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Body dysmorphic factors and mental health in people seeking rhinoplastic surgery

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Background and Aims: There has been increasing number of requests for cosmetic rhinoplastic surgery among Iranians in different age groups in recent years. One risk for those who undergo such plastic operations is the presence of body dysmorphic disorder (BDD) which might complicate the results and decrease the rate of satisfaction from surgery. This study was aimed to find the rate of BDD symptoms and mental problems in people demanding rhinoplastic surgery and a control group.

Methods: The scores of General Health Questionnaire (GHQ) and DCQ (Dysmorphic Concerns Questionnaire) were obtained for 50 people who were candidates for rhinoplastic surgery and the results were compared with normal control group.

Results: The total GHQ score ($p=0.0001$) and scores in anxiety ($p=0.009$), depression ($p=0.009$), and social dysfunction ($p<0.001$) sub-scales were higher among the study group compared with the control. Similarly, the DCQ score in the study group (10.67 ± 2.93) was obviously higher than the control group (2.54 ± 2.34) ($p=0.0001$). However, the score of somatisation sub-scale of GHQ ($p=0.06$) was not significantly different between the two groups.

Conclusions: Psychiatric evaluation in candidates of rhinoplastic surgery seems necessary to prevent unnecessary and repetitive surgical operations.

Keywords: Body Dysmorphic, Rhinoplasty, Mental, Depression, Anxiety

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A worldwide analysis of population structure and suicide risk

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Background and Aims: Suicide accounts for almost 2% of the deaths in the world, though the rates between countries vary considerably. Socio-economic factors play a significant role in mental well-being and the rate of suicide. There is a strong relationship between socio-economic development and the age-sex structure of a population with changes in one being reflected in changes in the other. Age-sex changes in a population associated with socio-economic development are typically, falling birth rate and increased life expectancy which changes the age ratios between young and old. This study investigated the relationship between population structure and reported rate of suicide.

Methods: Data were provided by US Census Bureau and WHO. Non-parametric correlation (Spearman's rho) was used to examine the relationship between population structure and reported rate of suicide. Initially, median age was used to describe population. In order to take into account the complexity of population age structure the data were described and indexed using the UNEX30 algorithm.

Results: A significant correlation was observed between the median age of the population and the rate of suicide (0.311 ; $p <$

0.001), but a higher level of correlation was observed between population structure and the reported rate of suicide (0.526 ; $p < 0.001$).

Conclusions: The findings support the hypothesis that the population age affects the reported rate of suicide, but more significantly, the age structure of the population shows a better relationship to the reported rate of suicide. This knowledge should be used to guide the direction of future research.

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Subthreshold visual stimulation in psychophysiological diagnosis of paraphilias

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Purpose: To compare various methods of visual stimulation (threshold and subthreshold) in psychophysiological diagnosis of paraphilias.

Materials and Methods: A total of 45 male sexual offenders were examined. All of them look through abnormal sexual photos. Physiological reactions such as skin-galvanic, cardiovascular, muscular reactions, and changes in chest and diaphragmatic respiration/breathing were recorded. During subthreshold stimulation slides' exposition time with masked image was 10 ms. During threshold stimulation slides' exposition time without masked image was 5000 ms. Psychophysiological examination's data were compared with results of clinical interview.

Results: Two patients' groups were studied: with paraphilias (27 pts) and without paraphilias (18 pts). In the first group the concurrency of threshold stimulation data was observed in 88,9 % of cases, at subthreshold stimulation - in 77,8 %. In 37 % at one method stimulation we were observed reactions to stimulus, relevant to paraphilias, on which reactions at the other method were absent. Only at subthreshold stimulations appeared reactions to those stimulus which were submitted in behavior, but not in imaginations and dreams. In these cases realization sexual perversion on altered states of consciousness, and in a post-criminal period was observed the partial amnesia. In the second group more than in half of cases were marked reactions only for normative sexual stimulus.

Conclusions: The threshold and subthreshold stimulations' data supplement each other in paraphilias' diagnosis.

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Stress and psychosocial determinants of formation of neurotic and affective disorders in patients with peptic ulcer

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Objective: To study the role of psychosocial stressor factors in formation of neurotic and affective disorders in patients with PU of duodenum and stomach.

Material and Methods: In Borderline States Department of MHRI TSC SB RAMSci we examined 245 patients (male - 111; female - 134; mean age $43,28\pm 8,86$ years) with peptic ulcer and mental disorders (MD) of neurotic and affective level appearing to be causes of seeking by patients for a psychiatrist. In 24,9% of them PU was diagnosed for the first time under conditions of a psychiatric hospital.

