OP-026 https://doi.org/10.5080/61upk.ozt445

AN INVESTIGATION OF THE RELATIONSHIPS BETWEEN DISSOCIATIVE EXPERIENCES, CHILDHOOD TRAUMA AND RUMINATION IN INDIVIDUALS DIAGNOSED WITH MAJOR DEPRESSIVE DISORDER

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BACKGROUND AND AIM: Major Depressive Disorder (MDD) is frequently accompanied by dissociative symptoms, anxiety, and maladaptive cognitive processes such as rumination. Childhood trauma and adulthood traumatic experiences have been suggested as contributors to dissociation and depressive severity. This study aimed to investigate the relationships between dissociative experiences, childhood trauma, rumination, and clinical characteristics in individuals diagnosed with MDD.

METHODS: (Ethics Committee Approval must be obtained and the number should be specified). The study included 157 patients diagnosed with MDD and 79 healthy controls. Patients with MDD were grouped according to their Dissociative Experiences Scale–Taxon (DES-T) scores. All participants completed a Case Report Form, Beck Depression Inventory (BDI), Beck Anxiety Inventory (BAI), Dissociative Experiences Scale (DES), Ruminative Thought Style Questionnaire (RTSQ), and Childhood Trauma Questionnaire (CTQ-28). Group comparisons, correlation analyses, and multiple regression analyses were performed. This study was approved by the Zonguldak Bülent Ecevit University Ethics Committee on April 9, 2025 (2025/07).

RESULTS: The dissociative MDD group had significantly lower income levels, younger age, earlier age at onset of MDD, and a higher frequency of adulthood trauma. This group also showed significantly higher BDI, BAI, RTSQ, DES, and CTQ-28 scores. BDI scores were positively correlated with dissociation across all groups. CTQ-28 scores were positively associated with dissociation but were not significantly related to BDI or RTSQ scores. BAI scores were positively correlated with all other clinical scales. Predictors of DES total scores were BAI, BDI, younger age, male sex, and family history of psychiatric illness. Predictors of RTSQ were BAI and BDI, whereas age and the presence of chronic medical illness were negative predictors. Predictors of BDI scores included DES total, CTQ-28, RTSQ, and age.9

CONCLUSIONS: Findings indicate the importance of assessing dissociative symptoms in patients presenting with severe depressive symptoms. In this group, anxiety and rumination levels, as well as childhood and adulthood trauma, age, and family psychiatric history, should be evaluated together.

Keywords: Adult trauma, childhood trauma, dissociative experiences, major depressive disorder, rumination