

O-03-10

Ethics in psychiatry: From Hippocrates to the WPA Declaration on Ethics

G. Christodoulou. *Hellenic Psychiatric Associa., Athens, Greece*

Objective: The contribution of Hippocrates to the establishment of ethical rules in Psychiatry is discussed and the conclusion is reached that Hippocrates managed to harmonize the theocratic and the rational approaches in Medicine and Psychiatry, thus avoiding one-sided approaches and polarization. The common elements in the ethics declarations and rules that followed Hippocrates are outlined and it is pointed out that practically all of them identify the rights of the patient as the most important priority. Controversial issues like exposure of incompetent colleagues will be discussed.

Sunday, April 3, 2005

P-06. Poster session: Interdisciplinary II

Chairperson(s): Marianne Kastrup (Copenhagen, Denmark), Borys Mykhaylov (Kharkov, Ukraine)
18.00 - 19.30, Gasteig - Foyers

P-06-01

The ill child and his quality of life

A. Michopoulou, G. Stefanou, E. Chatzioannidou, A. Iliadou, D. Panagiotou, P. Georgiadou. *Pentelis Children Hospital Psychology, Palea Pendeli, Athens, Greece*

Objective: This study aims to compare quality of life between three groups of children: a) hospitalized children at Penteli Children's Hospital b) children consulting the different outpatient services (such as Pediatric, Endocrinology, Allergiology, Orthopedic, Child Development and Psychological sections) and c) a control group of schoolers.

Methods: Five domains of quality of life were evaluated: somatic, psycho-emotional, social, family and school life. Hypothesis was that control group had better quality of life than the other two groups of ill children and especially hospitalized and chronically ill children. Children were given a questionnaire of quality of life constructed by our Department, based on Kid-KINDL questionnaire for children

Results: Percentage of children presenting difficulties on the five domains of quality of life How often Domain Never Rarely S/ times Often Always Somatic complaints 25,5 45,5 21,5 7,0 0,5 Psycho-emotional 22,0 48,5 23,5 5,5 0,5 Family life 32,7 42,2 21,1 3,5 0,5 School life 28,4 45,8 21,9 3,5 0,5 Social life 51,2 33,8 10,0 2,0 3,0

Conclusion: Hypothesis was confirmed the control group had a better quality of life than the ill children (outpatient and inpatient group). Especially, the somatic and school life domains were affected more negatively for the hospitalized children. Hospitalization is experienced as a traumatic period of their life, so that their main wish is to be healthy and capable of physical activities. The chronicity of the disease is an important factor for the aggravation of the children's difficulties.

P-06-02

Validity of general health questionnaire-12 in a student mental health clinic

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Objective: General Health Questionnaire-12 (GHQ-12) is a widely used screening instrument for psychological distress in medical settings. Our aim was to assess the usefulness of GHQ-12 in a university student health center mental health clinic.

Methods: Study was conducted at a university student health center psychiatric clinic where students can apply without any referral. GHQ were filled in by consecutive patients together with a sociodemographic data form before their visit to the psychiatrist. DSM-IV psychiatric diagnosis was established using SCID-I.

Results: A total of 170 students (115 female, 55 male) participated in the study. Mean age was 21.9 ± 2.2 years. Depression was the most prevalent DSM-IV diagnosis (48.2%) and 34.7% of the students did not get any psychiatric diagnosis. Mean GHQ score was 7.5 ± 3.7 (8.0 ± 3.6 for females and 6.4 ± 3.7 for males). Sensitivity and specificity for any DSM-IV diagnosis were: 78% and 58% (cut-off point 6.5); 73% and 68% (cut-off point 7.5); 65% and 81% (cut-off point 8.5) respectively.

Conclusion: Previous validity studies of Turkish version of GHQ-12 yielded lower cut-off points (1.5) for primary care patients (Kilic C (1996) Turkish Journal of Psychiatry. 7(1): 3-9.). Our findings suggest GHQ-12 to be a useful screening instrument with a higher cut-off point (e.g. 7.5) for the present sample.

P-06-03

Patients's satisfaction assessment in mental health care within community mental health centers services

D. Salcic Dizdarevic, A. Bravo Mehmedbasic, A. Kucukalic, S. Popovic. *Clinical University Center Psychiatric Clinic Sarajevo, Sarajevo, Bosnia and Herzegovina*

Objective: The aim of this paper is patient's satisfaction assessment in mental health care within community mental health centers in Canton Sarajevo, Bosnia and Herzegovina.

Methods: This study is analytical-descriptive. As research instrument was used the Self-report questionnaire for patient satisfaction measure, developed by Swedish Institute for Health Services Development, which was adjusted for this study. The Questionnaire has been applied to 90 patients who have been treated in six community mental health centers in Canton Sarajevo during 2004.

