

58%, Reference: self-reference 28.5%, Compliance: positive 58%, drop outs 42%.

**Conclusions:** All suicide attempters were adolescents. Prior suicidal behavior is the most common finding among the oilier risk factors examined. The significant existence of factors that indicate childhood adversity, social disadvantage and psychiatric morbidity seems to add significantly to an adolescent's suicide attempt. Most of the cases were referred by other medical and judicial services. None of them asked for any kind of help before. This is in accordance with the poor compliance to psychiatric management and also indicates a negative attitude towards asking and using psychiatric help. There is a need for community based suicide prevention programs using appropriate interventions in order to overcome these difficulties and approach the high risk population effectively.

### P02.216

#### ACUTE ADMISSIONS OF FOREIGN BORN PEOPLE IN A CLOSED PSYCHIATRIC WARD

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(a) In studying the ecology of psychiatric disorders, it is important to consider major demographic developments: In Costa del Sol Area (Health Area #II. Málaga. Spain) from the mid-sixties until now the main demographic change has been the increase of foreign residents.

(b) The Psychiatric Unit of the University Hospital is the only referral inpatients ward of the Health Area #II, and, in this study, we examined all the foreign inpatients admitted for a period of three years (1997-1999).

(c) 115 foreign patients were hospitalized: 28% were from United Kingdom, 18% from Germany, 12% from France (76% Europeans, 8% Africans). We evaluate sociodemographic characteristics, DSM-IV diagnostics, and precipitating factors of crisis.

(d) As we can see, main part of our patients comes from more developed countries than Spain, with high educational levels (67% High School or University): This is not the immigrant sample with negative social situations and maladaptation to the new living conditions that is usually described in literature about foreign patients in psychiatric units around the world. Results are discussed.

### P02.217

#### CLINICAL COURSE OF DEPRESSION AND PLATELET SEROTONIN UPTAKE

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It is obvious that adaptive response of expression of serotonin transporter (5-HTT) to long-term treatment with antidepressants performs a significant function in therapeutic action of antidepressant drugs. Relation between serotonin (5-HT) uptake to platelets and therapeutic response in patients treated with selective serotonin reuptake inhibitors (SSRI) was studied. Correlation between characteristics of 5-HTT in platelets and clinical symptoms of depression is subject to determine.

The aim of our study was verification of the biochemical hypothesis of affective disorders related to both decreasing of serotonin reuptake to platelets and changes in lipid composition of plasma membranes. Blood samples from 16 depressed patients, who were never treated by antidepressants, and from 21 controls

were analysed. Tritium labelled 5-HT was used to measure maximal velocity (Vmax) of serotonin uptake and affinity (Kin) of 5-HTT. HAMD and CGI scales were used to characterize clinical courses of depressive disorder. Quantities were obtained before and during the pharmacotherapy.

Contrary to all expectation we observed significantly higher values of Km and only no significant changes in Vmax on the day zero, when we compared depressed patients beside controls. This reflects changes in affinity of 5-HTT rather than its activity. Both Km and Vmax were decreased after treatment by antidepressants. It means that decreased serotonin reuptake during depression is caused rather by the decreased affinity of 5-HTT than by lowering of Vmax. We hypothesise that affinity of 5-HTT can be changed by interactions with membrane lipids, which may be important suggestive element in the pathophysiology of depression.

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### P02.218

#### CYAMEMAZINE: A REVISION OF ITS THERAPEUTICAL ANXIOLYTIC PROFILE BASED ON ITS RECENTLY DESCRIBED ANTI-SEROTONINERGIC ACTIVITY

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Cyamemazine is a neuroleptic compound with sedative and anxiolytic properties. Whether the neuroleptic properties were ascribed to D2 and D4 dopamine receptor antagonism, the mechanism of the anxiolytic action remained a mystery.

Recently, binding studies have shown that cyamemazine possesses high affinity for 5HT2c and 5HT3 serotonergic receptors. Moreover, cyamemazine potently and competitively antagonizes 5HT3 dependant contraction in isolated guinea pig ileum and 5HT3 dependant bradycardia in rats. Finally, cyamemazine antagonizes 5HT2c dependant PLC stimulation in rats caudate membranes.

Several arguments suggest that the anxiolytic activity of cyamemazine may be explained, at least in part, by its 5HT2c and 5HT3 antagonist activity. In animal models of anxiety, 5HT2c and 5HT3 receptor antagonists showed anxiolytic properties. Therapeutic trials in human are controversial as with ritanserine (5HT2 antagonist) as with setron (5HT3 antagonist). The paradoxical data obtained could be explained by differentiated patterns of anxiety in humans. At least the anti-impulsive activity of cyamemazine should be enlightened by 5HT2 antagonism in spite of clear clinical trials demonstrating this link.

### P02.219

#### ENERGY STORES IN ALZHEIMER'S DISEASE (AD)

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It has been reported that patients with AD have altered energy metabolism. We compared energy stores in patients with AD and in controls. Triceps skin fold (TSF) thickness was used to assess energy stores. TSF thickness provides an estimate of the size of the subcutaneous fat deposit which in turn provides an estimate of the extent of total body fat and thus of energy stores. Eleven subjects with AD (DSM-3 R criteria) and 11 control subjects without dementia and with MMS above 25 were included. All subjects were hospitalised in a psychiatric hospital. Patients with AD were 7 males and 4 females aged (Mean  $\pm$  SD) 80.5  $\pm$  5.7 years, MMS 7.6  $\pm$  6.2; controls were 3 males and 8 females aged 76.5  $\pm$  4.2 y, MMS 27.1  $\pm$  0.9. The two groups were not statistically different ( $p > 0.05$ ) for these variables except for the MMS ( $p < 0.01$ ). TSF

thickness was lower ( $p < 0.02$ ) in AD ( $5 \pm 3.7$  mm) (Controls:  $9.1 \pm 4.7$  mm). Our results are indicative of lower fat stores in AD and therefore of lower energy stores in AD. Lower energy stores could possibly contribute to the altered energy metabolism which has been described in AD.

