pressive and manic syndromes, agitation, sleep disturbances, sopor and stupor. In elderly patients delirious and paranoid syndromes were predominant, whereas affective disturbances occurred more often in younger patients.

Discussion: Our findings show that in most of the ADR-patients of this study several risk factors could be identified. In most cases multimorbidity, liver or kidney diseases, simultaneous treatment with other antibiotics and immunosuppressants, former psychiatric disorders or psychosocial stress factors were present. Moreover, the results illustrate problems to assess the ADR frequency. Due to a different methodological approach our findings cannot be compared with the results of postmarketing studies.

MENTALLY ABNORMAL OFFENDERS AND DIFFICULT PATIENTS IN JAPAN — A SURVEY IN A PSYCHIATRIC HOSPITAL

A. Iwanami ¹, Y. Nakatani ², K. Tsuchiya ³, M. Yamashina ⁴, S. Iritani ⁴, H. Fujimori ⁴, K. Kamijima ¹. ¹ Department of Psychiatry, Showa University School of Medicine, 1-5-8 Hatanodai, Shinagawaku, Tokyo 142, Japan; ² Tokyo Institute of Psychiatry, Tokyo 142, Japan; ³ Department of Psychiatry, Tokyo Medical and Dental University, Tokyo 142, Japan; ⁴ Tokyo Metropolitan Matsuzawa Hospital, Tokyo 142, Japan

Contrary to European countries, in Japan there are no special psychiatric facilities for mentally abnormal offenders and dangerous psychiatric patients. In Japan, if criminal offenders are considered mentally ill by the police or the court, they will be transferred to a psychiatric hospital and judicial authorities will never process them. The treatment and the discharge of such patients will be decided by psychiatrists alone. The government has planned to develop forensic services similar to regional secure units in England and Wales, however, these have not been established since opposition to such facilities is too strong. To recognize profiles of criminal psychiatric patients and difficult patients in addition to their violent behavior in the psychiatric hospital, the authors carried out a survey of patients admitted to Tokyo Metropolitan Matsuzawa Hospital, which is the only public mental hospital in the metropolitan district and has approximately 1,000 beds. Among 320 patients admitted over 6 months in 1992, 53 patients (17%) were found to have had a history of offense. This group of patients was relatively younger and had mostly committed minor offenses or violations of drug-laws; about two-thirds had a history of drug abuse and had been frequently hospitalized due to substanceinduced mental disorder. Although a follow-up study revealed that there were no clear differences between offenders and non-offenders with regard to length of hospital stay and dosage of antipsychotic medication, patients with a history of minor offenses exhibited more frequent violent behaviors than patients with no history of offense.

PSYCHIATRIC DISORDERS IN TORTURE VICTIMS OF YUGOSLAV CIVIL WAR 1991–1995

A. Joyanović ¹, D. Dunjić ², B. Aleksandrić ², J. Marinković ³.

¹ Institute of Psychiatry, Clinical Center of Serbia, Pasterova 2, 11000 Belgrade, Yugoslavia; ² Institute of Forensic Medicine, School of Medicine, University of Belgrade, 11000 Belgrade, Yugoslavia; ³ Institute of Statistics, School of Medicine, University of Belgrade, 11000 Belgrade, Yugoslavia

Objective: This study analyzes the structure of psychiatric disorders in torture victims of Yugoslav Civil War 1991–1995.

Method: The research on 96 subjects has been conducted in the field of Bosnia and Herzegovina by specialists in forensic medicine and neuropsychiatry; psychiatric diagnoses were established according to DSM-IV criteria, severity of psychopathological consequences

of torture was measured by scores on Global Assessment of Functioning Scale (GAF) and Impact of Events Scale (IES).

Results: Psychiatric disorders were diagnosed in 57% of subjects (without psychiatric disorders before torture) and in 24% chronic posttraumatic stress disorder was present; the incapacitation measured by GAF was strongly correlated to time spent in enemy prison.

Conclusion: This study has confirmed the extremely stressful potentials of torture repertoire carried out on prisoners of war.

HALLUCINATIONS IN EXTRASENSORY HEALERS: PHENOMENOLOGICAL AND SOCIOCULTURAL ANALYSIS

O.G. Karagodina. Contemporary Religious Processes Study Department, The Philosophy Institute of National Academy of Sciences, 4, Triohsviatytelska str., 252001, Kyiv, Ukraine

A number of data reveals the influence of the sociocultural factors on hallucinations both in psychiatric patients and in healthy persons. The aim of this study was to examine the hallucinations phenomena in 100 extrasensory healers who had never visited the psychiatrist in their lifetime. The respondents were considered as the carriers of the religious mystical and parascientific outlook that includes the concepts of the orientalistic belief. We used the methods of interview and structural psychopathological analysis. There were studied the phenomenology and emergence mechanisms of tactile (98 cases), visual (63 cases) and auditory (37 cases) hallucinations which were connected either with healing practice or were beyond it. It was shown that the tactile and visual experience which follow the healing practice may be estimated as suggestive one in the consequence of the predominant ideas (parapsychological, religious and mystical concepts) and assimilation of psychic techniques in the training courses of extrasensory healing. The probability for the visual and auditory hallucinations to emerge was higher for that healers who had perception disorders in anamnesis. We came to the conclusion that the healer's hallucinations were socially sanctioned, since in the course of recent years our social consciousness has accepted some visions peculiar to the non-Western cultures. The healing practice was found to promote the coping strategies with respect to hallucinations and using the experience for the creative development in those persons who had had before the psychic and psychological problems.

FOLLOW UP OF PATIENTS BEREAVED IN THE STARDUST DISASTER

V. Keane, J.A. Mullaney. St. Itas Hospital, Eastern Health Board, Dublin, Ireland

Objective: To assess the psychiatric morbility in parents bereaved of a late adolescent child in a manmade disaster some fourteen years later and to compare findings with morbidity at the one and three year stage.

Methods: As many bereaved parents as possible were interviewed using a semistructured interview, the GHQ-30, Scl-90-R and Stardust Bereavement scale.

Results: Morbidity was surprisingly persistent. While there were some incremental improvement, scores on a number of psychopathological indices remained stable from year three to fourteen. The profile of bereavement items indicated changes over time but the magnitude of emotional distress did not appear to lesson.

Conclusions: The results suggest revision of many concepts of bereavement in these circumstances, particularly pertaining to the evolution of symptoms over time.