Results: The results of this study generally show the optimal level of patient's satisfaction with community mental health centers services, indicating some weak points related to informations on treatment alternatives, patient's view of treatment, informations on effects and side-effects of drugs, participation of relatives, side-effects of medication and treatment plan.

Conclusion: The results of this study represent the indicators of effective implementation of new organizational mental health care concept in Bosnia and Herzegovina, first of all related to community mental health care center, as basic organizational form within the concept. The results of patients satisfaction assessment in the community mental health centers services reveals some weaknesses, perceived from patient's point of view, whose

overcoming will represent the task in improving the quality of care within community mental health centers in the future.

P-06-04

Attitudes of senior high school students toward three mental disorders

G. Arbanas. *General Hospital Karlovac, Karlovac, Croatia*

Objectives: The author compared stigma toward three mental disorders (schizophrenia, depression and posttraumatic stress disorder) in senior high school students. The purpose was to determine the size of stigma toward PTSD patients in Croatia.

Methods: The subjects were 203 senior high school students in three different high schools. The survey instrument gathered information about attitudes toward three mental disorders. Fifteen questions about each disorder were asked.

Results: Of 200 students only 81% completed the questionnaire fully. There are no differences in attitudes toward any of the disorders in males and females. There is a statistically significant difference toward schizophrenia (compared to depression and PTSD) and no difference between depression and PTSD. There are certain questions in which there are differences between gender.

Conclusions: Stigma toward PTSD patients is similar to stigma toward depressive patients and is less than stigma to schizophrenic patients. There are no gender differences in attitudes toward patients with mental disorders.

P-06-05

Migration in child and adolescent psychiatry - differences and equalities

M. Marin Olalla, B. Perez Ramirez, J. Diaz Atienza, P. Blanquez Rodriguez. *Torrecardenas Hospital Mental Health, Almeria, Spain*

Objective: Our geographic area is a privileged place to study the influence of this phenomenon in the development of mental problems. Migration is nowadays a complex and raising issue.

Objective: The focus on this review is analysing the prevalence of psychiatric symptoms and the socio-demographic characteristics of immigrant children, considering their singular adaptation to our country, compared with the indigenous population

Methods: Cross-transverse study. We analysed 30 immigrant patients and a control group of 60 indigenous. Subjects were selected randomly from 1341 patients, who received treatment during five years in our centre (from 1998-2003). Socio-demographic and clinical factors were considered (type of referral, diagnosis, type of treatment) Statistic descriptive and univariate analyses of the above information were estimate.

Results: Regarding the type of referral, the most common was behaviour disturbance, but this problem was definitely confirm as a formal diagnosis in a meaningful percentage of the immigrants patients in comparison with the control group. About the diagnosis, the most frequent was adjustment disorders in the context of family problems. However there was not a significative difference, the most frequent cause to referred the immigrant population to our services was "problems with low level of behaviour disturbance". Furthermore, the indigenous population had been referred by behaviour problems mainly.

Conclusion: This review try to detect the cultural, social and family factors, which lead to mental health problems in the

immigrant children, thinking that it could be the best way to know the protective factors in the psychiatric disorders of this population.

P-06-06

Migrants and mental disorders in the emergency room

J. J. Carballo, M. Garcia-Moreno, B. Poza, L. Giner, P. Garcia-Parajua, A. M. Roche, L. Garcia-Thuring, L. De Ugarte, L. Caballero, E. Baca. *Puerta de Hierro Hospital Psychiatry, Madrid, Spain*

Objective: To determine differences in diagnosis and psychiatric history in Spanish and migrant patients who attended the Psychiatric Emergency Room over a period of three months

Methods: Retrospective study that includes all patients that attended the Psychiatric Emergency Room (ER) in a Tertiary Hospital from April 1st, 2003 to June 30th, 2003 (N= 341); 479 attendees were admitted during this period of time. Nationality, diagnosis (substances related, psychotic, affective, anxiety, personality, others), prior treatment, frequency in the use of ER and demographic data were collected

Results: Migrants [n= 36; M=17 (47.2%); F=19 (52.8%); Mean age:35.97 SD:15.60] Natives: [n=305; M=124 (40.7%); F=181 (59.3%); Mean age: 39.27 SD(15.30)]. We detected more psychotic disorders ($\chi^2=7.68$; $gI=1$; $p=0.006$) and suicide attempts ($\chi^2=13.79$; $gI=1$; $p<0.001$) in migrants than in natives. There were more affective disorders in Spaniards than in migrants ($\chi^2=6.92$; $gI=1$; $p=0.008$). When migrants were stratified by region, the only difference found was in psychotic disorders between Spain and Northern Africa (ANOVA $F=5.21$; $gI=3$; $p=0.002$. After Bonferroni post hoc $p=0.005$). No other differences were detected

Conclusion: Differences found in the occurrences of psychotic disorders between groups are similar to those reported previously in other European countries. Psychotic disorders may be influenced by cultural and social characteristics and also by life events during acculturation. The complex relationship between cultural factors and resulting illnesses merits further investigation.

