half was taking antihypertensive therapy only.

Results: Out of 452 patients with arterial hypertension, 134 (29.64%) have been found with elevated depression. Patients with both arterial hypertension and depression had significantly higher values of systolic blood pressure (155/138 mmHg, $Z=9.77$, $p<0.001$), and significantly higher values of diastolic blood pressure (88/81 mmHg, $Z=10.57$, $p<0.001$) comparing to nondepressive patients with hypertension. 73 patients were subjected to antidepressive therapy along with the antihypertensives. The controls were 61 patients which were taking antihypertensives only. After the 24 weeks, the 73 patients had significantly lower values of the systolic (128/155 mmHg, $Z=7.42$, $p<0.001$) and diastolic blood pressure (73/90 mmHg, $Z=7.36$, $p<0.001$) comparing to first measurement while that was not the case in the control group.

P0193

Amygdala-Orbitofrontal connectivity and 5-HTT genotype effects in healthy controls and patients with major depression

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Amygdala functions and reactivity have been identified to play a major role in mood disorders and anxiety. A polymorphism of the human serotonin transporter gene (SCL6A4) has been associated with serotonin transporter expression and with processing of aversive stimuli in the amygdala. There is converging evidence that SCL6A4 genotype accounts for about 30% of the total variance in amygdala response during the presentation of aversive but not affectively positive visual stimuli, which were equally salient. S-allele carriers also showed stronger prefrontal-amygdala connectivity. This suggests that increased amygdala responses in s-allele carriers are related to altered serotonergic modulation of prefrontal afferents within the amygdala. In patients with major depression amygdala activation to aversive stimuli and prefrontal connectivity may be dysfunctional. This hypothesis was tested in 20 patients with major depression and 20 age-matched healthy controls.

Results will be discussed with respect to genotype effects on limbic activation and connectivity.

P0194

Differences between patients with depressive disorder and healthy controls in relation to salivary Cortisol, psychopathology and results in neuropsychological testing

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The hypothalamic-pituitary-adrenal axis (HPA) is highly relevant in depressive disorders. Some investigations suggest that the HPA axis is altered in depressive disorders as indicated by higher awakening cortisol levels. There are also some results that show relations between cortisol level, psychopathology and neuropsychological performance. However, a systematic investigation of this relationship with a large and matched sample of patients and controls is missing. We tested 59 patients with depressive disorders and 75 healthy controls with tasks from the neuropsychological CANTAB and NEUROBAT battery. Before and after these tests we collected salivary samples. The study ended followed with an extensive measurement of psychopathology (e. g. BDI, HAM-D) and mood (visual analog scales).

The study revealed a significant relationship between salivary cortisol and results in tasks to executive function in the neuropsychological assessment in the control group but not in the patient group. There was no relationship between salivary cortisol and other cognitive performances. While patients with higher salivary cortisol levels reported worse mood, higher salivary levels in healthy controls were associated with better mood. These results could be related to different stress levels and different expectations regarding the examination of the groups.

P0195

“Vulnerable personality” in women with postpartum depression

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Few studies have evaluated personality traits as a risk factor of postpartum depression (PPD). The Vulnerable Personality Style Questionnaire (VPSQ; Boyce et al. 2001), is a 9-item self-report scale developed to evaluate personality vulnerability to PPD with satisfactory psychometric properties. It assesses 9 personality dimensions: Coping, Nervy, Timidity, Sensitivity, Worrier, Obsessive, Volatility Organized and Expressive.

Objective: To study the vulnerable personality style in a Spanish postpartum sample.

Method: A case-control study: 145 PPD women visited at the Psychiatry Perinatal Unit were compared to 203 healthy women from a postpartum population based study. All women were assessed with the VPSQ (Spanish adaptation), the Edinburgh Postnatal Depression Scale and the Structured Clinical Interview (DSM-IV) axis I. Personality traits were evaluated after full clinical remission. The study was approved by the Institution board.

Results: Univariate analysis showed that women with PPD obtained higher scores ($p<.000$) in seven VPSQ personality dimensions: Coping, Nervy, Timidity, Sensitivity, Worrier, Obsessive, and Volatility, as well as the VPSQ total score ($p<.000$). Personal history of depression ($p<.000$) was also associated with PPD. In the logistic regression analysis; an increase of one point on the VPSQ total score increased the OR in 1.151 fold (95%CI:1.095-1.210) the association with PPD. Other variables associated were age and personal history of

depression. The Hosmer-Lemeshow test ($p=.706$) indicated the goodness-of-fit of the model.

