illness in relation to social functioning and stress coping skills. In reference to social contacts, statistically significant difference exists in the segment of stress coping while in social functioning there are no significant differences.

Conclusions: There were statistically significant differences between social functioning and stress coping skills in schizophrenic patients in term that patients with better social functioning use more successful coping skills. The results suggest that stress coping program for schizophrenic patients can influence the outcome of disease.

P0035

Role of psychogenic and stress factors in the formation of clinical forms of mental disorders

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Number of mental disorders, evolving as a result of old stress, is characterized of steady increase. Object of the work: determine the role of psychogenic and stress factors in the evolution of clinical forms of mental disorders. 84 patients (10 males and 74 females) from 18 to 64 years old were assessed. Each patient passed the questioning for the development of stress factors, where they specified one or several events of their life, which they qualified as a strong stress. The analysis of obtained data allowed to find out that 6 patients (7,14%) survived a death of child; 14 (16,67%) - death of husband and other members of family; 9 (10,71%) - a severe illness of the family member; 2(2,38%) – an extremal situation with the life threat; 2(2,38%)-a rape; 3(3,57%) - a severe somatic disease; 8(9,52%) - loss of work; for 7 (8,33%) of the subjects the alcoholization of husband became the main stress. In the most numerous group, consisting of 33 (39,29%) patients, the divorce was a reason for mental disorder. The study allowed to reveal, that the situations of death and illness of the relatives and kindered, divorce and alcoholization of the member of family became the cause of the development of depression (51,19%) and disorder of adaptation (30,95%). The anxious-phobic disorder developed in the patients (14,29%), which have lost the work. In the patients, who have had a severe somatic illness, a hypochondriac (2,38%) and anxious-phobic disorder (0,84%) were diagnosed.

Poster Session I: Personality Disorders

P0036

Relationship of substance use disorder to aggression in male subjects with antisocial personality disorder

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Objective: Aggression is a particular problem commonly observed in personality disorders, especially in antisocial personality disorder (APD). It is well known that APD is closely related to substance

use disorder (SUD). Individuals with higher aggression levels have also been suggested to have higher rates of SUD. The aim of this study is to investigate aggression levels and substance use characteristics of APD subjects with and without violent criminal behavior.

Method: A total of 124 male subjects with APD consecutively admitted to the Forensic Psychiatry Department of GATA Haydarpasa Training Hospital were involved in the study. All subjects were evaluated with an assessment battery using a semi-structured interview for socio-demographic, APD, and substance use characteristics, APD section of SCID-II, SCID-I, and Aggression Questionnaire. The sample was divided into 2 groups in terms of having a history of violent criminal behavior and compared correspondingly.

Results: Of the APD subjects, 90.3% reported a lifetime history of substance abuse and 75% had a current co-diagnosis of SUD. APD subjects with violent criminal behavior were more likely to be diagnosed with SUD as compared to those without violent crimes. Moreover, APD subjects with SUD had higher aggression levels than those without SUD.

Conclusion: Our results indicate that substance use may mediate the association between APD and aggression. Therefore, the treatment of SUD in APD subjects is an important target particularly for prevention of violent criminal behaviors.

Keywords: antisocial personality disorder, substance use disorder, aggression

P0037

Alexithymia and aggression in patients with antisocial personality disorder

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Objective: Alexithymic characteristics have been observed in antisocial personality disorder (APD). On the other hand, aggression is a particular problem commonly observed in personality disorders, especially in APD. We investigated the alexithymic features and aggression levels in outpatients diagnosed with APD in a military hospital setting.

Methods: 71 male subjects diagnosed with APD and 81 sex and age matched normal subjects with no known medical or psychiatric disorder were assessed with an assessment battery using a sociodemographic data form, APD section of SCID-II, the Toronto Alexithymia Scale (TAS)-20 items, and Aggression Questionnaire.

Results: The subjects with APD have showed significantly higher rates of unemployment, lower educational and socioeconomic status. The APD group also displayed significantly higher scores on alexithymia and aggression than control group. APD subjects with higher scores of aggression revealed significantly higher scores of alexithymia.

Conclusion: Use of action to express emotions, a commonly observed feature of APD, was once considered to be a part of alexithymia. The subjects with APD may have less developed cognitive skills which lead to a failure in communicating their feelings. This may result in immature methods of communicating distress. Our study indicate that alexithymia may contribute to aggressive behavior in patients with APD. To draw a more definitive conclusion on this issue, larger community based studies that compares APD subjects with sociodemographically matched patient control groups are necessary.