P-06-07

Culture in mental health - diversity and disparity

C. Shah. *Los Angeles Veterans Affairs Dept. of Psychiatry, Los Angeles, CA, USA*

Objective: The report by the Surgeon General of the United States has identified culture, race and ethnicity as variables in mental healthcare system. Cultural diversity is evident on lines of race and ethnicity. Patients' access and providers' biases have been noted as two significant issues leading to cultural disparities in healthcare. The first step in the interaction between a patient and a provider is an administrative process of patient assignment.

Methods: To study cultural issues affecting this process, data was collected for patients enrolling into mental health clinic over a period of 12 months.

Results: There were 590 patients who were assigned to 3 different providers without knowledge of each others' racial or ethnic background. There were 2.71% Asian (A), 47.80% Black (B), 22.03% Hispanic (H) and 27.46% White (W) patients. Providers were categorized as Asian Indian (A-I), Far East Asian (A-E) and White (W-W). After correction for equal distribution in assignments, the data show that 37.19% of W were assigned to W-W in contrast to only 26.78% of them being assigned to A-I ($p<0.001$). In an opposite scenario, 37.18% of B were assigned to

A-I as compared to 31.38% to W-W and 31.44% to A-E ($p < 0.05$). The assignments of A were numerically favored for W-W, but did not reach statistical significance. No differences were noted in assignment of H to any of the providers.

Conclusion: These data illustrate that even non-patient; non-provider factor like administrative process plays a role in bringing cultural disparities in mental healthcare system.

P-06-08

The history-metodological investigation of ukrainian psychotherapy creation

B. Mykhaylov, A. A. Martynenko, G. P. Andrukh. *Kharkov Medical Academy of P.E Chair of Psychotherapy, Kharkov, Ukraine*

Objective: Topic is devoted to the history and ethno-cultural differentiation of psychotherapy and also to the social-philosophic and methodological influences which psychotherapy has experienced.

Methods: Here is for the first time expounded the history of psychotherapy as a discipline and are shown the epoch of pre-disciplinary history of psychotherapy (the Greek- Roman epoch of psychotherapy, psychotherapy of scholasticism epoch and the epoch of hospital psychotherapy) and the periods of its disciplinary history ("proto- disciplinary", "methodological purism", "institutionalization of practices", "doctrinal", "dissolutive", and "auto-disciplinary identification"). For the first time the problem of ethno-cultural differentiation of psychotherapy is defined. For the first time the main social-philosophic and methodological adoption of psychotherapy are revealed and shown.

Results: Psychotherapy as the medical method differs by a feature. At first, under the judgment of the founder of the Ukrainian school psychotherapy I.Z. Velvovsky, it is common clinical discipline. Secondly, there is a large variety of the theoretical approaches and understanding of an essence and directedness psychotherapy today.

Conclusion: Basic essence item of the Ukrainian school is the medical model psychotherapy, and the psychological model should be its constituent, instead of independently existing.

P-06-09

Psychotherapy of somatoform disorders

B. Mykhaylov, I. Romanova, N. Myroshnichenko, B. Mykhaylov. *Kharkov Medical Academy of P.E Chair of Psychotherapy, Kharkov, Ukraine*

Objective: The most significant role belongs to the patients self-evaluation of the influence of the disease on their social status, that is an essential part of the inner picture of the disease and the important point of therapeutic rehabilitation intervention on the patients.

Methods: On the basis of the examined 300 patients with somatoform disorders and 2000 patients with chronic psychosomatic diseases we have elaborated a formal test that allows to evaluate quantitatively the influences of the disease on various spheres of patients' social status.

Results: It was absolutely unexpected the common for psychosomatic and mental patients rise of significance of personal individual, every day life factors in cases of aggravation of the main disease course. Elucidation of peculiarity of personal perception of the disease served as basis of elaboration of purposeful system of psychotherapy, consulting, psychological support for psychosomatic

patients with high-effectiveness 1,5 – 3 years catamnesis in 85% patients. Psychotherapy should be used first of all as a pathogenic method.

