

admissions to a ward of a university hospital specialized for the detoxification of alcoholics. The alcohol history was assessed through a structured questionnaire. Reliable data on the history of medical disorders (liver diseases, pancreatitis, gastritis, gastric or duodenal ulcer, pneumonia, diabetes, hypertension, heart disease or brain trauma) were available for 43 patients.

Results: Of the study 71.7% had current somatic problems or disorders. The most often are gastrointestinal disease pathology consisted of cardio-vascular diseases (stage II–III hypertension, ischemic heart disease, autonomic vascular dystonia), more cerebral degeneration, liver disease or alcoholic polyneuropathies. In our sample 36.7% are divorced; and 40% have heredity.

Conclusions: Alcoholism is a major contributor to the physical ill-health. Treatment or rehabilitation of addictive behavior should be of major concern for adequate service planning or provision.

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Hazardous lifestyles in patients with schizophrenia treated with antipsychotics: results of the Bosnian clinical study

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Introduction/Objectives: Individuals with schizophrenia are in greater risk of physical illnesses, and their life is shorter comparing with general population. Hazardous lifestyles as tobacco smoking, lack of physical activity, and obesity contributing to this negative trend. Role of antipsychotic therapy, particularly second generation is also possible. This study aimed to establish hazardous lifestyles in clinical sample of patients with schizophrenia treated with first or second generation antipsychotics.

Participants, Materials/Methods: Study included 60 patients with schizophrenia (38.3% women) treated with antipsychotics for period of 6 months or longer. Experimental group included 30 patients treated with second generation antipsychotics, and control group included 30 patients treated with first generation antipsychotics. Physical activity, tobacco smoking, and waist circumference as an increased body weight indicator were analysed. Overweight was defined as a waist circumference above 102 cm for males and 88 cm for females.

Results: Mean age was 44.5 ± 12.6 . In this sample were 75% tobacco smokers, 30% of subjects taking typical, and 43% of subjects taking atypical antipsychotics declared physical inactivity during most of the day. Increased waist circumference was established in 51.6% of subjects. There wasn't any statistically significant difference between two group of subjects ($P = 0.538$).

Conclusions: Hazardous lifestyles including cigarette smoking, lack of physical activity and increased body weight are common in the individuals with schizophrenia. There wasn't any statistically significant difference between subjects taking first or second generation antipsychotics.

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Water poisoning with schizophrenic patients in conjunction with psychotic perceptions

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Introduction/Objectives: This research paper introduces a patient who, within the psychotic perceptions, a night before being

hospitalized, in a short time interval (2 hours), drank an average of 10 liters of water in 2 hours. Hypotonic hyperhydration has developed and led to water poisoning with a developing polymorphic symptomatology at the somatic level.

Participants, Materials/Methods: The patient (A.B. born in 1988) had initial psychological problems 6 months prior to being hospitalized in August 2003, at the age of 15. During 2003 and 2004 he was treated four times with the following diagnosis: Dg.F23.0 and F20.1. As of 2004 and until March 2007 the patient reported regularly for control examinations and was taking his therapy. He was in a relatively stable remission until 7 days ago, before coming to our clinic. A night before being hospitalized, in a short time interval (2 hours), he drank some 10 liters of water. Consumed with his psychotic experiences, he drank larger quantities of water to destroy "a growing mushroom in his stomach that was killing him". Nausea, vomiting, uncontrolled movements and spasms of the entire body have occurred, followed by a series of epileptic seizures of Grand-mal type (according to data provided by parents), with mouth foam, micturition and loss of conscience. Several urgent exams have been done: lab tests, screening test on narcotics and other psychoactive substances, internist', infectologist's, neurologist's procedures, abdominal ultrasound, EEG, brain CT

Results: The patient spent 12 hours under observation at the Emergency Center. After administered therapy (Diazepam vials 20 mg – i.m./inf. Ringer-lactate + hypertonic solution of NaCl) he is of a clear conscience, properly orientates in every direction, communicative, without conscience crisis, corrected lab values (Na 141 mmol/l, blood sugar 3, 6 mmol/l). Checkup EEG normal. After conducted checkups with the internist, neurologist and infectologist, the patient was admitted to psychiatric clinic for continued treatment.

Conclusions: This case study was to point the attention of a doctor – psychiatrist to unpredictability of a clinical course of psychotic process. Despite the regular checkups and prescribed therapy, the patient had a worsening psychological status followed by intensive psychotic perceptions, where he consumed large quantities of water. It led to polymorphic-somatic problems, which ultimately might have led to patient's death.

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Services for telepsychiatry – indicator for mobbing

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Introduction/Objectives: Telepsychiatry, as a branch of telemedicine, may be defined as the delivery of psychiatric treatment remotely, using live two-way video-teleconferencing equipment. Telepsychiatry and e-mental health services primarily involve videoconferencing over high speed (broadband) networks to enable natural interactions between patients and providers. The term "telepsychiatry" refers to the use of telecommunication technologies with the aim of providing psychiatric services from a distance. Services for telepsychiatry provided include:

- 1) Mental health Consultation services
- 2) Medication Review
- 3) Follow-Up Visits to Monitor Patient Progress
- 4) Individual and Family Therapy
- 5) Emergency Consultation
- 6) Patient Care
- 7) Medication management without travel
- 8) Employee Assistance Program

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In this paper, we showed the experience, application and effect of various treatment models, including telepsychiatry use for psychometric instruments, tests and scales. Clients' examinees have given their consent to participate in the research and treatment of mobbing phenomena.

