Results: The majority of premorbid and sociodemographic variables as well as course parameters were similar in the two groups. Most of the few differences (in age at first manifestation, marital state at onset, presence of stable heterosexual relationship before onset, acuteness of onset, presence of life events) are closely connected with the inclusion and exclusion criteria applied for the puerperal disorders (exclusion of patients with pre-existing illness or psychiatric symptoms during pregnancy, inclusion only if onset was within 6 weeks of parturition). The puerperal schizoaffective disorders began more frequently with a schizomanic episode and less frequently with a schizodepressive episode than did the nonpuerperal schizoaffective disorders, a finding maybe reflecting the "pathoplastic" role of the puerperium on psychotic disorders. Several significant differences were found regarding the long-term outcome (frequency of persisting alterations, level of global functioning and disability, non-achievement of the expected social development, loss of autarky), confirming earlier findings that puerperal disorders have in general a better outcome than other psychotic disorders.

Conclusions: The comparison of long-term course and outcome of schizoaffective female patients with and without onset after child-birth showed that their are some differences, resulting from the characteristics of both groups, but there are no findings which justify to separate post partum disorders in a nosological sense.

REDUCED BLUE CONE ELECTRORETINOGRAM IN COCAINE WITHDRAWN PATIENT

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Background The main reinforcing effect of cocaine is altering dopaminergic neurotransmission in the brain systems. Since dopamine is found in high concentrations in the retina, we investigated whether cocaine dependence may be associated with abnormalities of the electreretinogram (ERG). Methods We compared recently withdrawn cocaine dependent patients (N = 20) with age, sex and racially matched normal controls (N = 20) for responses of cone photo-receptors to light flashes on full field ERG. Results Cocaine dependent patients had significantly reduced blue cone ERG responses compared with matched controls. Conclusion This result suggests that in cocaine dependent patients there is dysregulation of blue cone function. The ERG may be useful in future studies of cocaine dependent patients.

USE OF PHARMACOTHERAPY IN CHILD AND ADOLESCENT PSYCHIATRY

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Childhood and adolescence mental disorders are frequent, and often precursors of adult life dysfunctions. The successful treatment of them represents a major public health concern. Drug treatment is far from being the only therapeutical approach nowadays, but does undeniably have a place which should be clearly defined. In children, the use of psychopharmacotherapy has often been a matter of controversy, and has been little studied. Despite of a growing interest and knowledge in the drug treatment of children mental disorders, much remains to be learned. Objectives: The purpose of this study is to evaluate the use of psychopharmacologic treatments among children and adolescents, attending an out-patient clinic of child and adolescence psychiatry, in order to know its pattern of use, doses, and side effects. Methods: A prospective study about the use of psychotropic drug treatment is carried out in our unit in Madrid. The examined sample consists of 500 children and adolescents who are treated

in our out-patient clinic. The doses and prescriptions of drugs is evaluated in relation with age, sex, and clinical diagnoses (DSM-IV and/or CIE-10). Results and conclusions: The main outcome results will be discussed.

CLINICAL AN PSYCHOMETRICAL CORRELATES OF ALCOHOL CRAVING IN ALCOHOL DEPENDENT MALE INPATIENTS

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A sample of 276 male alcohol dependent inpatients admitted to Addiction Treatment Unit was divided in two groups: (1) 72 subjects with longer alcohol abstinence (over one month) on the admission and (2) 204 persons with short alcohol abstinence (less than one month). In all patients, extensive clinical assessment was carried out. Psychometric evaluation included: Alcohol Dependence Scale (ADS), Inventory of Drinking Situations (IDS), Beck Depression Inventory (BDI) and MMPI test. Also, all investigated persons filled a questionnaire concerning alcohol craving in last 14 days before the admission.

Results. In persons with longer abstinence, 52% of subjects reported alcohol craving in 14 days before assessment compared with 85% of subjects with short alcohol abstinence (p < 0.00001). Persons with longer alcohol abstinence and alcohol craving compared with persons with short alcohol abstinence and alcohol craving had lower number of alcohol craving days (3 vs 7 days). In subjects with longer abstinence, these which reported alcohol craving compared with persons which did no (p < ..) report the craving, had significantly more relatives with alcohol dependence (59 vs 34%). In group of patients with shorter alcohol abstinence, significantly positive correlations were obtained between number of alcohol craving days and the magnitude of scoring on ADS, BDI, all problem index categories of IDS, and on following scales of MMPI test - hypochondriasis, depression, hysteria, psychopathic deviate, paranoia, psychasthenia, schizophrenia, hypomania, social introversion. Also in group of subjects with shorter alcohol abstinence, significantly positive correlations were obtained between the intensity of alcohol craving and the scoring on ADS, BDI and problem drinking categories of IDS such as unpleasant emotions physical discomfort, pleasant emotions, testing personal control, urges to drink, conflict with others, and on following scales of MMPI test - hypochondriasis, psychopathic deviate, depression, hysteria, psychasthenia, schizophrenia, hypomania, social introversion.

Conclusions. Alcohol craving is a heterogeneous dimension, with interplay of various clinical and psychological factors.

SELF-ESTEEM IN ADOLESCENTS WITH CONDUCT PROBLEMS AND DEPRESSION

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Studies investigating self-esteem and its relation with behavioural problems in adolescents report contradictory and inconsistency results. The contradictory results have been discussed by Kaplan (1975, 1978, 1991, 1992); he found that continuous engagement in deviant behaviour may enhance the self-esteem level, and therefore, low self-esteem may not associated with deviant behaviour for these group of children. Moreover, mixed problems of behaviour and emotion are more strongly associated with low self-esteem than behavioural problems on their own. In contrast, depression has been shown to be consistently associated with low self-esteem.

