

Materials and Methods: The clinical structure of the depressive disorders was estimated in 44 outpatients (26 men and 18 women, mean age - 31,2) with frequent genital HSV recurrences (>6 per year). Depressive disorders were diagnosed with a help of psychopathological method and the following psychometric scales: HAM-D-21; CGI-S and SOFAS. The normal values for each scale are <7, >80 and ?2 respectively.

Results: Our screening data revealed depressive disorders in 32 of 44 patients. According to ICD-10 classification of Mental and Behavioural Disorders, recurrent depressive disorder, current episode mild [F33.0] was revealed in 15 patients (34,1%); recurrent depressive disorder, current episode moderate [F33.1] in 11 cases (25,0%) and dysthymia [F34.1] in 6 patients (13,6%).

Conclusion: These results testified that patients with genital herpes need psychiatric consultation. If an affective disorder is revealed a combined therapy should include both specific antiviral treatment and antidepressant therapy: Selective Serotonin Reuptake Inhibitors (SSRIs) or Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs).

P0246

The evidence base of complementary and alternative therapies in depression

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Background: Depression is one of the leading indications for using Complementary and Alternative Medicine (CAM). This paper reviews the evidence of efficacy of different types of CAM in depression with the aim of identifying the highest level of evidence for each approach.

Methods: We conducted literature searches restricted to the English language for studies on CAM as monotherapy in depression. All papers were reviewed by two researchers and the evidence was ranked according to a widely referenced hierarchy of evidence. Studies that addressed depressive states outside ICD and DSM based diagnoses of depressive disorders were excluded to ensure homogeneity.

Results: 19 papers formed the final review. We found Grade 1 evidence on the use of St. John's wort, Tryptophan/ 5-Hydroxytryptophan, S-adenosyl methionine, Folate, Inositol, Acupuncture and Exercise in Depressive disorders, none of which was conclusively positive. We found RCTs at the Grade 2 level on the use of Saffron (Herbal medicine), Complex Homoeopathy and Relaxation training in Depressive disorders, all of which showed inconclusive results. Other RCTs yielded unequivocally negative results. Studies below this level yielded inconclusive or negative results.

Limitations: Searches were restricted to the English language. Our list of CAM approaches may not have been comprehensive. We excluded studies on the use of CAM as adjunctive treatment and aimed to identify only the highest level of evidence.

Conclusions: None of the CAM studies show evidence of efficacy in depression according to the hierarchy of evidence.

P0247

Depression as consequence of war actions in Serbia in 1999

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Aim of study: Our investigation is an prospective analysis of group of patients treated in Primary Health Care Center "Savski venac", department of neuropsychiatry in Belgrade, Serbia. Thru the time period of 8 years we analyzed reactions connected with exposing to stress events which are consequence of war actions in Serbia in 1999, especially worsening of symptoms of depression until 2007 in patients with no history of mental illness.

Methods: Research included 100 patients from Belgrade, Serbia, average age group of 50 years and approximate equal number of male and female sex. They are divided in two groups in dependence of level of education. For examination we used: (1) original question mark – questions about reactions which frequently have people exposed to very stressful events, and (2) Hamilton Depressive Scale (HAMD)

Results: (1) Immediately after war actions in both groups are observed elements of PTSD; (2) in both groups during the time we have occurrence of depression, anxiety, raise of irritability, impulsivity, appearance of aggressiveness, suicidal tendencies, abuse of psychoactive products and alcohol with disorder of interpersonal relationships, disappointment in institutions of state and society ; (3) in 2007 are discovered significant increase of depressive score (HAMD) at 45% of tested patients without significant distinction between groups.

Conclusion: Stress events as consequence of war 1999 is the reason of appearance and worsening symptoms of depression thru the time period of 8 years.

P0248

Dinamic electrophysiological parameters in the depressive patients with the concomitant heart pathology

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The results of a clinical and epidemiological trial "Compass", concerning the depressions among the patients of general internal hospital, performed in 2002-2003 in 35 cities of Russia, showed that the diagnosis of depressive disorders in patients with cardiovascular disease is made in more than a half observations; moreover, the highest value is observed in the cases of chronic heart failure (61% of patients) and of the arterial hypertension (52%).

In this connection the special interest belongs to the detection of early signs of myocardial ischemia in the patients with depressive disorders by means of the new screening device "CardioVisor 06c" for the early detection of myocardial ischemia by the electrocardiogram at rest (Sula A.S., Ryabykina G.V., 2003). The world counterpart of this device is known as "HeartView 6S". This device is built upon the new technology of calculation and three-dimensional visualization of low-amplitude scattering of standard ECG-signal from the extremities. 31 patients (24 females and 7 males) from 18 to 55 years old, undergoing the medical treatment with the diagnosis of depressive disorder, were included in the study. The selection criteria of patients for this investigation were following: the presence of cardiovascular complaints or the cardiological diagnosis (essential or symptomatic arterial hypertension, mitral valve prolapse, vasomotor dyscrasia). The dynamic observation revealed, with the improving mental status in most patients, the relationship between the severity of

depressive symptoms and cardiovascular function changes recorded by means of instrumentation: the stronger are the depressive affections, the worse are the parameters “myocardium” and “rhythm”.

