

Conclusion: the 13 item LSI-Z Persian version for evaluation of life satisfaction in Iranian elderly people is valid and reliable.

Keywords: life satisfaction index-Z, validity, reliability, Geriatric

P0340

Evaluation of the effects of weather variables on the violent crimes, suicide and psychiatric hospitalization in Mashhad, Iran

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Background and Aims: Various studies have been conducted on the role of meteorological variables on the onset or complications of psychiatric disorders. For example low air pressure was directly related to violent crimes and suicide. As these relationships are not clear, we decided to devote this paper to the study of such factors.

Methods: The daily hospitalization rates of Ebn-e-Sina Hospital were extracted from the archive files. Also the daily rates of murder, suicide, and quarrels were obtained from the Legal Medicine Department. Meteorology data were taken out of the daily reports of the Meteorology Organization of Khorassan Province. The data were analyzed by statistical tests such as ANOVA and POST HOC.

Results: In our statistical analysis, there was a significant statistical relationship between minimum daily temperature, maximum daily temperature, average daily temperature, minimum daily moisture, maximum daily moisture, minimum daily air pressure, and maximum daily air pressure and the number of quarrels and hospitalizations at Ebn-e-Sina Psychiatric Hospital during the year 2005 in Mashhad. Also, the statistical data indicated that no meteorological variable had any effect on the rates of murder and suicide in the city.

Conclusions: It will be useful to consider meteorological variables in preventing the onset, complications and treatment of psychiatric disorders. Yet there was no relationship with the rates of murder and suicide. As the number of murder and suicide is low during one year it is recommended the study carry out in longer period.

P0341

Patients with paramyloidosis awaiting liver transplantation: Psychiatric profile and coping mechanisms

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Background and Aims: Liver transplantation is, nowadays, considered the treatment of election for many patients with severe liver disease.

Paramyloidosis is a very uncommon genetic liver disease almost only present in Portugal and about which very little has been published.

We aimed to study the psychiatric and psychosocial differences between paramyloidotic and other liver transplant candidates.

Methods: We studied a liver transplant candidates sample (n=100), comprising consecutive patients attending out-patient clinics of a Public Liver Transplantation Central Unit (30% of patients with paramyloidosis, 70% with other liver diseases - alcohol liver disease, liver cancer, C hepatitis) by means of DSM-IV diagnostic criteria, TAS (Taylor 1991), Neo FFI personality inventory (McCrae 1992), HADS (Zigmond 1983), Brief COPE (Carver, 1997)

and a multi-dimension adherence questionnaire (Telles-Correia 2006).

Results and Conclusions: Only 28% showed no lifetime psychiatric disorders in the past, and as current DSM-IV psychiatric diagnosis 25% showed major depressive disorder, 18% anxiety disorders, 11% adaptive disorder, 6% dependence/abuse of alcohol or other substances. Twenty percent of the patients presented alexithymia (TAS), 40% had moderate-high scores for anxiety and 36% for depression (HADS). There was a predominance of acceptance, active coping, use of emotional support, positive reframing, and planning coping strategies

We found that paramyloidotic patients showed lower scores for anxiety and depression; for neuroticism personality trait; selfblame, emotional expression and disinvestment coping strategies. They showed higher scores for openness personality trait; religion, positive reinterpretation and planning coping strategies.

P0342

On the psychiatric hospitalization under assessment order in Western Quebec: 1991-2006

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Background: Hospitalization of Accused Under Assessment Order (AUAO) to determine if the person could stand trial is probably one of the most controversial forensic psychiatric acts. The subject of assessment order is relatively well studied in psychiatry and law; but the clinical characteristic of hospitalized AUAO has been scantily investigated with conflicting results. Moreover, recent growth of judicial demands for assessment, threatening the stability of care and funding for regular psychiatric beds, needs some empirical justification.

Aims: To examine clinical characteristics of all consecutive cases of hospitalized AUAO in Western Quebec between 1991 and 2006.

Methods: File information was collected for all adult admissions during study period. First, a descriptive analysis of the clinical characteristics of 270 hospitalized AUAO was performed. Then, a comparative prevalence study, using Relative Risk (RR) measure, was conducted on 2132 cases (148 AUAO and 1984 regular) of first admission.

Results: Hospitalized AUAO, were mostly males (84%) and had a median age of 36 years. Most subjects admitted only once (91%), with an average of 33 days in the hospital. Compared with other first time in-patients, they were significantly more likely to be males (RR = 5.3) suffering from substance-induced disorders (RR = 7.1), personality disorders (RR = 4.4) and schizophrenia (RR = 1.5).

Conclusion: These results suggest that AUAO are mainly suffering from substance-induced and personality disorders. It might then be proposed that a large portion of assessments should be done by community-based evaluation teams in lieu of hospitalization.

P0343

Involuntary hospitalisation in Greece: Questioning clinicians' knowledge

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Aims: To assess physicians' knowledge on the procedures for involuntary detention in hospital of the mentally ill.

Methods: A questionnaire based on Greek law 2071/1992 on the involuntary admission of mentally ill patients was answered by psychiatrists and other specialist physicians.

