

HPA-axis. Studies on HPA-axis functioning in burnout have produced inconsistent results. BDNF is one of the trophic factors involved in the regulation of adult hippocampal neurogenesis and is believed to decrease as a consequence of chronic stress mediated by hyperactivation of the HPA-axis. The aetiological relationship between the serum level of BDNF and burnout has not yet been studied.

Methods: 37 clinically diagnosed burnout participants were compared with 35 healthy controls. Basal serum cortisol, sBDNF, and cortisol level after 1mg dexamethasone suppression test were sampled.

Results: We found no significant differences in terms of HPA-axis functioning, but we did find significantly lower levels of sBDNF compared between burnout participants and controls ($p=0.005$). sBDNF levels correlated significantly with scores of three dimensions of Maslach Burnout Inventory. HPA-axis function and sBDNF were not affected by the presence of a current psychiatric disorder. Depression, depersonalization and competence scores were found to be the most important predicting variables of burnout.

Conclusions: Our results suggest that there was no dysregulation in the HPA-axis of burnout participants. However, BDNF and hippocampal neurogenesis seem to be important in the aetiology of burnout. Though BDNF is a novel way to investigate the possible aetiology of burnout, further research concerning the role of BDNF in the neurobiology of burnout is needed.

P0004

Sexual dysfunction in veterans with PTSD

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In spite of results of previous studies which shows significantly higher rate of sexual dysfunction in veterans with PTSD in all domains (desire, arousal, orgasm, activity and satisfaction) these problems were not enough examined. Erectile disorder and premature ejaculation were most frequently reported problems.

Aim of the study were to examine full range of sexual functioning (sexual activity, erectile disorder, sexual desire, orgasmic disorder, dyspareunia and premature ejaculation) in veterans with PTSD. In that purpose two groups were formed: experimental group of veterans with PTSD ($N=70$) and control group of healthy examinees ($N=60$).

Results show reduced satisfaction and reduced frequency of sexual activity, hypoactive sexual desire and erectile disorder in veterans with PTSD. Our results confirm results of previous studies about sexual dysfunction in veterans with PTSD.

Mentioned sexual dysfunction could be explained as results of posttraumatic stress disorder as well as comorbid diagnosis, and interpersonal relationship disturbances, problems with closeness, intimacy and partners relationship disturbance.

Results of this study show that both erectile disorder and hypoactive sexual desire disorder in veterans with PTSD, cause loss of self-confidence, reduced frequency of sexual activities as well as dissatisfaction with sexual aspects of life.

P0005

School maladjustment at initial pupils from victim families

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Objects: Mental conditions of deprivation genesis in this cohort of deprived children play an essential role in formation of their social-psychological maladjustment.

Methods and Material: The design of the present research included studying of 116 children of the migrants families. The economic difficulty, uncertainty of the future life provoked development of a stable interfamily relations. Children got in a situation of unexpected deprivation of habitual conditions, that had a negative effect on dynamics and quality of their adaptation. With the help of the statistical methods, allowing to specify character, depth and weight of depriving conditions, results of polydisciplinary research have been processed.

Results: Deprived conditions were characterized by a continuum of displays and have been submitted: 1) deprived reactions, as short-term mental conditions; 2) actually deprived conditions, and 3) deprived developments, as long-term mental conditions or processes. Types of school maladjustment, reflecting both level of mental development and formed personal features which were under influence of depriving conditions looked as follows: 1) with the prevalence of behaviour disorders (at 42,3% of children); 2) with mainly emotional disorders (at 46,4% of children); 3) with difficulties in intellectual functioning (at 11,3% of children).

Conclusion: The continuum of maladjustment displays settled down between a prepathology and dysfunctional condition. Attempt to systematize a level of social functioning disorders assumed an estimation of their quantitative characteristics which identification with deprived conditions changes has allowed to allocate the easy, moderate and severe degree of maladjustment.

P0006

Impact of intensity of traumatic experience on level of perceived competency and Self-Esteem of survivors

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Introduction: Expectations of individual regarding self-esteem and personal competency are mediators of behavior. Traumatic experience can effect and modify both self-esteem and perceived competency and in that way determine individual behavior.

Aim: of this study is to assess impact of intensity of traumatic experience on level of self-esteem and perceived competency of individual.

Methods: In this research two groups of participants were included. Group G1 consisted from 21 individuals, clients of Center for victims of torture, who survived different highly stressful traumatic experiences including torture. Group G2 consisted from 21 individuals who survived different traumatic experiences without being tortured. For this research 4 psychological instruments were used: Socio-demographic questionnaire, List of stressful life events, Rosenberg Self-Esteem Scale and Rosenberg Perceived Competency scale. In this research T-test method of statistical analysis was used.

Results: According to List of stressful life events participants from group G1 were highly traumatized comparing with group G2 who showed lower level of traumatization ($p<0,01$). On perceived competency scale and self-esteem scale group G1 (highly traumatized) showed lower scores comparing with group G2 (less traumatized). ($p<0,01$).