P0249

Clinical and dynamic characteristics of lingering Non-psychotic depression

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During last 40 years there are constant increase of depressive disorders in the population of many countries. Incidence of these disorders got the character of “big epidemy” and became one of the global problem for the world community. Psychogenic stressful factors, experienced by nearly every adult, have a principal role in development of these disorders. At the same time we have a tendency of forming lingering depressions, this fact shows us the urgency of study next important formation factors of lingering affective disorders - clinical factors, type of personality. The purpose of this investigation is a study of clinicopsychopathologic, typological features of patients with lingering non psychotic depression. The methods of this investigation include clinical method, personal inquirer of Leonhard, Lazarus’ indicator of coping-strategies. Patients with acute form of somatic disease and disorders of other registers didn’t take part in investigation. Evaluation of clinical syndroms of depression had displayed significant prevalence of astheno-adyamic, anxious and hypochondriacal depression. Most of the patients had a psychologic traumatic experience of interpersonal family relations. Analysis of individual typological features of personality had shown the prevalence of hysteroid and anxiously-sensitive accents of character. It had been discovered significant correlation between the type of personality and preferred coping-strategies in behaviour, realised as “looking-for social support”, “flight- avoidance” and “ranging”. Formation of lingering non psychotic depression is a multiple-factor mechanism. The components of this mechanism may be as clinical syndromic features so as definite type of personality with its coping-strategies and external factor of psychogenic nature.

P0250

Alcohol detoxification improves depressive symptomatology in alcohol dependent individuals

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Background and Aim: Alcohol abuse may result in symptoms of depression. The objective of this study was to investigate the effect of detoxification on depressive symptoms in alcohol abusing/dependent subjects

Methods: The sample comprised 240 alcohol dependent individuals (175 males, 65 females) who were treated either with sole psychotherapy or psychotherapy and pharmacotherapy as an adjunct. The Zung Depression Scale (ZDS) was used for the assessment of depressive symptoms. The scale was administered at the beginning and at the end of the detoxification period that lasted 4-6 weeks. T-test for paired samples was used for the comparison of Zung scores between the two time points.

Results: Mean age of subjects was 46.4 ± 11.1 years (male: 46.7 ± 11.3 , female: 45.6 ± 10.9) and mean alcohol consumption was 316.5 ± 218.7 gr/day, (male: 367.3 ± 223.9 , female: 151.8 ± 70.6 gr/day). Scores were indicative of severe symptoms of depression (score >70) before initiation of treatment. By the end of the detoxification period psychopathology significantly subsided (admission vs. discharge: 76.3 ± 5.8 vs. 35.7 ± 3.9 ; $p < .000$).

Conclusions: Alcohol abusing/dependent individuals exhibit severe depressive symptoms, as assessed through the ZDS. Following 4-6 weeks of detoxification these symptoms subside and reach normal levels. These results are in agreement with previous findings of our group with the use of Hamilton Depression Rating Scale as the assessment tool.

P0251

Schizophrenia patients with drug abuse perform better in CPT: One cross-sectional study in acute in-patients

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Background and Aims: The relationship between drug abuse and vulnerability for psychosis still remains insufficiently understood. A proportion of the schizophrenia syndrome could be due to drug abuse in the absence of genetic vulnerability. The objective is to test the association between drug abuse and attention endophenotype in schizophrenia.

Methods: One cross-sectional study was carried out in a sample of 70 schizophrenia in-patients in acute state. It was defined two groups of schizophrenia patients: with ($n=25$) and without ($n=45$) drug abuse. The attention endophenotype was measured using CPT (X version, d prime parameter). It was controlled for: general neuropsychological performance (Trail Making Test A and B, Stroop Test), symptoms (PANSS, SANS, SAPS), basic symptoms (FCQ-III), clinical global impression, functioning (GAF), treatment, extrapyramidal side effects and akathisia. After Z-score transformation, performance in CPT was compared between the two groups using the student’s t test. When necessary we used regression models for the adjustment of control variables.

Results: Schizophrenia patients with drug abuse had a better performance in CPT (effect size: 0.71; $p=0.004$). Both groups were comparable in terms of the control variables except for Trail Making A, but when controlling for this variable the difference remains significant. Nevertheless, Trail Making Test is linked to attention process, so the differences can be explained by the different performance in both groups.

Conclusions: Schizophrenia patients with drug abuse had less genetic vulnerability for the disease when using attention vulnerability markers. In this cases the use of abuse drugs probably have had important aetiological implications.

P0252

Quality of life in HIV patients with depression

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