Results: One hundred and one answers were obtained from non-psychiatrists and 26 from psychiatrists. Four-fifths of both the non-psychiatrists and the psychiatrists were aware of the need to inform the patient, but only 45% and 69%, respectively, were aware of the patient's option for appeal. One-third of non-psychiatrists and less than half of the psychiatrists were familiar with the necessary conditions in order to admit a patient to hospital on an involuntary basis, whereas only a minority of the two groups (6% and 35% respectively) knew about the timeframe for such admissions. Interestingly, less than 40% of non-psychiatrists and approximately 60% of psychiatrists thought that involuntary hospitalisation jeopardised patients' human rights. Forty-four percent of non-psychiatrists and 31% of psychiatrists didn't consider involuntary hospitalisation as an indicated therapy, and 63% and 54% respectively, argued that the mentally ill should be removed from psychiatric hospitals provided they continue to be under medical follow-up in the community.

Conclusion: Clinicians' knowledge on the procedures for involuntary hospitalisation of the mentally ill appears to be limited. Informing and educating doctors on the procedures governing involuntary hospitalisation will contribute to the improvement of the mental health system in Greece and will promote due respect back to patients.

P0344

Theory of mind and executive functioning in autism

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The concept of Theory of Mind (ToM) refers to the ability to predict and explain feelings, thoughts, ideas and intentions of self and others. Patients with autism spectrum disorders (ASD) show a deficient development of ToM. Executive Functioning (EF) is described as higher cognitive processes essential for goal directed behaviour. EF plays a role not only in cognitive deficits in patients with ASD, but also in the restraints in social communication. The prefrontal cortex is involved in ToM as well as in EF. Few studies have investigated the relationship between ToM and EF in adult patients with ASS.

In this pilot study the correlation between ToM and EF in 19 patients with ASS was assessed. ToM was assessed with an extensive TOM test (Steerneman et al., 2003) that measures not only false beliefs but also higher levels of ToM. EF was measured with the Wisconsin Card Sorting Test (WCST), the Tower of London (ToL) and the Stroop Colour-Word task (Stroop). Correlations were calculated with Kendall's tau-b.

The results show that ASD patients have a lower score on the TOM test than the norm scores, which was expected. De mean scores on the ToL and the Stroop are lower than the means in normal populations. The WCST scores do not differ from norm scores. A significant correlation between TOM scores and EF is not found.

These results do not corroborate other published studies. The potential bias in this pilot study and a design for a more adequate approach will be presented

P0345

Antidepressants in the treatment of adult ADHD

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Since the marketing of anti-depressants these compounds have been used for the treatment of a wide variety of psychiatric and non-psychiatric disorders. To sum just a few: peptic ulcers, migraine, enuresis, narcolepsy, ADHD, urinary stress incontinence, bulimia, neuropathy, cardiac arrhythmia, anxiety disorders, obsessive compulsive disorders etc. ADHD in adults is a clinical diagnosis that can be reliably made. Psychostimulants are the most effective drugs in the treatment of ADHD with impressive effects sizes that are in adults quit similar to those reported in meta-analyses of child and adolescent clinical trials. Stimulants are both safe and effective and are therefore the first line choice for the treatment of ADHD in adults. However, a subset of patients is non-responder or experience adverse effects such as: dysphoria, anxieties, anorectic effects or an exacerbation of seizures. This restricts the use of stimulants in these patients. Moreover, adults with ADHD often show comorbid disorders (depression, anxieties, tics, drug abuse and somatic comorbidity) for which stimulants may be inappropriate. A critical review of controlled clinical trials with antidepressants in adults with ADHD will be presented. This review shows that, in contrast to the treatment of depressive disorders where receptor binding profiles and specific monoamine reuptake inhibition does not predict a clinical response, in ADHD the pharmacological properties of the specific antidepressant is most probably related to efficacy. Only eight trials of good quality were found. Effectsizes are smaller than with stimulants.

P0346

Obsessive compulsive symptoms in autism

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The conceptualization of a spectrum of obsessive-compulsive disorders, comprising disorders such as OCD, body dysmorphic disorder, substance abuse, pathological gambling and autism, is increasingly accepted. These disorders share obsessive-compulsive features and show similarities in patient characteristics, course of illness, comorbid disorders and neurobiology. Recent research suggests the possibility that autism spectrum disorder (ASD) in its milder forms may be clinically important among a proportion of patients with OCD. OCD with comorbid ASD should be recognized as a valid OCD subtype. A strange personality, with paranoid, schizotypal, avoidant or obsessive-compulsive traits, may indicate these autistic dimensions in OCD patients. In ASD patients, arguments often arise amongst nosologists, as to what constitutes their repetitive, ritualistic, quasi compulsive behaviour. At a descriptive behavioural level, the majority of ASD patients experience their symptoms as egosyntonic. Nevertheless, they frequently share the same egodystonicity as their genuine OCD counterparts. It has been found that adults with ASD are more likely to show repetitive ordering, checking, lining up, hoarding and touching, as opposed to classic OCD. Their obsessive thoughts are less likely to involve the usual themes of aggression, religion and sex. In general compulsions and rituals seem to be more common than pure obsessions. OCD like behaviours are often conceptualized as an epiphenomenon that is associated with the diagnosis of ASD. Several case vignettes will be presented to provide insight into how neuropsychological phenotypes constitute a workable framework to conceptualise OCD like behaviours as manifested in ASD.