In order to have a better understanding of adolescents self-esteem

and their psychological problems, one main study with mainstream students (N = 1071) and two subsidiary studies with students from schools for children with "Emotional and Behavioural Difficulty" (EBD schools) (N = 139) and a small group of conduct disorder boys (N = 25) referred to a clinic were carried out.

Mainstream students were asked to fill in inventories on self-esteem (Coopersmith, 1967; Rosenberg, 1965), depression scale (Birleson, 1981), Friendship, and demographic information. Teachers were also asked to fill in a psychological problems scale (Rutter B, 1967) and an Information questionnaire concerning academic performance, and whether or not the student had any referral to agencies because of his/her psychological problems at school.

Results of mainstream school adolescents showed that positive parent-child relationship (Home self-esteem) and school performance (School self-esteem) were positively associated with high total self-esteem and negatively with psychological problems. Students' academic performance also associated positively with self-esteem and negatively with psychological problems.

In general, self-esteem was negatively associated with behavioural and emotional problems. However, a comparison between a group with conduct problems identified by both their teachers and classmates and another group without any psychological problems did not show significant differences on self-esteem. A comparison between a group with behavioural problems and another group who had both conduct problems and depression, showed self-esteem to be significantly lower in latter group.

Finally, in comparisons of data from three sample sources, mainstream students displayed much better self-esteem and fewer psychological problems than students from EBD schools, while, similar results were not found for comparisons between mainstream students and the clinical sample.

SOMATIZATION AND SIDE EFFECTS OF TRICYCLIC ANTIDEPRESSANTS AND SEROTONINE REUPTAKE INHIBITORS — A NEUROPHYSIOLOGICAL AND PSYCHOMETRICAL INVESTIGATION

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During the pharmacotherapy with antidepressants, somatic symptoms of the depression itself and side effects of the thymoleptic drugs — especially dysregulations of the autonomous system — are often overlapping, which might hindering the patient's compliance. In this study we evaluated the subjective complaints by appropriate standardized psychometric instruments (BDI, STESS, B-L). Additionally we carried out several neurophysiological investigations (NCV, F-wave, sympathetic skin response = SSR) and the Schellong test, as objective measurements.

According to this method, we investigated 6 healthy controls and 12 patients, undergoing treatment with tricyclic antidepressants (n = 6) or serotonine reuptake inhibitors (n = 6). Preliminary results showed not only more adverse effects and impairment in the psychometrically evaluation, but also neurophysiological changes in the tricyclically treated group. Under similarity of the other neurophysiologic parameters (F-Wave, NCV) a tendency of delayed latencies and decreased amplitudes and in 2 cases "absent responses" of SSR were observable in the tricyclically treated group.

Therefore we propose a combination of psychopathological, clinical and neurophysiological parameters to be taken into consideration in the decision making of antidepressant pharmacotherapy.

CHANGES IN BRAIN PERFUSION DURING OPIOID DEPENDENCE; SPECT IMAGING WITH Tc-99m-HMPAO

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The aim of this study was to describe abnormalities in brain perfusion in pure opioid dependent patients (DSM-IV 304.00). Twenty-one opioid dependent patients were included and Tc-99m-hexamethylpropyleneoxime (Tc-99m-HMPAO) brain single photon emission computed tomography (SPECT) was performed to evaluate regional cerebral blood flow (rCBF). Cerebral computed tomography (CCT) was administered to seventeen patients in order to assess the possible effects of substance abuse on brain morphology. Drug history was evaluated with Europe-Addiction Severity Index (ASI). Present drug consumption was screened by urine samples with EMIT. Thirteen patients were undergoing a detoxification treatment and eight patients a methadone maintenance program. Just before imaging all subjects were examined in order to detect withdrawal symptoms with Wang's withdrawal scale. No subject showed withdrawal symptoms. Normalized rCBF-values in corresponding regions of interest (RIO) in both hemispheres were compared. Significantly higher left sided rCBF-values were found in the pre- and postcentral gyre (p = 0.001), the mesiotemporal (p = 0.003), superior temporal (p = 0.003) and inferior parietal cortex (p = 0.007). This study shows changes in brain perfusion during opiate dependence.

HIV — HIGH RISK BEHAVIOUR IDENTIFICATION IN A PRISON POPULATION OF INDIA: A PILOT SURVEY

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Introduction: According to W.H.O. predictions, India will be the country with the largest number of HIV positive cases by 2010. The prison population is highly vulnerable to HIV transmission, in view of the high prevalence of injecting drug use (Harding, 1990; J Strang, 1993) and higher prevalence of Sexually Transmitted Diseases (McMillan, 1988) than the general population. The present study is the first of its kind in India, looking at the prevalence of HIV high risk behaviour and knowledge/attitude towards AIDS in a prison population.

Method: 110 randomly selected remand prisoners were interviewed. 50% of prisoners had been remanded for drug-related and the other 50% for non-drug related offences. A structured questionnaire, in six parts, viz., demography, history of tattooing, drug abuse, blood transfusions, a sexual behaviour profile and knowledge/attitude towards AIDS was administered to the prisoners by a specially trained team of investigators. A similar study was done on 1006 subjects in prisons in England and Wales, using the same questionnaire.

Results: The sample population was all male with mean age of 30.7 years. 10.9% of the inmates were tattooed, 50% of this group had shared tattooing equipment. 36.5% of the population were regular drug abusers before entering prison, with the largest number on Heroin (29.1%), alcohol next (25.4%) and Cannabis (6.4%). 11.8% of the population had a history of injecting drugs. 2.7% had ever shared needles. 44.4% of the inmates had multiple sexual partners, with 43.6% having safe sex and 2.7% having homosexual practices. 10% of the population had heard about HIV testing with 9.1% perceiving themselves at risk of catching HIV, and 47.3% having no knowledge about AIDS.