

P09.02

Reliable discrimination of axis II disorders in panic disorder

G. Pérez¹*, M. Cabre¹, F. Gutierrez², J. Sangorrin¹, A. Bulbena¹, R. Martin-Santos¹. ¹Hospital del Mar – IMAS, Barcelona; ²Hospital Clinic Barcelona, Spain

Objectives: to set differential personality profiles for subgroups of patients with panic disorder diagnoses through the Temperament and Character Inventory (TCI), and to test its ability to discriminate those patients with a personality disorder (PD).

Method: 82 consecutive outpatients diagnosed of DSM-IV panic attacks with/without agoraphobia were administered DSM-IV structured interviews (SCID, SCID-II) and TCI. T-tests, partial correlations, and linear regression analyses were conducted.

Results:

1. Classification in terms of current/previous panic disorder diagnosis shows differences in TCI dimensions: Harm Avoidance and Self-directedness ($p=0,001$; $p=0,032$). No dimension is related to agoraphobia.
2. Presence/absence of comorbid current affective disorder shows differences only in Self-directedness ($p=0,015$).
3. Regression analyses point to Reward Dependence as the only stable significant discriminant of PD ($p<0,001$), though Self-directedness also reflects predictive power ($p=0,001$) as other variables leave the regression equation.

Conclusions: the TCI reflects different temperamental profiles depending on emotional states. Nevertheless, presence of anxiety/depression shows distinct overall profiles (anxiety affecting Harm Avoidance, and depression affecting Self-directedness). Besides, the TCI seems to clearly discriminate personality disorders in axis I disordered patients, becoming a very useful clinical tool.

P09.03

Psychopathological evolution in patients with bladder tumor

A. Matos-Pires*, M. Nascimento, L. Paula, D. Pires-Barreira, J. Dias, F. Cavaglia. *FML, ISCS-Sul, Lisbon, Portugal*

Objectives: It is axiomatic to say that psychopathological features change through time. However, some factors play a key role. In this study we focused on bladder instillation chemotherapy in patients with bladder tumor.

Methods: A sample of ten patients with bladder tumor were selected in order to comply with the inclusion criteria. A lag of six months was defined between the two evaluations. The following assessment tools were used: Symptom-Check-List-90-revised (SCL-90) and the "Inventário de Avaliação Clínica da Depressão" (IACLIDE).

The time series data was interpreted by means of an analysis of variance (within-subjects factor). It is a non-controlled study.

Results: The values obtained with the SCL-90 in the second evaluation do not show significant differences. However, standard deviations are less relevant. A IACLIDE result regarding incapacity towards work (IVT), shows a significant clinical improvement ($p=0,047$).

Conclusions: It seems that the chemotherapy applied had, somehow, a normalising effect on the sample studied. Also, the data suggest that a certain psychopathological profile was imposed. Chemotherapy seems to lessen the incapacity towards work during a six-month period so this particular treatment appears useful, besides obvious medical gains, in the psychopathological profile of the sample studied.

P09.04

Heavy cannabis users seeking treatment: prevalence of psychiatric disorders

M. Arendt*. *Psychiatric Hospital in Aarhus, Department of Psychiatric Demography, Denmark*

Objective: To estimate the prevalence of psychiatric disorders among 1439 heavy cannabis users seeking treatment for abuse problems.

Method: Using 2 different registers comparisons were made with 9122 abusers of other substances.

Results: Cannabis users were younger and more often males, but otherwise demographic data suggested that the group was as marginalized as users of hard drugs. Secondary abuse was common with raised levels of amphetamine, alcohol and ecstasy consumption compared with other users. The prevalence of psychiatric disorders was high. Cannabis users had significantly raised levels of depression ($p<0,0001$) and personality disorders ($p<0,0001$) compared with users of other drugs, while the prevalence of schizophrenia was marginally raised ($p<0,05$). These results were obtained after control for age, gender and secondary abuse, using logistic regression analysis.

Conclusion: Co-morbid psychiatric disorders are common among heavy cannabis users, and some disorders occur more frequently compared with users of other substances.

P09.05

Social anxiety and anxiety disorders

O. Zikic¹*, L. Trajanovic¹, A. Djordjevic², Z. Stevanovic¹. ¹Clinic for Mental Health Protection, Nis; ²Clinic for Psychiatry, Yugoslavia

Usually, high level of social anxiety is connected to social phobia. However, it is noticed that intense social anxiety may occur in frame of other anxiety disorders. The aim of our work was to estimate the level and characteristics of social anxiety that occur within various anxiety disorders. In order of getting necessary data, we used Anxiety Disorders Interview Schedule – Revised (ADIS), and for estimation of intensity of social anxiety Willoughby Personality Schedule (WPS). Results point to the fact that social anxiety is more intensive in group of patients suffering from anxiety disorders than in control group. The most prominent scores of social anxiety (WPS score >50) were dominant in Generalized Anxiety Disorder and Obsessive–Compulsive Disorder. Moderately increased values of the social anxiety (WPS score 30–50) were dominant in Posttraumatic Stress Disorder and Panic Disorder. In group with normal values of social anxiety (WPS score <30) was dominant Simple Phobia, in which values of social anxiety were closest to control group. Group of patients with positive comorbidity had higher scores of social anxiety compared to group with no comorbidity.

