

Poster

2025年9月27日(土) 15:00 ~ 16:10  Poster Session (Foyer 1)**Poster 20**

[P-20-05] Mapping the geography of depressive symptoms and early maladaptive schemas: Comparative network analysis between major depressive disorder and bipolar disorder

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*Introduction:* Early maladaptive schemas (EMSs) are risk factors for depressive symptoms. However, the detailed process through which EMSs affect depressive symptoms remains unclear. We aimed to examine the associations among depressive symptoms and EMSs in patients with major depressive disorder (MDD) and bipolar disorder (BD), and compare these patterns. *Methods:* Two undirected networks were estimated for patients with MDD and BD. The node and bridge strength centralities were calculated in each network. The differences between the two networks were tested across four aspects: network structure, global strength, node centrality, and edge weight. *Results:* Several significant associations were observed within the depressive symptoms cluster and the EMSs cluster. Among the edges connecting the two clusters, only the edge connecting *feelings of worthlessness or guilt* and *defectiveness/shame* schema was significant in the MDD group (weight = .079, 95% CI = [.001, .157]). Only the edge connecting *suicidal ideation* and *defectiveness/shame* schema was significant in the BD group (weight = .087, 95% CI = [.026, .148]). *Feelings of worthlessness or guilt* and *suicidal ideation* exhibited high bridge strength centrality, and *defectiveness/shame* schema did so among EMSs. The differences between the two networks of the MDD and BD groups were not remarkable. *Conclusions:* Reciprocal causal relationships may be present among depressive symptoms and among the EMSs. Schema therapy addressing the *defectiveness/shame* schema or cognitive behavioral therapy may be effective for patients with both MDD and BD, considering the importance of the *defectiveness/shame* schema and two cognitive depressive symptoms in connecting depressive symptoms and EMSs.