Conclusion: Our experience showed the necessity of the use the integrativ_ models of psychotherapy, parted on stages. On the first stage - sedative-adapting the receptions of cognitive and suggestive psychotherapy are used. There is group therapy on second-main-stage. On the third stage-supportive- elements of the autogenic training mastered.

P-06-10

Cross cultural training and supervision in clinical psychodrama

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In this paper the authors are presenting experience in meeting the professionals/psychotherapists coming from different cultural background. Since 2002. in mutual collaboration of British Psychodrama Association, Oxford Psychodrama Group, Croatian Psychodrama Association, Izraeli Kivunim Training Institute in Psychodrama and Yugoslav Psychodrama Association, regulary provided annual training workshops and supervision group sessions. These encounters provided forum for both trainees and trainers from Great Britain, Serbia and Montenegro, Izrael, Croatia, Macedonia, Slovenia and Grece to demonstrate, interact, discuss, share psychodrama practice from different cultures. More specifically, within these workshops trainers demonstrate their work while trainees take opportunity to direct and have their work supervised by a trainer from another country. These workshops were set with forty participants working continually for four days. The authors discuss and assess this kind of work, addressing exchange of skills of psychotherapeutic practice, training aspects and supervision.

P-06-11

Are treatment recommendations in psychiatric expertises helpful? A retrospective evaluation of 30 psychiatric follow-up expertises

T. Apfel, A. Riecher-Rössler. *Universitätsspital Psychiatrische Poliklinik, Basel, Switzerland*

Objective: In 2003, up to 40% of the Swiss invalidity (IV) pensions were granted due to a psychiatric diagnosis. Our previous study (Apfel & Riecher-Rössler 2005) revealed that patients were often diagnosed and treated insufficiently before the psychiatric expertise. To study the treatment after the expertise, we now examined: a) did patients follow the treatment recommendations of the expertise? b) did treatment improve the outcome?

Methods: From 2002 to 2004, we performed follow-up expertises for the Basel invalidity insurance on 30 patients. The first expertises had been performed 9 to 25 months before; 21 expertises by us, 9 by other experts. The data were retrospectively evaluated.

Results: a) Of 25 patients who had got a recommendation for medication, at follow-up only 8 (= 32%) showed substance levels in the therapeutic range. Of 21 patients with a recommendation for psychotherapy, 10 (= 48%) had started one. Of 6 patients with a recommendation for psychiatric hospitalisation, 1 (17%) had been admitted. b) In those patients who were in therapy, the combination of medication and psychotherapy was most efficacious, improving the clinical status of the concerned in 60%.

Conclusion: Conclusions: Treatment recommendations of the expertise were not followed sufficiently. The reasons for that have to be studied. Patients following the treatment recommendations had the best outcome. Considering the small number of patients in this study, further research is necessary. Reference: T. Apfel, A. Riecher-Rössler: Werden psychisch Kranke zu schnell in die Rente "abgeschoben"? Psych. Praxis 2005, in press.

P-06-12

Pathographies as a challenge for hermeneutics and ethics in psychiatry. A structural analysis of knowledge, judgement and wisdom in modern psychiatry.

E. H. Hische. *Klinikum der J. W. Goethe-Universität, Frankfurt, Germany*

Objective: Scientific observation and subjective experience, the third and first person perspective, object and subject, can be integrated in modern psychiatry by the instrument of pathographies. Clinical experience indicates structured and differentiated basic modes of knowledge and judgement by doctors. In diagnosis and therapy propositional and nonpropositional forms of knowledge and determining and reflecting forms of judgement are realized in dynamic modes of theory and practice. The relation of forms of knowledge and forms of judgement is a structural cornerstone of intraindividual and interindividual experiences and action in psychiatry. The individual natural history of the patient, a biological biography, can now be reformulated first immanent as an integration of forms of knowledge in a self-relation of the patient in a doctor-patient-relationship. And second ethical as an integration of forms of knowledge of medical practice in the doctor-patient-interaction in a structurally changed medicine of modern times: the doctor-patient-dyade seems to be interfered or broken. The integration of forms of knowledge in medicine as a practical science regains old characters of propositional and nonpropositional knowledge in a literature of pathographies or clinical ontology. Wisdom in healthcare now derives from this structural analysis as awareness of and education in this internal relations by 'teaching and training for doctors'. And by this medical practice can renew its status as a practical science.

Conclusion: We will define and present the hermeneutical and ethical structure of doctors acting in psychiatry and give a concept about educational aspects on ,teaching and training in psychiatry' as an ,Integration of perspectives'.

P-06-13

Foundations and transitions of the self. Contemporary neurosciences, psychiatry and philosophy: The work of G.M. Edelman, A.S. David & T. Kircher, and D. Henrich.

