

## W07. Interpersonal psychotherapy as individual and group treatment on an affective disorder ward

*Chairs:* M. Schmidt-Degenhard (D), T. Gruttert (D)

### W07.01

#### INTERPERSONAL PSYCHOTHERAPY AS INDIVIDUAL AND GROUP TREATMENT ON AN AFFECTIVE DISORDER WARD

T. Grütter. *Christian-Albrechts-University of Kiel, Clinic for Psychiatry and Psychotherapy, Germany*

Based on the necessity for problem, resource and method oriented differential indications for choice of specific psychotherapeutic intervention Klerman's et al. Interpersonal Psychotherapy (IPT) has evidenced to be on of the two most effective treatments for depressive disorders. IPT is enhancing diverse interpersonal skills and emphasizes the value of functioning interpersonal relationships as on paradigm of cure of depressive illness. This workshop will focus on the implementation of IPT on an affective disorder ward (ADW) either in an individual or in a group format. The following aspects will be focussed on in reference to an ADW: 1) time frame, 2) medical model and psycho-education, 3) dual aims of solving interpersonal problems and symptom remission, 4) interpersonal focus on patient's (maladaptive) affective engagement and behavioral skills referring to main problem area contributing to current depression, 5) specific IPT techniques. Informations about structure and contents of IPT in a group format will be given and the following questions will be answered: 1) What are the effective change processes of IPT and how will they be preserved in the group format?, 2) How will a focus on each individual's work be maintained in the group format?, 3) How are the therapist and the patients role defined in the individual setting and how will they be maintained in the group format?, 4) What are the techniques of the individual treatment and how will they be delivered in the group format and 5) What group process needs to be considered to facilitate effective implementation of the individual treatment?

## FC01. Family functioning and abuse

*Chairs:* M. Gómez-Beneyto (E), P. Pöthe (CZ)

### FC01.01

#### SOCIAL FACTORS AND WOMEN'S MENTAL HEALTH IN RUSSIA

T. Dmitrieva\*, M. Kachaeva. *Serbsky National Research Center for Social and Forensic Psychiatry, Moscow, Russia*

Mental health problems in women must be analysed within a social and cultural context. Transitional period is going on in Russia and this socio-economical situation has brought changes not only in society but also in families which are vulnerable to challenging situations. Social turbulence is leading to growth of violence in families. The problem reflects culturally determined mentality of Russian women who are very patient and tough from early childhood not to show personal feelings in public. Meanwhile domestic abuse against women often results in long term mental health problems. A research has been carried out on

the basis of psychiatric and forensic psychiatric assesment of 2 groups of women who had a long history of violence by their husbands. Women of the first group suffered from depression and have committed attempted suicides. Another group of victims of domestic violence responded by killing their husbands. Thus the study reveals psychogenic causes of homicides and suicides in women.

### FC01.02

#### FALSE ALLEGATIONS OF PHYSICAL ABUSE IN CHILD: MUNCHAUSEN BY PROXY OR FOLIE A FAMILLE?

I. Savvidou<sup>1</sup>\*, V. Bozikas<sup>2</sup>, K. Christianopoulos<sup>1</sup>, A. Karavatos<sup>2</sup>.  
<sup>1</sup>*Child Psychiatry Clinic, Hippokraton Hospital of Thessaloniki;*  
<sup>2</sup>*A' Psychiatric Clinic of Aristotle University of Thessaloniki, Greece*

The pathological reactions of child rearing within a context of distorted reality, has not been adequately studied. The child's acceptance and cooperation in false allegations by parents, reaches sometimes the extent of active support and enrichment of them, with his/her own ideas. This behavior is partly acceptable in younger children, but in pre-pubescent children and adolescents the 'abnormal susceptibility' needs further investigation. In these cases the reality control is disturbed and different types of psychopathology may evolved in the child.

In the present study the unusual case of an 11-years-old child is presented, whose parents as well as himself, bring forth false allegations of repeated physical abuse induced by a school teacher. Subsequently, several prosecutions have been testified against the teacher. The family is of low socio-economic and educational level, and lives socially isolated, mainly because of the paranoid attitudes of parents towards the social environment. The child presents low intellectual functioning and living in a context of distorted reality, shows behaviors of factitious disorder. From this position he supports the beliefs of his parents, obeying to, and at the same time, protecting them.

The difficulties of differential diagnoses in the assessment of the family, is discussed. The main hypotheses involve folie a trois or Munchausen by proxy with the legal system in the role that medical system has in typical cases. Besides, connections regarding the pathogenesis of symptoms in child are discussed. Finally, the process and the difficulties of therapeutic interventions are mentioned.

### FC01.03

#### INFLUENCE OF MOCLOBEMIDE ON SEXUAL PERFORMANCE IN PATIENTS WITH PSYCHOGENIC ERECTILE DYSFUNCTION

K. Mann\*, J. Pankok, J. Leissner<sup>1</sup>, O. Benkert. *<sup>1</sup>Dept. of Psychiatry and Urology; University of Mainz, Germany*

Based on the assumption that the selective reversible MAO-A inhibitor moclobemide might have a specific therapeutic effect on erectile dysfunction independent of its antidepressive properties, a double-blind placebo controlled study was carried out over 8 weeks. 12 male outpatients, 25 to 58 years old, suffering from erectile dysfunction according to DSM-IV were randomly assigned to a placebo and a verum group (moclobemide 450 mg during the first week and 600 mg during the following seven weeks). The patients had no diagnosis of any other psychiatric disorder, and there was no evidence of organic factors relevant for sexual function. Erectile function was assessed by the Clinical Global Impression (CGI) scale. In addition, nocturnal erections were measured in the sleep