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COMPARISON OF MALE AND FEMALE PATIENTS WITH AGORAPHOBIA

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Objective: To compare clinical features of male and female patients with agoraphobia (AG) and panic disorder (PD) in view of the sex-associated difference in the prevalence of this illness.

Methods: Ninety-five patients (73 women and 22 men) with AG and PD were administered the National Institute of Mental Health Panic Questionnaire, and men and women were compared on its items that pertain to demographics and AG.

Results: Male and female patients did not differ significantly in terms of their current age, marital status, educational level, employment status, duration of AG, pattern of psychiatric comorbidity and global seventy of illness. In comparison with men, women endorsed more situations that they avoided or feared (mean of 13.0 vs. 11.1 per patient), but this difference was not statistically significant. Women feared and/or avoided all agoraphobic situations more frequently, except for the situation of staying at home alone. However, there were only two situations that were significantly more often (p < 0.05) avoided and/or feared by women when alone: buses (85% vs. 59%) and being in unfamiliar places (77% vs. 55%). Women were significantly more likely (p < 0.05) to stay at home to avoid agoraphobic situations, and significantly more often (p < 0.05) required a companion in order to feel comfortable enough to go outside. Eighty-seven percent of married women required a spouse as their companion, in contrast to 46% of married men (p < 0.01). Women who had children were also significantly more likely (p < 0.05) to require a child as phobic companion, in comparison with men with children (51% vs. 18%). Women considered that AG had affected the overall quality of their lives significantly more adversely (p < 0.01).

Conclusions: Female patients with AG may be more impaired than male patients with the same condition, and appear more dependent than men in terms of requiring companions in order to move outside of their homes. The reasons for this finding are probably more social and cultural in origin, since men and women with AG did not differ significantly on most indices of psychopathology.

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DISABILITIES IN PANIC DISORDER WITH COMORBID PHOBIAS

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Objective: Comorbidity with any kind of phobia in patients with panic syndrome is about 30%. In contrast to frequency of panic attacks, phobic avoidance is significantly associated with quality of life and functional impairment. The aim of our study was to evaluate the various types of phobias which co-occur with panic disorder and the extent of their impact on the patients impairment in work, social and family life.

Method: A total of 100 consecutively recruted subjects with a current episode of panic disorder were diagnosed according to DSM-III-R criteria. CGI (Global Clinical Impression) was assessed by an experienced clinician. Data on functional impairment were collected with the Sheehan disability scale (SDS).

Results: From a total of 100 patients, mean age 33.7, comorbitity with agoraphobia was 76%, social phobia 22% and simple phobia 16%. Group values the whole comorbid group, for each phobia and for cooccurrence of one and two to three phobias were tested against the non-phobia group. We found significant differences in social life function (p < 0.001) and for the CGI (p < 0.05).

	PDnon	sig	PDcophob	PD + 1 phob	PD + 2.3 phob
n =	20		80	41	28
CGI	5.55	0.489	7.175	5.94*	9.65*
SDSwork	5.83	0.763	6.087	5.83	6.46
SDSfam	3.6	0.584	4	4.06	3.9
SDSsoc	4.25	0.002**	6.46	5.92*	7.28**

^{* =} P0.05 to 0.01; ** = p0.001 to 0.002

All group values were tested for significancy against Panic disorder (PD) without comorbidity.

Conclusions: The frequent co-occurrence of all types of phobia in patients with panic syndrome and the therefore resulting impairment requires a broad psychiatric assessment and treatment.

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IMPAIRED CONDITIONAL DISCRIMINATION IN PANIC DIS-ORDER PATIENTS

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Objective: An eyelid conditional discrimination (ECD) learning task, which has been shown to selectively test temporal lobe function, was used to examine unconscious discrimination learning capacity in panic disorder (PD) patients to test the hypothesis that in PD the ability to differentiate between significant (ie dangerous) and unsignificant stimuli could be impaired.

Method: 37 PD patients diagnosed according to DSM-III-R criteria and matched healthy controls (HC) underwent an ECD experiment as described by Daum (Daum I et al.: Classical Conditioning after Temporal Lobe Lesions in Man: Impairment in Conditional Discrimination. Behavioral Neuroscience 105: 396-408, 1991)

The response frequencies to reinforced (CRR) and unreinforced trials (CRU) were quantified.

Results: As predicted by our hypothesis the response ratio of CRR to CRU was reduced in PD patients as compared to HC (CRR \pm SE/CRU \pm SE: PD 20.2 \pm 3/17.2 \pm 3.2; HC 33.8 \pm 8/11.2 \pm 3).

Conclusion: This is the first experimental study showing, that there is an impaired ability to discriminate between significant and insignificant stimuli in PD patients. As suggested by brain imaging studies (Dantendorfer K et al: High Frequency of EEG and MRI Brain Abnormalities in Panic Disorder. Psychiatry Research: Neuroimaging 68: 41-53, 1996), showing functional and morphological brain abnomalities in PD our study points out the possibility of temporal lobe dysfunctions at least in subgroups of PD patients.