E. H. Hische. *Klinikum der J. W. Goethe-Universität, Frankfurt, Germany*

Objective: G.M. Edelman was a professor at Rockefeller University N.Y., director of The Neurosciences Institute in San Diego, and he is founder of The Neurosciences Research Foundation. Between 1978 and 2000 he presented an empirical neuroevolutionary conception for a dynamic interpretation of brain and mind processes. The 'theory of neuronal group selection' allows to introduce the terms 'memory' and 'self' into neurosciences. Consciousness is based on a special kind of memory which integrates present perception with experiences in terms of time. A.S. David is a professor of cognitive neuropsychiatry at the

Institute of Psychiatry and consultant psychiatrist at the Maudsley Hospital London. T. Kircher was a senior lecturer and consultant psychiatrist at the Department of Psychiatry at the University of Tübingen. In 2003 they have published ,The Self in Neurosciences and Psychiatry', the overview of recent research and an outlook to further research on models of the self in neurosciences and psychiatry. D. Henrich was a professor of philosophy at Free University Berlin, University of Heidelberg, University of Munich, and permanent visiting-professor at Columbia University N.Y. and Harvard University. In numerous articles he developed a philosophy of subjectivity based on fundamentals of idealistic german philosophy and aims at a revitalisation of metaphysics. The structure of modern philosophy is based on self-relations of self-consciousness and selfpreservation: the stoic principle of ,syneidesis' is still modern.

Conclusion: We will present the basic lines of these concepts, discuss some related aspects of brain and mind, matter and meaning, and develop some aspects of philosophical critique.

P-06-14

Application of POC-therapy in sanatorium conditions

I. Miroshnik, E. Gavrilin, B. Mykhaylov. *The Centre of POC-therapy h11. ap. 55, Kharkov, Ukraine*

Objective: Studying of efficiency of POC-therapy at a sanatorium stage of rehabilitation of the patients, suffering cardiovascular diseases. In integrative, a short-term method of POC-therapy essentially new are: a trinitarian paradigm, determining three factors which influence on harmonious or pathological development of the personality - biological, social and spiritual, and also application of the bifunctional (psycho-diagnostic-correctional) techniques executed on the personal multimedia - computer. (I.Miroshnik, E.Gavrilin. Bases of the Personality-oriented Computerized Psychotherapy (POC-THERAPY). Kharkov: Rubicon, 1999).

Methods: The basic group (68 patients, cardiovascular diseases, including 16 person after a heart attack of a myocardium and 17 person after an stroke); control group - 55 person. The 24-day's rate of rehabilitation on a resort included medicamentous therapy, physiotherapy and autogenic training. Patients from the basic group have received a POC-therapy (3-5 individual sessions). Sessions were carried out according to methodical recommendations of the Ministry of health Protection of Ukraine

Results: In the basic group the following positive changes were marked: harmonization of style of interpersonal relationships, decrease of uneasiness, increase of physical and intellectual activity. As against control group, normalization of vegetative control was observed on a background of 50 % reduction of quantity of medicines.

Conclusion: POC-therapy provides the accelerated rehabilitation of functions of cardiovascular system, and also substantial increase of physical, social and spiritual activity of patients.

P-06-15

Method of a synergic interactive musicotherapy (SIM)

I. Miroshnik. *The Centre of POC-therapy h11. ap. 55, Kharkov, Ukraine*

Objective: Studying of efficiency SIM for rehabilitation of patients with suicide behaviour. SIM is a modern method of

personality-focused musictherapy, which integrates synaesthetic art and new information technologies. Working factors are: the interactive video-music based on psychological laws (Miroshnik I. Color as stimulus of formation of the direct - emotional relation to music. In: "New researches in psychology", 1987, N° 1. Moscow, pp. 55-58). SIM for the first time it is realized in computer system "Tonic" (1992). The interactive video-music in 24 tonalities on themes from WTC by I.S.Bach are used.

Methods: By results of a psychodiagnostic (Lusher's color test, test Supos-8) the computer automatically arranges video-musical images to actual and desirable conditions of the client. With the help of system of videomusical images and tests it is carried out the directed psycho-correction with a psycho-feedback. (Gavrilin E., Miroshnik I. The patent of the Russia for the invention, N° 2033818, 1995). SIM was applied to treatment of 47 patients after heavy poisonings of a mixed psychoactive substances, on residuals stages, individually on 4 sessions. Control group: 38 patients.

Results: Optimization adequate to correctional influence psychoemotional conditions on subjective and objective parameters was observed. Reduction by 14 % of the patients requiring for translation in psychiatric clinic, and also reduction of terms of rehabilitation by 23 % is marked.

