

PMS (according to the retrospective diagnostic criteria which had been recorded during the last 3 menstrual cycles). Then the patients were randomly assigned into two groups, and finally 94 patients who had finished the study were statistically analyzed.

In the Pyridoxine group (46 patients) vitamin B6 was prescribed at a dose of 40 mg twice daily (total 80 mg), and in the placebo group (48 patients) a tablet similar to vitamin B6 tablets in size, smell, shape and taste was prescribed 1 tablet twice daily. In both groups the tablets were started from the first day of the fourth menstrual cycle and continued for the next two cycles, and during these two cycles the symptoms were recorded.

Results: The severity of PMS in the second cycle of the treatment (in both groups) showed a statistically significant decrease ($p < 0.05$, Pair T test) and the comparison between the two groups showed that the severity of PMS in the Pyridoxine group decreased more than the placebo group, which was statistically significant ($p < 0.05$, Student T Test) and this was because of the reduction in the psychiatric rather than somatic symptoms of PMS.

Conclusion: Regarding the effect of Pyridoxine in reducing the severity of PMS, it can be suggested as a treatment for PMS.

P197

Contributing factors in the appearance and course of generalized anxiety disorder

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Background and aims: Although Generalized Anxiety Disorder (GAD) usually has a chronic course with up sights-down, there are only a few references on the factors which affect the course of the disease. The present study aims to investigate factors which could play a role in the clinical course of GAD.

Methods: Forty patients -with GAD as diagnosis on Axis-I (DSM-IV)- who attended a Community Mental Health Center (CMHC) in Thessaloniki (Greece)- were examined.

Results: Thirteen of the patients (Group A, 32.5%) reported only one episode of GAD, and the rest of them (Group B, 67.5%) reported chronic course of the disease with multiple episodes. Thirty-eight patients (95%) reported a stressful factor before the beginning of the episodes. There were no statistically significant differences regarding sex, educational level, marital status, stressful life events in general and comorbidity with other disorders on Axis I and II (DSM-IV). However, it was found that patients of Group B reported disturbed relationships with their parents in childhood ($p < 0.05$). Furthermore, they reported more frequently a death or illness of a beloved person during childhood —this difference shows a tendency for statistical significance ($0.05 < p < 0.1$).

Conclusions: Stressful factors play an important role in the appearance of the GAD. The existence of disturbed relationships with the parents in the childhood and the death or illness of a beloved person contribute on the chronic course of the disease.

P198

Rational of use of gabapentine in premature ejaculation

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Background: Premature ejaculation (PME) is the most prevalent sexual disorder. It affects more than 30% of male population. Thus far SSRI,s clomipramine, local anesthetic along with psychological therapies are the mainstay in the treatment of PME. However, not all the cases are amenable to these treatments. Attempts are underway to find out better remedies for this problem. Gabapentine an anticonvulsant drug is being tested for treatment of PME.

Method: Electronic search was made at database websites, using key words gabapentine, premature ejaculation. It was followed by manual research to find out possible mechanism by which gabapentine could delay orgasm.

Results: Search could not provide concert mode of action which explain inhibitory action on premature ejaculation by gabapentine; except for its anti anxiety effect mediated by gabanergic properties.

Discussion: Gabanergic action explains its anti anxiety, muscle relaxant and CNS depressant properties which could be beneficial, for premature ejaculation. Gabapentine has anti glutamate properties as well. This action further imparts anti excitatory effect which is helpful for PME. Excellent efficacy on neuralgic pains and neuropathies indicates that gabapentine desensitize the receptors which are oversensitive as are found in erogenous zones of premature ejaculators. Orgasm and partial seizure share many common features. Hence anti antiepileptic properties increase threshold of physiological seizure that is orgasm.

Conclusion: Gabapentine can be considered as medicine which works on PME with a mode of action different from SSRI,s.

P199

Somatoform syndromes at the anxiety-depressive disorders.

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Objectives: Identification of the mechanisms, caused by feature structure of the somatoform syndromes at the anxiety-depressive disorders.

Methods: We surveyed 247 patients with following disorders: F-32.8, F-40.01, F-41.1, F-45.0, F-45.2, F-45.31, F-45.4, F-45.8. Researching was held according diagnostically indicates of ICD-10, and used diagnostically indicates of D. Goldberg, for more verified of diagnostically somatizing affective disorders.

Basis methods of researching: clinical, clinic-quantitative, inventory of the clinic- behavioral markers of feeling of guilty.

Results: Feeling of guilty for disorders; F-40.01, F-41.1; $2,8 \pm 0,73$ ($P < 0.01$), F-32.8; $5,7 \pm 0,27$ ($P < 0.01$), F-45.0, F-45.2, F-45.31, F-45.4, F-45.8; $6,2 \pm 0,36$ ($P < 0.01$), has tendency to increased.

Clinic- behavioral markers of feeling of guilty are one from mechanisms of conversion somatoform syndromes caused by initiation correlative comorbidity of depressive and anxiety disorders.

