S49.04

was relatively low.

Utilization of psychiatric services among ethnic groups. Results from a nationwide register study

M.C. Kastrup. Psychiatric Clinic, Rigshospitalet, Copenhagen, Denmark

A nationwide study was carried out comprising 50,877 persons aged 18-66, who were registered in 2003 in the Danish Psychiatric Register or in the National Patient Register with a psychiatric ICD-10 diagnosis.

Of the population 87.1% were ethnic Danes, 7.8% migrants, 4.0% off-springs with one Danish born parent, 0.7% off-springs with both parents born outside Denmark and 0.3% adoptees. Males comprised 49% women 51% of the population.

The 5 ethnic groups had significant differences in utilization of care, diagnostic distribution and use of coercion.

Women had a higher contact rates in all groups apart from migrants. The contact rate among persons of Middle Eastern background

Patients with a non-Danish background were more frequently non-voluntarily admitted and had significantly more frequently contact with services due to a forensic measures.

Substance abuse was higher among men in all ethnic groups.

Contacts due to schizophrenia were higher among non-Danish patients and highest among young off-spring males.

Self-mutilating behaviour was seen more frequently among female off-springs from non-Western countries than among migrant women from non-Western countries.

The paper will analyse selected significant differences among the ethnic groups.

S50. Symposium: FIRST EPISODE PSYCHOSIS: A TRANSCULTURAL EXPERIENCE

S50.01

Outcome of first episode psychosis in the United Arab Emirates: a 5 year retrospective study

M.O. Salem. Department of Psychiatry, Faculty of Medicine and Health Sciences, United Arab Emirates University, Al Ain, United Arab Emirates

Background: A first psychotic episode includes a wide range of disorders with different outcomes.

Aims: To study all patients with their first psychotic episode longitudinally in a circumscribed area in UAE.

Method: The charts of all patients admitted to the psychiatric department of Al-Ain Hospital, in their first psychotic episode, and in their subsequent admissions — if applicable — were studied for 5 years starting from September 1997. Diagnoses of 161 patients were made using ICD-10 diagnostic criteria.

Results: Of total of 161 patients, during their first admission: 69 were diagnosed as "acute psychotic disorder", 35 as "manic episode", 31 as "schizophrenia", 16 were diagnosed as "depression with psychotic symptoms", 3 as "drug induced psychosis", one as "delusional disorder", and 6 with no psychiatric diagnosis. Of the total 161 patients 42 were subsequently relapsed and re-admitted. Analysis of the diagnosis of these 42 patients revealed extensive change of diagnosis in most categories.

Conclusion: In the studied population, the majority of patients presenting in their first episode psychosis seemed to have a favorable outcome, whereas only a minority of them continued to have a relapsing illness.

S50.02

First Episode Psychosis (FEP): Factors associated with delayed access to care in a rural Egyptian setting

M. El-Adl ¹, M. El-Mahdy ², M. Anis ³. ¹ Princess Marina Hospital, Northampton, United Kingdom ² Al-Azhar University, Egypt ³ Mansoura Genera Hospital, Egypt

Aim: To identify factors associated with delayed access of FEP to psychiatric care and possible measures that could help facilitate access and shorten duration of untreated psychosis (DUP)

Background: FEP studies show that average time between onset of symptoms & first effective treatment is often one year or more¹. Long DUP is undesirable as early treatment can reduce suffering and helps minimise risk of serious consequences due to changes in mental state & behaviour^{2,3,4}. Early results suggested that early intervention in psychosis (EIP) service is more cost effective than generic services⁵.

Most FEP studies have been conducted in developed countries. This study aims to address the question of FEP delayed access to care in a rural Egyptian setting.

Method: FEP cases who presented to Psychiatric Department at Mansoura General Hospital over a period of 6 months, were interviewed, together with relevant others either at first contact or after recovering from acute stage using a semistructured interview.

Main results:

- 1. Total cases 40: Schizophrenia 14, Affective disorders: 15, Postpartum disorders: 5 and others: 6.
- On average FEP have first contact with Psychiatric service about 7 months from onset: Schizophrenia: 11 months and Affective within 3 months. No significant gender difference.
- 3. Main factors associated with delayed access to Psychiatric care:
 - Cultural factors (36%): Jinn "Spirit" (16%), preference to traditional healers (10%), female gender (10%).
 - Lack of knowledge about Mental Illness and about service (28%).
 - Stigma (14%)
 - Financial factors (14%)
 - Effect of Mental Illness (7.4)
 - Unsuitable service (0.6%)

Conclusion: Study results indicate that cultural factors, lack of knowledge about mental illness & service, stigma and financial factors may play a significant role in delayed access of FEP to care in rural areas of Egypt. Programs to improve public awareness of mental illness & available service and address stigma are likely to help.

References

- 1. McGlashan TH (1987) Recovery style from mental illness and long-term outcome. Journal of Nervous & Mental Disease, 175, 681-685.
- 2. Ho B-C, Alicata D, Ward J, Moser DJ, O'Leary DS, Arndt Stephan, Andreasen NC (2003). Untreated initial psychosis: relation to cognitive deficits and brain morphology in first episode schizophrenia. American Journal of Psychiatry, 160, 142-148.
- 3. Larsen TK, Johannsen, JO & Opjordsmoen S (1998) First episode schizophrenia with long duration of untreated psychosis. British Journal of Psychiatry (suppl.33), 172, 45 52.