Conclusion: SIM can be applied to the accelerated rehabilitation of patients with psychogenic frustration, with suicide behaviour, at treatment psychoemotional infringements, psychosomatic diseases, a narcotic and alcoholic dependences.

P-06-16

Traumatherapeutic work in dynamic psychiatry

I. Burbiel. *DAP, München, Germany*

Objective: Traumatherapeutic Work in Dynamic Psychiatry Since its beginning in early Freudian time

P-06-17

Towards a psychodynamic conception of psychoneuroimmunology

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Objective: The present paper attempts to make a contribution to an integrative approach to the new science of Psychoneuroimmunology (PNI).

Methods: Following a short outline of its history, it proceeds to a critical review of the prevailing basic concept of PNI, dominated by the reductionistic view of laboratory-based science and the stress concept, but mostly lacking a differentiated insight of the clinical approach, including psychodynamic and group-dynamic aspects.

Results: Scientific data from investigations dealing with the outcome of studies directed towards eliciting and measuring the effects of anxiety or mourning, resp. Separation are contrasted to short clinical vignettes emphasizing the narrow connection of the results to personal, biographical experiences of the subjects.

Conclusion: The paper concludes with a model offering the possibility of integration of the various levels of present and past psychodynamic and group-dynamic events, and immunologic „memory“. Such a model may be of benefit for future scientific investigation without leaving the depth-psychological therapeutical experience of clinical work.

P-06-18

Improvement of Executive Cognitive Function by Aroma Therapy

M. Kubo, S. Shigeru, K. Takeshi. *Hamamatsu, Japan*

Objective: Efficacy of an aroma therapy with lemon essence on the cognitive function in fatigued subjects was examined.

Methods: Seventeen fatigued nursing students after their course work of clinical nursing practice were divided into two groups. One group of 8 received the aroma therapy and the rest (9) served as controls. All the subjects underwent two consecutive tests each of the computerized trail making test(TMT) Part A and B before and after the therapy or rest period for the experimental or control group, respectively. Changes in the completion time(sec) of the TMT Part A and B after the therapy were compared with those of the control group.

Results: There were no statistically significant differences in the completion times of the TMT Part A between the two groups, but there were some significant decreases in the completion time of the TMT Part B after the aroma therapy period in the experimental group compared with the corresponding values after the rest period in the control group.

Conclusion: The above data suggest that the aroma therapy with lemon essence may improve the executive cognitive function in severely fatigued subjects.

P-06-19

A pattern of expressive activity in rehabilitation: Colors of the body

G. Di Cesare, G. Aloisio, G. Aloisio. *ASL Roma E, Diurnal Centre Mental Health, Rome, Italy*

Objective: The Diurnal Centre of via Monte Santo (Mental Health Department, A.S.L. Roma E) organized several workshops based on expressive activities. "Colours of the body" is the title our patients gave to one of our activities.

Methods: This workshop took place in three days and has been directed by a contemporary artist: in this occasion he worked with ten patients, nine of them suffered from Schizophrenic Disorder and the last one from Bipolar Disorder (according with the criteria of the DSM IV). The first day each patient was asked to choose a part of his body: then a digital camera photographed it and we printed the image on a canvas, fixed on a frame. The criterion we followed was that each patient had to choose a significant part of his body – a part linked to a good or a bad experience. The second day every patient was asked to picture the same part of his body on another canvas and the third day he had to copy the photo and, in the outline of this copy, he wrote the reason why he has chosen that specific part of his body.

Results: The meaning of this work is that psychotic patient have great difficulty in approaching the symbolic dimension of thinking. Therefore, working this way can produce a progressive improvement of symbolization – from the actual figurative level of the image to his pictorial transposition and finally to the language. This experience describes a good therapeutic way. The result achieved shows that through this kind of work – even though this experience took place for a short time – patients can represent by symbols conflictual elements of their life which they have not been able to express before and that they can relate it in a therapeutic setting. Further more, this workshop represent a prototypic pattern of rehabilitation in which the actual level leads to the symbolic dimension. Finally, the presence of an artist and

of other external people increases the importance of integration processes with the territory.

Conclusion: This whole workshop was filmed and became a video entitled “Colours of the body” (“I colori del corpo”): it has been presented to several contents and has got much appreciation, especially in Paris where our team received the “Clés d’argent” at the International Festival of Cinema and Mental Health in June 2004.

P-06-20

Parents' divorce and having a romantic relationship affects mental health of soldiers

G. Giaglis, M. Apostolidou, I. Panidis. *Psychiatric Hospital of Petra Olympus, Katerini, Greece*

Objective: To assess the effect of having a romantic relationship and of parents' divorce on the mental health of soldiers doing 12-month compulsory military service in Greece.

