Packing therapy is a part of therapeutic approach for children and adolescents with autistic disorder, especially in the case of self-injurious behaviour, and who do not respond to usual psychotropic drugs or who cannot tolerate them. This method consists in wrapping the patient with his under-clothes several times a week, using towels previously wet in cold water. The patient is then wrapped with blankets to help the body warm up in a few minutes. Members of staff are always looking after the patient and are carefully attentive to the quality of the relation with the patient who achieve a greater perception and integration of his body, and a growing sense of containment.

Self-injurious behaviours have previously been related to pain reactivity in autism. The effectiveness of packing could rest on the mobilization of thermo-algic sensitivity. There is a short-circuit of the painful sensations on which the child seems to focus his attention. A sensation, to which the patient has become particularly dependent, is therefore replaced by another type of sensation, which uses the same neuro-physiological pathway.

As there is currently no scientific data available, a randomized, blind and controlled study (supported by the National Grant "Programme Hospitalier de Recherche Clinique PHRC 2007/1918") is taking place to confirm the effectiveness of packing in clinical practice. We have chosen the methodology used to verify the effectiveness of risperidone in children with autism suffering of severe behavioural disorders. This study should help us specify the therapeutic indications of packing in autism.

P0363

Role of psychoeducation in treatment of psychotic patients

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A structured psychoeducation is a method of treatment of patients and their families with the approved therapeutical effect.

Background and Aims: In our hospital psychoeducation is a part of early interventions directed to first episodes of psychotic patients (that includes first 5 years of psychosis). Duration of the programme is one year and it has been influenced by simmilar experiences in Great Britain and PORT's recommendations (Sshizophrenia Patient Outcomes Research Team). A specific quality of the programme is collaboration of group psychotherapy approach conducted by group analysts and psychoeducation conducted by cognitive-behavioral therapists. All therapists involved in the programme have been supervised monthly by proffesionals.

The psychoeducation is common for all patients and their family members.

Number of hospitalisations, cognitive, emotional and social functioning, changes of basic beliefs and present symptoms have been estimated during the programme.

Methods: The aim of the poster presentation is to evaluate the efficacy of treatment and rehabilitation of patients that participate in the programme together with pharmacotherapy in order to achieve better treatment efficacy. Patient that have been involved in the both psychoeducation and pharmacotherapy are compared to patients treated with drugs only. Questionnaires that measure self-esteem and loneliness have been used.

Results and Conclusions: Since actual psychoeducation ends at the end of this year, the first results of two first grades are expected at the beginning of 2008.

P0364

The comparison of therapeutic touch and physiotherapy in patient with low back pain in Hafez hospital, Shiraz-Iran

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Aim: To evaluate therapeutic touch versus physiotherapy effects on chronic low back pain in female referred to physiotherapy ward of Hafez hospital in Shiraz-Iran.

Method: The sample included 63 female with low back pain for at least 6 months. The participants divided in two groups: there were 30 patients in case and 33 in control groups. The case group received therapeutic touch; 15-20 min daily for 5-10 days. Physiotherapy way conducted for each patient with hot pack and diathermy or hot pack and Transcutanous Electrical Nerve Stimulation for 15-20 min daily in 10 sessions. Another person on a double blind fashion compared the effect of treatments by interviewing the patients of both groups. A 10-degree visual analogue scale measured the severity of pain for 3 times. 30 min before intervention, immediate and 1 month after the last session of intervention in both groups.

Result: there was no significant differences between two groups on reducing of pain immediately after the last session of treatment (p=0.1) follows up of the patients after 1 month showed that the severity and duration of pain were decreased in therapeutic touch group (p=0.02). the result after one month of treatment showed significant differences between two groups according their level of activities p=(0.04) the usage of analgesic drugs. And sleep disturbance (p:0.06) in- other hands. Touch therapy has more effective than physiotherapy 1 month after treatment in patients with low back pain.

Conclusion: We conclude that therapeutic touch is a safe of effective intervention in reducing of pain.

P0365

Lifetrack therapy - treating personality

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Objective: To demonstrate through 5 classic case examples that major psychiatric symptoms such as anxiety, anger, physical symptoms, depression, and symptoms of borderline personality disorder can be predictably overcome through 'Breakthrough Intimacy' - closeness between committed couples far greater than their previous maximum level. The result of this study proves the vital need for and power of, an accurate and comprehensive tracking of each patient's progress on a daily basis.

Method: Lifetrack therapy works with couples (the patient and his/her partner in life) bringing them far closer than ever before, guided by their own daily self-rating on 41 parameters that allow accurate graphic tracking via Internet of subtle changes in their personalities and dynamic mental status during each therapy session. Working in three-way teamwork, the therapist actively helps the couple to achieve closeness far greater than their previous maximum level, overcoming waves of symptom spikes until they disappear by exhaustion, as the couples undergo personality transformation.

