P01-338 - AN ABRIDGED DSM-IV CULTURAL FORMULATION OF A PSYCHIATRIC CASE

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Background: The DSM-IV Cultural Formulation (CF) is the most important method of cultural assessment, but has not been sufficiently developed.

Based on a case, a proposal is being done here of an Abridged CF trying to:

- 1-Identify the main cultural factors.
- 2-Link this abridged CF to the general clinical formulation.
- 3-Show the effectiveness in arrive at a differential diagnosis and garner patients' adherence

Clinical vignette: A Moroccan 23 year-old woman was admitted in a Psychiatric Service and diagnosed of a manic episode and harmful consumption of drugs and at the discharge she quickly relapsed.

The incorporation of an Abridged CF on her second admission was crucial in building a better therapeutic relationship. There were different explanatory models acting in the case:

- a) her family thought that she was "bewitched" or that the cause were "drugs";
- b) the clinicians' explanatory model was that of biological predisposition to mania, triggered by her drug intake and other vulnerability factors.

This procedure made it possible to reformulate her psychiatric condition and to associate therapeutic goals to the aims of her and her family. It clearly promote a more favourable course and outcome.

Conclusions: A valid abridged CF could foster its broader use in clinical psychiatry, whereas a mandatory full CF runs the risk of being underuse and it would impoverish psychiatric practice and limit the acceptation of psychiatry as a universal brand of medicine.

Reference: Caballero Martínez L. DSM-IV-TR Cultural Formulation of Psychiatric Cases: Two Proposals for Clinicians. *Transcultural Psychiatry*, 2009; 46: 506-523