

but it is connected with it. It is like a weapon and coexist with a body. A soul may exercise some influence to the extent that it is connected with primary matter within its power per primary matter. And owing to the reason that this soul is not so strong as a world soul, this influence also is weak. But it used to be that a soul may affect other bodies by hypnotism or by gaze – this circumstance doesn't contradict with intelligence. Some people have such a strong soul that is able to exercise important influence over bodies of our world using some images or voluntarily..." (Al-kitab-al-alai). Freud gave its own interpretation of psychoanalysis, first of all, as a scientific commentary of dreams. At one of his lectures in the USA Freud (1909) gave the interpretation of dreams as via Regia into the sphere of unconsciousness. In Vienna and London he was lonely and he was misunderstood, slandered in "pansexuality". It's worth reminding of others outstanding psychoanalysts of their time – Iosiph, who succeeded to give interpretations of Pharaoh's dreams, and Moses, who took the people of Israel out from Egypt. From the point of the Russian culture we try to combine psychiatry, psychotherapy with the orthodox religion or, to say broadly, integrate science and religion, intelligence and emotions. You may find such an idea in the novel "Duel" by A.P. Chekhov, where there is a dialogue about a possibility of synthesis of a humanitarian subject and scientific knowledge (chapter 16th).

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REBOXETINE IN NEGATIVE SYMPTOMS OF SCHIZOPHRENIA

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We study the possible efficacy of Reboxetine, a noradrenergic antidepressant, in the negative symptoms of Schizophrenia.

Method: We added Reboxetine to the ongoing antipsychotic treatment of ten patients with a DSM-IV diagnosis of Schizophrenia and assessed the patients at 4, 8 and 12 weeks of treatment with the SANS scale for negative symptoms, the CSCV scale for quality of life and the UKU scale for adverse events.

Results: Three patients abandoned the study because of anxiety and excitement (without emergence of psychotic symptoms). Three more patients remained unimproved and four patients showed a clear amelioration of their depressive symptoms and social relationships as measured with the quality of life scales and clinical global impression. We are awaiting the final codification of the results.

Conclusions: Reboxetine could be effective as an adjuvant medication in the treatment of schizophrenic patients negative symptoms.

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SUICIDE IN HARGHITA COUNTY, 1991-1999. EPIDEMIOLOGICAL RESEARCH

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Suicide and alcoholism cause serious problems and difficulties in supplies, prevention and therapy also for the health care in our county. There is missing information and statistical data concerning correct collection on the suicide occurrence. These data were not collected in Romania before 1989 for political reasons or it was impossible to have access to these and it is also hardly possible these days. This paper analyses the evolution of the suicide phenomenon on a sample of 350,000 people in a period of nine years, stressing upon several specific aspects on the problem. The necessity of

organizing of some structural formula for the prevention and intervention in the crisis is put forward.

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TOWARDS SYSTEMATIZATION OF PSYCHOTIC DISORDERS WITH SEXUAL CONTENT IN SCHIZOPHRENIA

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Objectives: The questions of manifestation of symptoms and syndromes with sexual content in the process of development of schizophrenia are not explored enough. Our report is concerned with study of forms and regularities of mentioned disturbances, questions of their systematization and distinction from clinically similar disorders of nonendogenous origin.

Methods: Clinical, neurological and experimental-psychological investigation of 102 patients, aged 41–78 years of age was performed.

Results: Psychotic disturbances with sexual content manifest in forms of: 1) hallucinatory disturbances (patients hear the scenes of sexual contacts between their wives and lovers); 2) delusional disturbances of paranoid or paranoid character (delusion of jealousy, delusion of influence on genitals); 3) delusional ideas of nihilistic-hypochondriac character ("sexual organs are atrophied", accuse themselves in being homosexuals, in sexual perversions). As the melancholic paraphrenia develops, the patients consider themselves as biological parents of all the people with sexual perversions in different historical periods.

Conclusions: Psychotic disturbances with sexual content in schizophrenia have their quite pathognomonic psychopathological features, which gives us a basis to distinct different forms of schizophrenia, proceeding with sexual disturbances.

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INTENTIONALITY AND ERPs IN THE THREE DIMENSIONS OF SCHIZOPHRENIA

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Objectives: To verify the existence of different patterns of relationship between intentionality and Event Related Potentials (ERPs) in the 3 dimensions of schizophrenia.

Methods: Study participants were 60 physically healthy psychiatric inpatients who met DSM-IV (4) criteria only for Schizophrenia (SCID). All patients were divided in 3 groups by dimensions of the Comprehensive Assessment of Symptoms and History (CASH). They were treated with 400 mg/day of chlorpromazine equivalents and were assessed for intentionality by the Mundt's Intentionality Scale (INSKA), for ERPs by a 19 electrodes oddball paradigm.

Results: The comparison of INSKA mean scores and ERPs recordings of the 3 groups, did not show any significant difference. The analysis of within-group correlation of variables showed that the 3 dimensions had strongly different correlations between INSKA total score and Latency of N1 wave.

Conclusions: Different patterns of relationship between intentionality and ERPs in the 3 dimensions of schizophrenia may exist; this could suggest different neurophysiopsychopathological profiles which could have important nosological and pharmacological implications.