### P02.220

#### TRANSCULTURAL ADAPTATION AND VALIDATION OF THE QUALITY OF LIFE QUESTIONNAIRE

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**Objectives:** Quality-of-Life-Enjoyment-and-Satisfaction (Q-LES-Q) questionnaire (1) validation in the Czech population of depressive patients.

**Methods:** Q-LES-Q (self-administered QoL quest.) consists of 8 domains, seven specific and one general. Transcultural adaptation process within the cohort of depressive patients admitted to the psychiatric ward (F32–33, ICD-10) was performed. Pilot phase consisted of translation, retranslation and comprehensibility tests with 18 subjects. Reliability was assessed using the test-retest and internal consistency methods. Validity was tested comparing the CGI, HAMD, BDI and by the content analysis. SPSS software was used for statistics.

**Results:** Data of 56 patients were analyzed. Reliability part (test-retest) of testing was performed with 24 patients, validity and internal consistency assessments are based on 93 measurements. The analyses indicated the high internal consistency ( $\alpha = 0.8–0.9$ ) and stability of answers over the time (test-retest). The particular Q-LES-Q domains correlated highly ( $p > 0.01$ ) with the HAMD, CGI and Beck questionnaires.

**Conclusions:** The Czech version of a new inventory for depressive disorder patients was validated. It proved satisfactory reliability and validity parameters to be used in daily routine. Medical students were actively involved in quality of life research and their activities brought them new understanding of the patients' other than medical troubles.

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(1) Endicott Jet al.: *Psychopharmacol Bull* 1993; 29: 2 321–6.

### P02.221

#### PREVALENCE OF DEPRESSION (SHORT VERSION OF DEPRESSION QUESTIONNAIRE): SOCIOLOGIC ISSUES

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In Russia up to the last period there didn't exist any systematical experience that may be compared to the depressive disorders investigations. As a sociological action there was made a research in prevalence of depressive disorders among Tomsk population. There were interview 1000 persons (45.7% mail, 54.3% female). Screening inquirer included 5 questions, reflecting the basical depressive symptoms: disforia, loss of interest, loss of pleasure, anergia, suicide thoughts. Also there were marked some sociodemographical data.

27.5% didn't show depressive signs. 6.5% gave affirmative answers to the 5 questions which were defined by clinical syndrome of depressive disorders. 16.8% affirmatively answered the four questions without suicide thoughts which define the depressive symptomcomplex. 38.5% are people under 60 years old with the

max. quantity of depressive signs and the age group up to 30 years old made up 9.2% ( $p = 0.001$ ). 58.6% men and 41.4% women differ in the absence of depressive signs and the amount of men, collected the max. quantity of depressive signs is (33.8%) that is less than women had (66.2%), in multiplicity 1:2 that conforms to the clinical-epidemiological indicators of prevalence depressive disorders in a number of different countries. There were found the significant statistical connections between the in-come scale in a family for one person, the rise of depressive disorders among people with low educational level, and unemployed ones.

The screening inquire well screened the depressive signs and its value proves by outstanding researches in epidemiology and by sociological risk factors of depressive disorders.

### P02.222

#### SUICIDAL BEHAVIOR IN ADOLESCENCE IN WESTERN SIBERIA

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The increase of suicidal behavior all of the world. In Russia the crisis in politics and economy make this phenomenon more vivid. Big number of parasuicide influencing on mental and physical health of adolescents. 509 inpatients (87 male, and 422 female) were examined during the 1997–1998 years in somatic hospital in Tomsk (Western Siberia of Russia). Diagnostic was made according to ICD-10. Social and demographic characteristics and types of parasuicides were registered.

Among those patients the number of females was 4.8 more than males, that reflects population data in different regions of Russia and Europe. 38.9% of the patients were unemployed, 27.1% school students, 18.9% - university students. The parasuicides were such as mixed type - 1% (poisoning, cut wound of neck, chest and arm), poisoning - 99%. 95% used drug for poisoning. The most of the patients (45.7%) were took several kinds of drugs. Mental disorders at the moment of committing a parasuicide were the following: connected with stress disorders - 409 (79.2%), affective disorders - 72 (14.1%), personality disorders - 23 (4.5%), schizophrenia 10 (2%), mental retardation - 1 (0.2%). The important factor is registering of personality disorders because they can influence the symptoms of the current disorder, and sometimes they are one of the parameters that determine the risk of severity of suicidal behavior. The frequency of personality disorders was 34.7%, opium dependence - 2% (males - 6.9%, females - 0.9%).

The data show that adolescence more often commit parasuicides having temporary mental and behavioral disorders and been unemployed.

### P02.223

#### PHENOMENOLOGICAL ASPECTS OF DISSOCIATIVE EXPERIENCES IN DEPRESSIVE AND SUBSTANCE ABUSE PATHOLOGY

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A number of works has pointed out the high prevalence of dissociative symptomatology in many psychiatric conditions such as depression (Gleaves et al, 1996) and substance abuse disorders (Wenzel, et al, 1996). The purpose of this investigation is to study comparatively the frequency and type of dissociative experiences in different samples - depressive patients, alcoholic patients, normal controls - also correlating with demographic variables and chronicity of illness. To assess the dissociative symptomatology we applied