Material and methods: 253 male soldiers completed the Greek version of General Health Questionnaire-28 and a demographics questionnaire. Additionally, subjects with abnormal scores were interviewed. GHQ scores were computed by both the Likert and the GHQ scoring algorithm.

Results: The questionnaire demonstrated high internal consistency (Cronbach's alpha=.90 for the whole scale and .83, .83, .71 and .79 for the four subscales) and factorial validity. Respondents reported higher (worse) scores in Social Functioning, and lower (better) in Depression, while Anxiety and Somatic Complaints were medium. Abnormal scores varied from 4.7% to 30% of the sample, depending on the scoring algorithm. In general, both having divorced parents ($p=0.16$) and having an active romantic relationship ($p=.05$, both computed by Fisher's Exact Test) were more frequent in the abnormal group; however the time since the divorce or the duration of the relationship did not affect the psychopathology scores. Age had a mild positive correlation with Somatic Complaints ($r=.134$) and mild negative with Depression ($r=-.155$). Total time of service remaining or already served as well as educational level did not affect GHQ scores significantly.

Conclusions: Having divorced parents or an active romantic relationship exacerbates the mental distress of compulsory military service, while maturity that comes with age acts protectively towards reactive depression.

P-06-21

Expectations and attitudes of a closing psychiatric hospital's staff towards deinstitutionalization and mental illness

G. Giaglis, B. Michailidou, G. Angelidis. *Psychiatric Hospital of Petra Olympus, Katerini, Greece*

Objective: To explore the attitudes of a closing Psychiatric Hospital's staff towards mental illness and deinstitutionalization, as well as their expectations about its influence to their future lives.

Material and methods: After revision of the international literature, a questionnaire specifically constructed for the purposes of this study was administered and completed anonymously by the working staff.

Results: The whole staff and especially women [$t(157)=2.15$, $p=.013$] were positive towards deinstitutionalization in general as

well as regarding their own hospital. They considered that it will improve the care and lives of the patients as well as their own professional status. Nevertheless they expressed reservations about the offering of work and lodging to ex-hospitalized mentally ill patients. The staff that interacts more closely with the patients (nursing personnel, guards) expressed a more positive attitude [$F(3,202)=2.62$, $p=.011$] and higher expectations [$F(3,177)=6.16$, $p=.001$] than the staff with little or no contact with the patients. Age and years of work did not seem to play a statistically significant role.

Conclusions: The successful outcome of the deinstitutionalization project depends on the staff's support. Close and frequent interaction with patients seems to be the most significant predictive factor of positive attitude towards deinstitutionalization.

P-06-22

Perceptions of conflicts and justice at work and their impact on job satisfaction of a psychiatric hospital's staff

G. Giaglis, B. Michailidou, A. Georgios. *Psychiatric Hospital of Petra Olympus, Katerini, Greece*

Objective: The study of a Psychiatric Hospital staff's perceptions of the sources of conflicts at work, the presence of injustice and their impact on job satisfaction.

Material and methods: A questionnaire specially made for the purpose of this study was anonymously completed by the working staff.

Results: The lack of personnel was the greatest cause for conflict reported, while the unequal distribution of work was perceived as the greatest injustice. Men regard their working environment as less conflicting [$t(156)=3.17$, $p=.002$] and more fair [$t(156)=2.86$, $p=.005$] than their female colleagues. The nursing staff and the guards argue, not only with doctors and patients but also with each other, more often compared to the administrative and technical personnel. Usual causes for complaints were: the small salary, the safety conditions (especially for nursing staff) and the limited opportunities for professional evolution. Nevertheless the staff was generally satisfied with their job. This type of satisfaction seemed more dependent to the sense of justice [$R^2=.237$] and less to the conflicts [$R^2=.046$], which are anticipated, more or less. Age, years in service and sex did not play a statistically significant role. **Conclusions:** Close interaction with the patients, although being a source of fatigue and conflict, provides rewarding feelings of satisfaction to the nursing staff.

P-06-23

Towards a theory of human sciences

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Objective: Can we structure interdisciplinarity in the human sciences? What knowledge is the foundation for which speciality?

Methods: In terms of theoretical methodology, (A) complexity levels (e.g. cell, organ, individual, group) and their “interaction” with each other play an important role in human sciences. In addition, (B) the four central questions of biological research are of particular importance: Two of them are taken into consideration in all of the human sciences, namely: (1) the question regarding the immediate cause-effect relationships in functional processes (causation), and (2) the question regarding ontogeny. In order to better understand life phenomena in all their complexity, it is also

necessary to question (3) their adaptive value, and (4) their phylogeny.

