lifestyles and smoking status. Particularly, high level of competitiveness appears to be related with healthier lifestyles. The use of short questions about self-perceived level of competitiveness, psychological tension and dependency can contribute to obtain additional interesting information when assessing health risk behaviours in adults.

P144-T | A healthy lifestyle score and the risk of depression

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Background: Depression is considered to be a multifactorial disease. There is evidence that a range of lifestyle factors are involved in the pathogenesis of depression and many of these factors can be modified for the potential prevention of depression. The aim of this study was to assess the association between a healthy-lifestyle score and the incidence of depression in the SUN (Seguimiento Universidad de Navarra) cohort study.

Methods: The SUN project is a dynamic prospective cohort of Spanish university graduates. We followed 15 093 participants initially free of any history of depression. Based on a score that was previously associated with lower risk of clinical cardiovascular events and based on the existing scientific evidence; we calculated a healthy-lifestyle score from 0 to 7 points, by giving one point to each of the following components: never smoking, physical activity (>20 METs-h/wk), Mediterranean diet adherence (≥4/8 points), low body mass index (≤22 kg/m^2), moderate alcohol intake (women 0·1–5 g/day, men 0·1–10 g/day), no binge drinking (never >5 drinks/day), and working (≥40 hour/wk).

Results: During a median of 10·4 years, we observed 794 incident cases of medically-diagnosed depression. The median age of participants was 36·7 years ±11·7 and 60% were women. The highest category (5–7 factors) showed a significant 21% relative reduction in the risk of developing depression compared to the lowest category (0–2 factors) (multivariable-adjusted hazard ratio = 0·79; 95% CI: 0·65–0·98) (*P* for trend = 0·021).

Conclusions: In this cohort of Spanish university graduates, adopting a healthy-lifestyle was associated with a lower risk of depression. This index including seven simple healthy lifestyle habits may be useful for a more integrative approach to depression prevention.

P145-T | Sugar-sweetened beverage consumption and incidence of breast cancer: the SUN project

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Background: Breast cancer (BC) incidence is increasing worldwide. The risk of BC duplicates each decade until the menopause and immediately upon it starts to decelerate. Although causes of BC are not fully understood, it has been suggested that higher insulin resistance may lead to an increased risk of BC. Among the dietary factors that can influence insulin resistance, sugar-sweetened beverages (SSB) have been related to a higher insulin resistance and type 2 diabetes. However, the association between SSB and BC has not been widely studied. Thus, we evaluated the association between baseline consumption of SSB and the incidence of BC among relatively young women in a cohort of Spanish university graduates.

Methods: We evaluated 10 709 middle-aged, Spanish female university graduates from the Seguimiento Universidad de Navarra (SUN) cohort, initially free of BC. SSB consumption was collected at baseline using a 136-item semi-quantitative food-frequency questionnaire. Incidence of BC was self-reported and then confirmed by a trained oncologist using medical records. We also consulted the National Death Index to identify deaths due to BC. We fitted Cox regression models to assess the relationship between categories of SSB consumption and the incidence of BC during follow-up. Stratified analyses by menopausal status were conducted.

Results: During a total of 107 126 person-years of follow-up, 83 incident cases of BC were confirmed. Among postmenopausal women, regular consumption of SSB was significantly associated with a greater risk of developing BC (Hazard ratio: 2·60; 95% confidence interval: 1·08, 6·27) in the fully adjusted model, compared to women who never or seldom consumed SSB. No association was found for