

remarkable for low Self-directedness, indicating immature individuals with increased risk of personality disorder. Their mothers were distinguished by low Self-directedness indicating a high risk of personality disorder. The fathers were low in Persistence and Self-directedness indicating an inert and immature personality.

The bulimic family had low Self-directedness as a common denominator observed in all family members. This finding indicates that the psychopathology of bulimia nervosa combines the tendency to anxious and depressive reactions with low character development. None of the above temperament and character profiles is pathognomonic of BN. Rather, individual psychopathologies of each family member interact within a unique familial setting generating in susceptible members (daughters) the syndrome of BN.

The observation of that both temperament and character have important role in the etiopathogenesis of BN has important treatment ramifications.

The TCI was very useful in discriminating between normal controls and bulimic subjects, their parents, and the whole bulimic family.

P02.303 STUDY OF PSYCHOTIC DISORDERS WITH ARTIFICIAL NEURAL NETWORKS

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Introduction: During the recent years advances in artificial intelligence (AI) and particularly in the connectionist models are being used by psychiatrists in an attempt to explain brain function. Also neural networks have begun to receive attention in the investigation of clinical decision-making problems. The new paradigm seems to give practitioners some hope that the further understanding of mental illness could be greatly enhanced by the new prototypes.

Objective: The aim of this paper is to develop a neural network system that it will be used to implement a diagnostic expert system with a sample of psychotic patients.

Hypothesis: We investigate the hypothesis that a non-linear classification of psychotic cases into and subtypes by an neural network is more accurate than the linear classifications carried.

Material and Method: The sample consisted of 200 psychotic inpatients who met the following criteria: ages between 15 and 75 and having the presence on admission of delusions. Candidates for study who had mental retardation, questionable diagnoses, known organic dysfunction, alcoholism or drug related disorder were excluded. After a washout period (24 hours) and before taking medication the patients were assessed by two interviewers with a questionnaire to know several phenomenological characteristics of delusions and with CPRS scale

Results: It was obtained an auto-organizer map to classify psychotic patients. It was established different clusters with different diagnostics. Also it was obtained the relation between psychotic disorders. Delusional disorder is related to Schizophrenia, Schizophreniform disorder, psychotic disorder not otherwise specified, Schizoaffective disorder (bipolar type) In the map bipolar disorder with psychotic symptoms and major depressive disorder with psychotic symptoms appeared far from paranoia

Conclusions: 1. Decision making is a complex phenomenon and other mechanical decision tools as artificial neural networks could be incorporated into parts of the clinical decision making in order to improve it. 2. Artificial neural networks have a prominent role in decision support for delusional disorders. 3. Artificial neural

networks give information about the relation between delusional disorder.

P02.304 PREDICTING OUTCOME OF FIRST EPISODES OF SCHIZOPHRENIA

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Introduction: There have been a large number of studies of outcome in Schizophrenia. These studies have provided many suggestions about important variables in understanding and predicting outcome. However, there many methodological and conceptual issues. The present two-year follow up study applied multiple outcome criteria to investigate prognosis factors in Schizophrenia.

Objectives: The aims of the present study were: 1. To study outcome patterns in Schizophrenia compared with other disorders. 2. To Know the relationship among the four areas of Strauss-Carpenter scale. 3. To evaluate the relative prognostic contributions of both background and psychopathological variables in Schizophrenia

Hypothesis: A higher total score on negative symptoms at index admission predict poor outcome at two years follow-up. A higher total score on negative symptoms at two years follow-up period predict poor laboral function.

Material and Method: The initial sample consisted of 102 patients with first psychotic episodes admitted to Hospital Virgen of Arrixaca. Of the 102 patients, 46 were diagnosed as Schizophrenic. A battery of clinical and sociodemographic measures were used at index admission. After two-years follow-up period 80 patients were re-assessed in the same terms. Also it was used Strauss-Carpenter scale to evaluate outcome function in the following four areas: frequency of social contacts, percentage of time employed, severity of symptomatology and amount of time spent out of the hospital during the past year. Multiple regression analysis were used to find predictor variables of outcome.

Results: At index admission and at two years follow-up period Schizophrenic patients had higher scores on all negative symptoms except attention deficits than non Schizophrenic patients. At index admission Schizophrenic patients scored higher on Hamilton Scale than the other group. It was found significant difference on outcome scores in both groups.

Conclusions: At index admission clinical and sociodemographic variables do not predict outcome in Schizophrenia. At two years follow-up a higher total score on negative symptoms predict poor laboral function.

P02.305 A COMPARISON OF ENGLISH AND ITALIAN DRUG LEGISLATION, THEIR POLICIES OF INTERVENTION AND ANY CONSEQUENCES UPON STRESS AND BURNOUT AT WORK

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One of the particular characteristics of the "Helping Services and the Helping Professions" is that the workers are the direct instruments of that help. In particular, in the Drug Addiction Services, the wellbeing and the stability of the helper are one of the most important presuppositions of being able to carry out therapeutic work.

But in these services, the strong investment in the relationship with the drug users and with the phenomenon of drug addiction