Results: Of the 1,170 patients treated over the last 20 years, 48% of patients reached a level of adjustment beyond their previous maximum level. 31% reached a level more than twice, 24% reached more than three times, 20% reached more than four times, 16% reached more than five times, and 7.6% reached more than ten times their previous maximum level of adjustment according to their own daily subjective self-rating.

Conclusion: Psychiatric disorders may be better understood and treated as the natural consequence of one's existing personality which can be transformed through 'Breakthrough Intimacy'.

P0366

How does group therapy do

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Therapeutic change is an enormously complex process and it occurs through an intricate interplay of various guided human expiriences which Yalom called therapeutics factors. Natural lines of elevage divide the therapeutic expirience into eleven primary factors: instillation of hope, universality, inparting of information, altruism, the corrective recapitulation of the primary family group, imitative behavior, interpersonal lerning, group cohesiviness, catharsis and existencial factors.

Members of inpatient groups select a wide range of therapeutic factors reflecting heterogeneous composition of groups, and differ from one another in ego strength, motivation, goals, type and severity of psychopatology. In the early stages of development, the group is concerned with survival, estabilishing boundaries and maintaining membership. In this phase, factors as instillation of hope, guidance and universality seem especially important. Factors such as altruism and group cohesiviness operate through therapy. Early in therapy, altruism takes the form of offering suggestion or helping one another. Later, it may take the form of more profound earing and "being"-with. Group cohesiviness operates as a therapeutic factor at first by means of group support, acceptance and the facilitation of attendance and later by means of the interrelation of group esteem.

P0367

Mindfulness-based interventions in psychotherapy - current research on psychological and neurophysiological change

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Background: The term "mindfulness" has its roots in contemplative meditation traditions. Recently however, mindfulness has entered the scientific discussion in clinical psychology, psychiatry, and in the neurosciences. Moreover, various mindfulness-based interventions have been developed in psychotherapy and psychosomatics.

Aims: In this presentation we give a brief overview of some psychological and neuroscience approaches to mindfulness and discuss possible implications for clinical interventions and for research.

Results: Mindfulness practice requires (1) a constant, non-avoiding direction of attention towards an object, mostly an inner object, regardless whether it is pleasant or unpleasant for the individual or not, (2) a relaxing setting, in which experiences are observed and it usually involves (3) regular repeated practice. Neuroscience studies on neuroplasticity showed the relevance of similar factors for learning processes through facilitating the reorganization of cortical networks. Mindfulness meditation practice was found to be associated with brain activity corresponding to a more positive and approach oriented affective style. Consistent with this, several authors found mindfulness meditation to be related to a better modulation of experimental induced negative emotions. Clinical interventions involving mindfulness meditation were found to influence prefrontal brain activity. 8-

week mindfulness based programs showed to induce positive changes in the asymmetry patterns of prefrontal brain activity.

Conclusions: Clinical and basic research on mindfulness provides opportunities to investigate domains of mental functioning that are crucial in many mental disorders and were underresearched in the past. Psychological and neuroscience approaches are complementary in this research into helpful change.

P0368

Assessment of the therapeutic factors of group psychotherapy in a sample of Egyptian opiates addicts

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Objectives of the study: 1- To study the therapeutic factors of group psychotherapy among opiates dependent patients.2- To study the relation between the therapeutic factors of group therapy and the relapse/sobriety outcome on opiates dependent patients.

Methodology: The study includes 75 patients in two groups. Group I: 45 opiate dependent patients attending the group sessions of this research. Group II: 30 opiate dependent patients receiving other modes of treatment other than group psychotherapy. Group psychotherapy formed of 15 sessions is conducted for group I. Assessment Tools: Group I and II were subjected to the following: All patients are diagnosed according to the ICD10 discipline, Structured Interview (ICD10), Addiction Severity Index, Rotter Test for locus of control, Eysenck Personality Questionnaire, Personality Assessment Scale (PAS), group I were subjected to Yalom test for assessing group therapeutic factors.

Outcome: The outcome of the group I of the study who received 15 sessions of relapse prevention group therapy was more favorable, and relapse rate was lower than group II who received modes of treatment other than psychotherapy.

P0369

Different types of psychotherapy in local war participants

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Objective: The aim of the study was to compare the effectiveness of different types of psychotherapy in local war participants.

Method: Consecutive adult patients from 18 to 60 (mean = 40.3), who took part in local wars (N = 153) were assessed for in patient treatment at the Smolensk regional hospital for veterans of war.

All of them received pharmacological treatment according to attending doctor's prescriptions.

They had divided into three equal groups (N=51). In the first group the ericsonian hypnotherapy been used. In second one we used NLP. And the third groups were control. We applied BDI, Spilberger-Hanin, K. Leonhard and complex pain questionnaires during the evaluation of treatment effectiveness. Patients also were followed up 6-8 months after the treatment (N=43).

Results: The reduction of depression level for both groups of psychotherapy in comparison with control (pharmacological treatment only) had been demonstrated. Catamnestic parameters of subjective pain feeling, levels of depression and personal anxiety in both experimental groups were lower than in control one too.