

## Posters, Sunday, 29 October 2000

### P01.01

#### THE SOMATIC ETIOLOGY OF CYCLOID PSYCHOSES

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The concept of cycloid psychoses goes back to Wernicke and Kleist and was sophisticated elaborated by Leonhard. From a clinical point of view three subtypes have to be differentiated: anxiety-happiness psychosis, motility psychosis and confusion psychosis. Recent research clearly indicates that in contrast to the heavily genetically loaded unsystematic schizophrenias among cycloid psychoses genetic disposition was almost irrelevant. However, complications during pregnancy and birth play an important etiological role. Apparently, environmental stressors present in certain periods of critical brain development can contribute towards the predetermination of an individual to develop cycloid psychosis later. Further, clinical experience point to different therapeutical strategies in cycloid psychoses compared to schizophrenic psychoses.

### P01.02

#### LIGHT THERAPY FOR TREATMENT INDICATIONS OTHER THAN SEASONAL AFFECTIVE DISORDER

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Light therapy (LT) has been shown to be effective in the treatment of seasonal affective disorder. Recent research suggests its efficacy also in non-seasonal depression, biological rhythms disorders, and dementia. There is substantial evidence now available in the literature that the combination of LT and pharmacotherapy is effective in the treatment of non-seasonal depression. Also, the combination of sleep deprivation, pharmacotherapy and LT has resulted in a substantial improvement of severely depressed inpatients with non-seasonal depression. The noted studies compared the effects of bright light (light intensity, 3000 lux) with dim light (light intensity: 100 lux). Recently, our group studied the effects of LT in patients with Alzheimer's Disease (n = 11) and Vascular Dementia (n = 11). The administration of bright light, but not dim light resulted in a significant increase of Mini Mental State Examination total scores. Our results suggest that LT may exert beneficial effects on cognitive functioning in demented patients.

### P01.03

#### THE CORRELATION BETWEEN WORK PSYCHOPATHOLOGY AND MIGRATION

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The author analyses the correlation between the work psychopathology, the migration and the role of the occupational physician. The migration was studied and analyzed by many

clinical psychiatrists, occupational psychiatrists and sociologists, who tried to investigate the possible consequences produced by this event on the psychological equilibrium, on social life and on working activities. It is unquestionable, according to the actual knowledge, that a strict correlation exist between work and psyche, or between the uneasiness of the work, cultural belonging and a psychopathology of the work.

Work psychopathology appears to be the measurement of the repercussion of a dangerous work on human mental health, and, consequently, could have a role in better adapting the man to his work.

Therefore, in every work's situation, the risk of a somatic, or psychological or even toxicological pathology, must not be underevaluated. In a perspective of the transcultural evaluation of the "migrant" worker, who has to be introduced in a work environment, the knowledge of the unspecific risks health risks of the migrant and of the cultural differences specifying the cultural value of work, becomes fundamental. Among the symptoms that required particular attention in the evaluation of a worker, the concept of fatigue is certainly fundamental and crucial.

Consequently it is necessary to safeguard the health of "the whole worker" not only acting on the physical and chemical occupational hazards, but also considering the relational and cultural risk factors.

### P01.04

#### TRAINING OF FUTURE PSYCHIATRISTS FOR PSYCHOTHERAPEUTIC WORK WITH PSYCHOTIC PATIENTS

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Recently an american psychiatrist at the end of his career mainly dedicated to psychopharmacology stated: "What the schizophrenic patients need is friendship, company and psychotherapy".

The advances and the emphases in psychopharmacology on psychosocial rehabilitation have occulted the following question: what is the meaning of psychotherapeutic work with psychotic patients?

Is an humanism, a small amount of empathy, a well measured information or authority sufficient to be psychotherapeutic?

Based on a teaching experience of 15 years at the Medecin Faculty of Strasbourg the authors consider the problem of training new psychiatrists regarding the psychotherapeutic relationship with psychotic patients.

They consider technical and conceptual points that will be useful to the young clinicians as key references.