Conclusions: Women with PPD had higher scores in the Vulnerable Personality Style Questionnaire. They were more nervous, timid, sensitive, obsessive, worried, angry and cope poorly than healthy postpartum women.

P0196

Suicide risk in junior high students: A look at Mexico City downtown

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Background and Aims: Literature about suicide behavior often shows equity between suicide attempt and deliberate self harm (DSH). The objective of this study is to differentiate suicide attempt from DSH regarding the frequency, methods used, reasons, and purposes.

Methods: Data were collected from 1,551 junior high school students from Mexico City Downtown (2003 and 2006 academic generations). The questionnaire included the CIP (Cédula de Indicadores Parasuicidas: Parasuicide Indicators Schedule), suicide ideation, depression, and others. Participation in the study was voluntary and anonymous.

Results: DSH overall prevalence was 5.8% male and 20.5% female, including 3.9% and 16.7% of ambivalent suicide attempt, and 0.7% and 6.1% of suicide attempt with death purpose. Most of the boys who attempted suicide used sharp objects. Reasons in both sexes were mostly related to interpersonal area, and the purpose was to stop suffering. The most frequent method used in DSH was sharp objects; reasons for boys were in the emotional area and in the interpersonal for girls. The purpose was continue living.

Conclusions: It is important to distinguish between suicide attempt and DSH to obtain more precise information about the problems and its characteristics. Results show that both of these are a considerable matter among adolescents; tough they have different characteristics, with a considerable suicide risk. Mental health promotion and attention must begin during elementary school in order to prevent more serious distress and illness during adolescence and adult age.

P0197

Description of the patients admitted in the detoxification unit of the Gregorio Marañón Hospital in Madrid in the year 2007

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The Hospital Gregorio Marañón of Madrid is one of the few centers in Spain which has a Detoxification Unit integrated in a Psychiatric Service within a General Hospital.

It has got six beds, one Psychiatrist, one nurse and one nurse assistant, and one occupational therapist.

This is a voluntary admission unit designed especially for drug abusers presenting health problems, since most of them are suffering liver diseases and many of these are under antiretroviral treatment for HIV.

Patients are sent from the Anti-drug Agency of the Community of Madrid whom centralizes all the medical and social resources of the drug dependency network: CAD, CAID (centres for integral attention to drug addicts), emergency social centers, detoxification units, therapeutic communities, support flats and the "metabus"(vehicle for distribution of methadone).

When our patients are discharged from the unit is also the Anti-drug Agency the sole responsible for seeking a place where they can continue their treatment.

The authors want to submit the data describing the patients treated in the Unit during 2007.

The variables that will be exposed are: gender, average age, average stay, number of patients in methadone maintenance program and drug-free program.

Porcentaje of each of the illegal substances, depending of them being in a MMP (methadone maintenance program) or DFP (drug free program): methadone, heroin, cocaine, cannabis, alcohol, benzodiazepine...and place they are derived to after leaving our unit (CAID, therapeutic community and/or support flats).

P0198

Personality traits in leader managers in Croatian health services

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Authors hypothesis is that a manager who makes critical decisions that could greatly influence the survival or health of the organization and its employees is in a way analogous to a gambler. This has never been investigated before from the aspect of the role of emotions and personal traits in making decisions in crisis conditions.

Aim: To assess the personality traits in managers in health services and to find out the similarities and differences between pathological gamblers and managers in health services. Subjects: 32 managers in health care services (20 female, 12 male) comprised physicians, economists and pharmacologists.

Methods: The psychological test PIE (Profile Index of Emotion) was applied to examine the emotional and personality profile of the subjects.

Results: There are similarities between personality traits of managers and gamblers in a way that they both have the lower self-control, they enter in the risk situations more than average people, they don't make long future plans, they have increased depressiveness and aggressiveness which in combination shows auto destructive behaviour.

Yet, there are also some prominent differences. Gamblers have disturbed impulse control, they are socially inhibited, they have lack of social skills and they are highly anxious as well as impulsive and they lack the trust towards people and managers are highly sociable and trustful.

The question remains whether the personality traits shown are hereditary or developed during the life according the situation.

P0199

Prevention of depression and anxiety in patients with acute coronary syndrome (DECARD)

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