Results: Method of logistic regression along with convenient for PU factors of “aggression” and “defense” predictors of psychosocial disadaptation and prognosis of PU development have been revealed in men (Concordant=84,6%, Somers’D=0.693), in women (Concordant=82,8%, Somers’D=0.660). From the first step sign “heredity” according to PU has constituted 24% ($p=0.0001$). Of significance were somatic factors: gastroduodenitis infected HP ($p=0.0015$), duodenogastric reflux ($p=0.0015$), gallstones ($p=0.003$), indices of immune status ($p=0.0174$). Significant psychosocial (stressor factors) predictors have been revealed: life events ($p=0.0021$), medical ($p=0.0002$), working, everyday ones ($p=0.037$). Mental disorders of depressive, anxious, asthenic spectrum ($p=0.0001$), duration ($p=0.001$) and age of onset of mental disorders ($p=0.001$), psychopathological syndrome ($p=0.0009$). Non-specific symptoms of PU are represented by psychovegetative paroxysms of fear of death ($p=0.0006$), cardialgias ($p=0.008$), abdominalgias ($p=0.005$), hypochondriac fixation ($p=0.001$), hypothyria ($p=0.0003$), demonstrativeness ($p=0.004$). Perspective is assessment of interrelationship of somatic and mental factors in development of schemata of complex somatic and psychopharmacotherapy, psychotherapy of PU patients.

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The evaluation of the effectiveness of pyridoxine (vitamin B6) for the treatment of premenstrual syndrome: A double blind randomized clinical trial

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Objective: A comparison between Pyridoxine (vitamin B6) and a placebo for the treatment of premenstrual syndrome (PMS).

Methods: A double blind randomized clinical trial was performed on 160 university students who were suffering from PMS (according to the retrospective diagnostic criteria which had been recorded during the last 3 menstrual cycles). Then the patients were randomly assigned into two groups, and finally 94 patients who had finished the study were statistically analyzed.

In the Pyridoxine group (46 patients) vitamin B6 was prescribed at a dose of 40 mg twice daily (total 80 mg), and in the placebo group (48 patients) a tablet similar to vitamin B6 tablets in size, smell, shape and taste was prescribed 1 tablet twice daily. In both groups the tablets were started from the first day of the fourth menstrual cycle and continued for the next two cycles, and during these two cycles the symptoms were recorded.

Results: The severity of PMS in the second cycle of the treatment (in both groups) showed a statistically significant decrease ($p < 0.05$, Pair T test) and the comparison between the two groups showed that the severity of PMS in the Pyridoxine group decreased more than the placebo group ($p < 0.05$, Student T Test) and this was because of the reduction in the psychiatric rather than somatic symptoms of PMS.

Conclusion: Regarding the effect of Pyridoxine in reducing the severity of PMS, it can be suggested as a treatment for PMS, at least for the psychiatric symptoms.

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The changing culture in modern medicine: A psychiatrist’s perspective

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Introduction: Cultural competence is often defined as the understanding and integration of patients’ cultural themes including culturally-based syndromes, diagnostic process, and treatment. Cultural competence is essential to the advancement of global healthcare for it allows greater understanding of individual patients, focuses on combined interventions, and maximizes adherence. However, healthcare professional’s culture and culture of medicine itself must also be considered. In westernized medicine, especially America, advances in technology and therapeutics play a large role in changing medical culture; but medical economics is as significant for one now witnesses a once noble profession changing into a “business.”

Methods: Commentary on clinical medicine practices and changes in medical culture.

Results: Managed care and Medicare DRGs strongly affect American medical economics with resultant: decrease in physicians’ incomes, increased number of patients seen daily, decreased time spent with each patient, and decreased subjective/objective quality of care. Physicians’ roles have blurred with duties delegated to lesser qualified healthcare professionals in order to maximize patients seen and income generated by physicians. In psychiatry, performing multiple psychopharmacology visits hourly is economically more productive than an hour therapy session.

Conclusion: Doctors need to understand that in entering medicine they enter a life’s career of nobility in which they serve others and do not expect to become wealthy, but at life’s end are able to state “a job well done with caring for all.” Perhaps then less harm will be done to patients in the doctors’ haste to earn more money by seeing too many patients too briefly.

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Poetry therapy: In memory of a dear friend

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Introduction: Unresolved grief and perception of loss result in impaired relationships and increased psychopathology. Grief research and therapy support a beneficial response to emotional expression of grief in the context of search for meaning (Neimeyer’s “meaning-making”). Further, there are multiple forms of expression of grief be it verbal, artistic, or written. This paper addresses poetry therapy as an effective expression of grief.

Method: Poetry therapy with analysis.

Discussion: Too often we take life and friendship for granted. Frequently, it is only with death that our thoughts crystallize and the meanings of relationships become clear, powerful, and at times overwhelming. It is then that we truly understand our own mortality and our responsibilities to others. Poetry affords a therapeutic means for the expression of grief while serving as a monument to those now lost, but always remembered.

Conclusion: Too often it is difficult to express one’s emotions and the meaning of loss during the grief process. All forms of expression should be afforded the bereaved. Poetry therapy is a unique means wherein special feelings and meanings can be effectively expressed and result in a therapeutic grief process.

Reference:

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