Assess the severity of affective symptoms in patients with TS, in comparison to patients with primary affective disorders (recurrent major depressive disorder, rMDD; bipolar affective disorder types I/II, BPD-I/II), and healthy controls.

**Method** Both patients with affective disorders and controls completed the Beck Depression Inventory (BDI)-IA, whilst patients with TS completed the BDI-II. Total BDI-II scores were transformed using an equipercentile equating method for converting raw total BDI-II to BDI-IA scores. Data from 14/21 items had corresponding anchor points between the two versions and were therefore suitable for analysis.

**Results** This cross-sectional study included N=3,066 participants: TS (N=65), rMDD (N=696), BPD-I (N=1515), BPD-II (N=497), and controls (N=293). Depressive symptoms did not show any association with ethnicity or age. Patients with TS scored significantly higher than healthy controls (P=<.001) for all relevant items. When comparing depression ratings between patients with TS and patients with primary affective disorders, total BDI scores in TS were not significantly different from BPD-I or BPD-II, but significantly lower than rMDD (P=.030). Specifically, patients with rMDD scored higher on the self-criticalness, libido, suicidality and anergia items (P=.003 - >.001). The TS group also showed statistically significant differences in BDI scores across gender, with female patients reporting higher scores (P=.013), particularly in the guilt, suicidality, crying, irritability and libido items (P=.047 - .002).

**Conclusion** Depression appears to be a prominent feature in TS and seems to have a different phenotype to that in rMDD. Female patients with TS present a particularly high risk to develop severe depressive symptoms. This has relevant clinical implications in terms of screening, management and prognosis of this patient population.