Conclusions: Feeling of guilty and variants his transformation in structure of the somatoform syndromes is get significant diagnostic-pathogenically role in development and at the caused by hard identification of defects to emotional sphere.

In the time of, especially transformation feeling of guilty, is determining of features clinical manifestations of the somatoform syndromes at the anxiety-depressive disorders.

P200

The phenomenon of "magic thinking" as a criteria of shizotypal disorder

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Background and aim. Problem on clinical definitions of schizotypal disorder abides still actual. The majority of disorders of schizophrenic spectrum includes continuum of states from personal features (personality schizotypal disorder) up to mild schizoprenia.

Materials and methods: Cohort of 75 patients with schizotypal disorders were studied by clinical psychopathological and experimental psychological methods.

Results: So, the magic thinking is psychopathologically connected and formed at patients with the following clinical features are characteristic:

- Sensation of loneliness, vulnerability, that it is clinically possible to interpret as autistic features of the person;
- Infringement of understanding of interrelations in surrounding and a private world, the "Ego" in system of these communications, attempt to establish them at other level.
- Experience of "existential" anxiety, uncertainty, animosities of world around;
- Affective disorders with prevalence of fear, sensation of threat, danger. On this position they adjoin to so-called to "delirious mood" and give representation about formation of psychotic disorders which can develop further;
- Formed thinking disorders with gradual loss of rational logic connections (the subjective consciousness spreads on untied elements, attempt to establish the lost connections);
- The broken mechanisms of adaptation and their restoration at other level, pathological adaptation.

Conclusion: Thus, clinical interpretation of a phenomenon of magic thinking allows to attribute it to schizophrenic spectrum of mental disorders and to consider it as cardinal criterion of diagnostics of schizotypal disorder.

P201

Depression in children who experienced severe war trauma

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The aim of this study is to show if the severe war trauma survived in early childhood (age 4-5) make significant influence in development of young person in adolescent age. As an experimental group we took 40 children age 15-16 years (born 1990-91.) who were in Srebrenica during the siege and its fall in July 11th 1995. As a control group we took 40 children age 15-16 (born 1990-91.) who live in a complete family (both parents alive), and did not leave their homes during the war time. We examined the number of traumatic events experienced during the war and after the war time using War Trauma Questionnaire and we got significant difference between the numbers of traumatic events experienced during the war and in post war situation ($p < 0.05$). We measured the level of posttraumatic stress reactions using the Posttraumatic Stress Reaction Questionnaire and did not get significant difference. We also measured the level of depression using Depression Self-Rating Scale (Zung) and did not get significant difference between the two groups. We can conclude that inspite the numerous unpleasant life experiences in the past and nowadays children- adolescents age 15-16 did not show significant difference in experimental and control group at this part of development. It makes us open for further researches about coping mechanisms in children during the war time.

Keywords: war- trauma, adolescents, child- experience, depression

P202

Psychotherapy and pharmacotherapy effectiveness on brain neuroplasticity in patients suffering from anxiety disorders

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60 patients participated in the study. They were divided into 3 groups treated with pharmacotherapy, psychotherapy or both, respectively.

The aim of the study was to evaluate the effectiveness of different forms of therapeutic methods on cognitive functions improvement. Their effectiveness was assessed with the Vienna Test System (VTS). The study covered patients treated at the Psychiatry and Psychotherapy Clinic of the Medical University of Silesia in Katowice, Poland. Participation in the study was restricted to individuals with a diagnosis of an anxiety disorder (acc. to ICD-10: F-40-F48 excl. F42).

Results: Cognitive functions improvement was found to be correlated with the intensification of the initial disorder. An improvement in concentration and attention was present on average after 6-8 weeks of treatment and was most prominent in patients treated with both forms of therapy.

P203

Women mental health after 40: Age-related stress

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Menopause period is accompanied by great reconstruction of female organism and social environment of woman on the whole. It is well known that any changes outside or inside human organism cause stress and demand adjustment to new conditions. Therefore, biopsychosocial model of climax may be determined on the basis of the concept of age-related stress which is mainly connected with age transition. Massive changes occur on the three levels of functioning: biological, social and psychological. Biological changes mean physiology (hormone deficit most of all, but not only this), somatic state and body image. Social changes are connected with partnership, relations between children and parents, professional relations and social roles rotation. Psychological changes take place in the cognitive, emotional, motivational spheres and lead to searching of a new meaning of life, of new values, of new behavioral patterns.

Stress vulnerability also influences the spectrum of mental disorders. Women after 40 get into one of the risk groups on manifesting of mental disorders. Anxiety, depressive and stress-related disorders are the most frequent cases among these patients.

Educational approach such as "School of Climax" is one of the most effective practices of preventive and primary care for women in managing of age-related stress and working-out of coping strategies.

P204

Randomized crossover trial studying the effect of music on examination anxiety

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Objectives: The purpose of this study was to assess the effect of lento music on examination anxiety among nursing students.

Methods: A randomized crossover classroom-based trial was conducted. Thirty eight students with a mean age of 19.4 years