Participants, Materials/Methods: Total sample data is 220 examinees, in the age of 18–65 years, of both sexes, all working people, of different social status and cultural habits. They have been treated in Center for telepsychiatry in virtual psychiatry Ambulance for various psychiatric syndromes all having the same denominator-mobbing, as ethiopathogenetic factor. In the research, the following instruments were used: Questionnaire of socio-demographical, Telepsychiatric interview (with teleconsultation), Beck's scale for self-esteem of depression, Hamilton's scale for depression (HAM-D) and Hamilton's scale for anxiety (HAM-A).

Results: Upon evaluation, it was identified that major proportion of examinees shows:

- 1) Mental health and psychiatric diagnosis 142 (64, 55%)
- 2) And other Different somatic diagnosis 74 (33, 64%)
- 3) And only 4 (1, 81%) without any diagnosis.
- 4) From 142 (64, 55%) Mental health and psychiatric diagnosis major 110 (77, 46%) include symptoms of depression; that is statistically important $P < 0.01$.

Conclusions: With treatment by telepsychiatry with teleconsultation result is significantly reduces consequences to mental health. These facts are best confirmed by measurement instruments used during this research: HAM-D, Beck's scale and ICD 10. Phenomena of abuse on workplace should be continuously researched, and all gained results could have significant clinical, public health and research implications.

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Untreated schizophrenics in hard felony commitment

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Introduction/Objectives: Analysis of diagnostic categories in respect to character of felony committed, among the patients on forensic ward of Specialized Psychiatric Hospital Kotor, Montenegro, reveals that 5 of 21 hospitalized patients who committed homicide where tempore criminis in a state of unaccountability due to mental illness – paranoid schizophrenia psychosis.

Participants, Materials/Methods: In 4 of 5 cases mentioned, illness was diagnosed for the first time during forensic – psychiatric expertise and so, based on assessment of clinical status of subject and their occupational and social disfunctionality, it is ascertained that the beginning of illness dates from the period much prior to the crime committed, but the patients didn't have psychiatric treatment and have never taken antipsychotic therapy.

Results: Regular application of psychopharmacological protocol led to a reduction of psychotic phenomenology and, according to indicators on scale of aggression, to a significant decrease in estimated risk from auto and hetero destructive behavior.

Conclusions: Regarding that further larger number of chronically ill patients who suffer from paranoid schizophrenia and are regularly treated never committed a crime in their personal history (do not have criminal behavior in their personal history), even though it is a psychiatric disorder permanent in character, mentally ill patients cannot be considered permanently aggressive toward the surroundings or themselves.

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Psychosis and Parkinson's disease

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Introduction/Objectives: Psychosis in Parkinson's disease can be caused by both extrinsic and intrinsic factors.

Participants, Materials/Methods: Case presentation: In the period from 1982 to 1986 the patient S.A. (75-year-old woman) had been hospitalized several times. She was admitted to the psychiatry with the diagnosis psychosis depressive and cured with antipsychotics (clozapine, levomepromazin) and antidepressants (maprotilin). In 2009 she was again admitted, but this time in the semistuporous state, mutistic, with the clinical state of paranoid – halucinatory psychosis. She was diagnosed Parkinson's disease 2 years ago and has been treated with the combination of levodopa and benzerazid as well as entekapon.

Results: The question is whether the trigger for the psychosis is Parkinson's disease, antiparkinsonian medications in itself, or the previous psychiatric diagnosis represents the risk factor which enables the antiparkinsonian medications to activate the psychosis. The treatment involved gradual decrease in the dosage of antiparkinsonian medications and introduction of antipsychotics (clozapine).

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Benzodiazepine derivatives consumption in the Republic of Croatia in 2005, 2006 and 2007

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Introduction/Objectives: Benzodiazepine derivatives are drugs used to relieve anxiety, muscle spasms, and seizures and to control agitation caused by alcohol withdrawal. A review of the cost and consumption for all medicines and benzodiazepine derivatives in Croatia in 2005–2007 periods, as well as the data on medicine usage for these two groups are obtained. The importance of collecting data on benzodiazepine derivatives consumption is in correlation with the improvement on antipsychotic/anxiolytic therapy.

Participants, Materials/Methods: Agency for Medicinal Products and Medical Devices in Croatia is authorized for collecting and processing data on medicines consumption. Data on medicine usage between 2005 and 2007 was gathered from obliged entities, processed by the DDD/1000inh/day and ATC classification, and the analysis of the financial indicators was done as well.

Results: It was established that the total medicines market in Croatia in 2005 was €520 million and 8.5% DDD/1000inh/day for benzodiazepine derivatives N05BA + N05CD groups, in 2006 it was €562 million and 8.53% DDD/1000inh/day for N05BA + N05CD groups, and in 2007 it was €670 million and 9.37% DDD/1000inh/day for N05BA + N05CD groups. By processing consumption data as DDD/1000inh/day, between 2005 and 2007 consumption of N05BA + N05CD groups were 55.15, 59.37 and 76.5 DDD/1000inh/day, respectively. Expenditure of benzodiazepine derivatives individually was as follows: diazepam was at the first place (20.71 in 2005, 23.02 in 2006 and 23.42 DDD/1000inh/day in 2007. Alprazolam was at the second place (13.99 in 2005, 16.14 in 2006 and 16.9 DDD/1000inh/day in 2007).

Conclusions: During the period 2005–2007, all benzodiazepine derivatives, which were in the market in Croatia, showed a continuous increase in prescribed DDD/1000inh/day. For the entire period diazepam and alprazolam were the most prescribed

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