P09.06

Hormonal therapy of mental disorders caused by menopause

S. Netrusova*. *Research Institute of Social & Forensic Psychiatry, Kiev, Ukraine*

We have studied the effectiveness of Hormonal Therapy (HRT) in treating mental disorders of nonpsychotic level among women with natural and surgical menopause. Seventy women have been examined: 33 had natural menopause and 37 underwent hysterophorectomy. We used clinical and psychodiagnosical methods. The astenic syndrome was proved to be not only most frequent, but proved

obligatory, dominating and through. The typical syndromes were depressive, senestophobic and hysterical ones. The usage of HRT as monotherapy was proved to be effective and pathogenetical method of treating psychic disorders caused by menopause. In case of HRT being not effective, the various psychic disorders expressed mainly in depressive and phobical symptoms and to treat these disorders psychotherapy and additional psychotropic medicines should be applied.

P09.07

Prevalence of obsessive-compulsive disorder in schizophrenia and significance of motor symptoms

P. Bräunig¹*, S. Krüger², J. Höffler³, G. Shugar⁴, I. Börner³, J. Langkräus⁵. ¹Klinik für Psychiatrie, Verhaltensmedizin und Psychosomatik am Klinikum Chemnitz gGmbH; ²Department of Psychiatry, University of Dresden; ³Klinik für Psychiatrie und Psychotherapie, Gütersloh, Germany; ⁴Center for Addiction and Mental health, University of Toronto, Canada; ⁵Klinik für Psychiatrie und Psychotherapie, Universität Bochum, Germany

Objective: To investigate the differences between schizophrenic subjects with and without OCD.

Methods: Seventy-six schizophrenic subjects were systematically assessed for OCD. Subjects with and without OCD were then compared for motor symptoms including catatonia and several measures of psychopathology. Treatment strategies were evaluated retrospectively.

Results: The 12 subjects with OCD (15.8%) had more motor symptoms including catatonia than non-OCD schizophrenics. Some differences were found with regard to psychopathological symptoms. Treatment strategies also differed in the 2 groups.

Conclusions: The high prevalence of motor symptoms in these subjects supports the hypothesis of a basal ganglia-frontal lobe connection linking OCD with schizophrenia.

P09.08

Fahr syndrome

N. Bjelica*, S. Slovakovic, M. Preradovic, Z. Spiric, R. Samardzic. Military Medical Academy, Department of Psychiatry, Belgrade, Yugoslavia

The idiopathic calcification of basal ganglia is neurodegenerative syndrome, which includes different neurological, behavioral and cognitive manifestations. Fahr first described it in 1930. Etiological reasons and pathoanatomic substrate for this syndrome is not yet clear, but sometimes it goes together with hypoparathyroidism and pseudohypoparathyroidism.

Patient A. C. 46 years old, in resent 4 years is cured under the diagnosis of Fahr syndrome. This patient had three psychotic decompensations, with depression, psychomotor agitation and social dysfunction. Calcification of nucleus lentiformis on CT can be seen, while the level of serum calcium and ultrasound of glandule parathyroid is normal.

P09.09

Characteristics of sustained depression in patients with acute coronary syndrome (ACS)

C. Sørensen¹*, A. Brandes², O. Hendricks³, J. Thrane⁴, E. Friis-Hasché⁵, T. Haghfelt⁶, P. Bech⁷. ¹The Medical Research Unit, Ringkøbing County; ²Herning Central Hospital; ³Sønderborg Hospital; ⁴Odder Central Hospital; ⁵Copenhagen University, Department of Medical Psychology; ⁶Odense University Hospital; ⁷Frederiksborg General Hospital, Denmark

Aim: To examine the prevalence of sustained depression in recently discharged ACS-patients in relation to cardiovascular factors.

Method: 899 patients completed the Major Depression Inventory at discharge and at 6 weeks. Previous depression, family history of depression and relevant information were obtained from the hospital records.

Results: At discharge 17% were depressed but only 8,4% were still depressed at 6 weeks. These patients were female, single, previously depressed and having a family history of depression for all $p < 0,001$. Depressed patients had more often had a previous myocardial infarction $p < 0,008$ but no difference in the prevalence of diabetes, smokers, body mass index or serum cholesterol. Depressed patients had smaller infarcts $p < 0,016$, lower ejection fraction $p < 0,043$ and lower workload $p < 0,003$ but no difference in systolic blood pressure.

Conclusion: Depression is common at discharge in ACS-patients but only present in half the patients 6 weeks later. These patients are characterised by psycho-social risk factors for depression. The higher prevalence of previous myocardial infarction may explain the lower ejection fraction and workload in depressed patients although their present infarcts are smaller.

P09.10

Affective disorders in neurological diseases: a register based study

F.M. Nilsson¹*, L.V. Kessing¹, T.G. Bolwig¹, T. Møller Sorensen², P.K. Andersen². ¹University Hospital Rigshospitalet, Department of Psychiatry, Copenhagen; ²Biostatistics Department, University of Copenhagen, Denmark

The aim of this study was to investigate the temporal relationships between a range of neurological diseases and affective disorders. Data derived from the Danish hospital register system by the use of linkage of two registers and using the Danish register of causes of death for censoring purposes.

Seven cohorts with neurological index diagnoses and two control group diagnoses were followed for up to 21 years. The incidences of affective disorders in the different groups were compared with the control groups.

P10. Community services

P10.01

Experience from the first ACT-programme in Denmark. I. Baseline evaluation

J. Aagaard*, Jørgen Achton Nielsen. Department of Psychiatric Hospital, Aarhus Psychiatric Hospital, Aarhus, Denmark

Objective: The successful US-model of Assertive Community Treatment (ACT) has only been evaluated in a few European studies, and with conflicting results. On May 1, 2001 we started up with an ACT-programme in the Tønder-region (45,000 inh.), SJ-county (253,482 inh.). The programme contained the essence of