Results: An tabular orientation matrix can be prepared based on the central questions (e.g. columns) and reference levels (e.g. lines). In this “structural model of interdisciplinarity” disciplines with a reference to the performance of the nervous system, their questions and results can be allocated and intertwined with each other.

Conclusion: The reference framework for those disciplines that deal with the functions of the nervous system becomes clear when, based on the matrix with the four central questions of biological research, one asks and at the same time takes the reference levels at which the questions are aimed into account. This “bio-psycho-social” orientation framework is the basis for the development of an interdisciplinary consensus.

P-06-24

Destigmatization - Challenge in a changing society". It's not the problem to treat only the mental disease, but the whole person"

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Since the fall of Berlin wall, the attitude of the Albanian society toward the mentally ill people has changed considerably. There were prejudices on psychiatry in the past due to the stigma and as a result, the mentally ill patients were discriminated and isolated from the rest of society. In large and closed hospitals took shelter the majority of chronic ill patients, but the living conditions in them were poor. The reigning stigma of being a mentally ill patient caused sufferings not only to the patient himself but also to his relatives. Even today there are some negative models of stigma in society. The roots of it are very old and this is related first of all with the point of view of the society about the world in general. A negative impact exercises on the young generation in particular, the mass media (written and electronics) with the every day news about the misconduct of mentally ill people and the TV -pictures in which the protagonists are the psychic patients. The result of this is a reduction for the residency in psychiatry among the students, seeing our speciality as not attractive. The psychiatry seems as a targets of not useful discussions in society. Sometimes we are witnesses of an over-representation in the public of the psychiatric problems. In front of such situation we encounter oft the indifference of the policy makers. There are some interventions for fighting against stigma: -A continuous cooperation of the specialists of mental health with policy makers, would help in raising the funds to support the psychiatry at all. -We must try always to avoid the inequality of the treatment between the patients of internal medicine and the psychic patients. - Our first duty is the psychoeducation of the patients in individual or in groups, included also the family members. The majority of researchers express the opinion that the education brings good results in fighting the stigma. The programs of education should be effective for a wide variety of participants included also the medical personnel. - Increasing of the interpersonal contacts of patients with the rest of society provides a reduction of stigma through the enhancement of self-esteem. -Our attitude as specialist of the field should be with compassion for the sufferers and inspire respect toward them as normal human being. Only in this way we can contribute with our efforts in the coming back of these people in the heart of society for gaining much more access to the efficient treatment and care.

P-06-25

The diagnostic problems of atypical depression

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Objective: To assess the manifestation of clinical symptoms of atypical depression, to compare the differences of the atypical depression manifestation between sexes, to assess personality disorders correlation with atypical depression.

Methods: Retrospective analyses of 70 case-histories of patients with somatoform disorders (atypical depression).

Results: It was supported, that clinical symptoms of atypical depression are very polymorphous. The results have approved that atypical depression was associated with complaints of cardiovascular system (30%), central nervous system (20%), breathing system (13%), gastrointestinal system (13%), sexual disorders (10%), others form (14%). The cardialgic syndrome, sexual disorders are more typical for men, and abdominalgic, cephalgic, anorexic and vasomotoricalergic syndroms are more typical for women. The prevalence of atypical depression is more common among women than men (70%). 70% cases were correlated with personality disorders.

Conclusion: Clinical symptoms of atypical depression are very polymorphous. Atypical depression is associated with complaints of cardiovascular system, central nervous system, gastrointestinal system and breathing system. Atypical depression is more common among patients with personality disorders. Atypical depression is more common among women.

P-06-26

Psychosexual disorders of androgenic women

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Objective: purpose of this search was to set psychosexual dysfunction in female with high androgens level and according to their sophistication about sexuality and sexual experience.

Methods: In searching of psychosexual disorders of androgenic women according to phases of coitus there were researching two groups of women. One group was with normal level of androgens in blood, another group members have symptoms of androgenism. There were used methods of scales and questionnaires. With the scales were qualified symptoms of androgenism according to menstruation cycle, hirsutism level, androgens concentration in the blood, fertility. Women of both groups had filled questionnaire about their coitus quality. this questionnaire was divided into parts according to phases of coitus.

Results: As the results we set what sexual disorders are of androgenic type of women, at the same time we could set the correlation between sophistication about sexuality and sexual experience of responders and their sexual disorders. We set low-level differences between control and androgenic type of women, expect with a very high level of androgens in the blood of women, the main differences was seen in relish and orgasm phases. Stronger contrast were during comparison according to sophistication of women in control and androgenic women group as well.

Conclusion: In the research took part the comparing groups of androgenic females, there were set the level of sexual dysfunctions of these two groups of women.