

Obsessive Compulsive Scale according to the clinical subtype of the disease.

**Results:** Of 265 patients, Fluoxetine significantly decrease the symptoms in general. Yale-Brown Average score in washers and patients with obsessive thoughts significantly decreased after the intervention, while the decrease in Y-BOCS in checkers didn't reach the statistical significance.

**Conclusions:** Fluoxetine demonstrated sustained efficacy among patients with OCD and was generally well tolerated. Fluoxetine demonstrated greater efficacy in washers and on obsessive thoughts than checkers.

### P0173

Functional neuroimaging and pathogenetic basis of obsessive-compulsive disorders

A. Korzenev<sup>1</sup>, A. Stanzhevsky<sup>2</sup>, V. Shamrey<sup>1</sup>, L. Tyutin<sup>2</sup>, A. Pozdnyakov<sup>2</sup>, N. Kostenikov<sup>2</sup>, R. Shalek<sup>2</sup>, V. Fokin<sup>1</sup>.  
<sup>1</sup>Russian Medical Military Academy, St-Petersburg, Russia  
<sup>2</sup>Russian Scientific Center for Radiology and Surgical Technologies, St-Petersburg, Russia

The aim of study to evaluate possibilities of functional neuroimaging (18F-FDG PET and +H MRS) in diagnosis and treatment evaluation in patients with resistant obsessive-compulsive disorders.

18F-FDG PET was performed in 19 patients with treatment resistant OCD. Besides, single voxel MRS was used to image the heads of the caudate nucleus in 13 patients. Examinations were executed at the time of treatment cancellation in all cases. Moreover 18F-FDG PET and H MRS were carried out during every periods of complex treatment (including psychotherapy, psychosurgery (in all cases) and combined stimulation of the head of caudate nucleus and vagus nerve (in 3 cases). Parameters of stimulation and its duration were defined using neuroimaging data.

Our results show that application of functional neuroimaging in patients with resistant forms of OCD enables to optimize treatment using adequate medicinal therapy and to prove a choice of brain structures-targets for stereotactic effects. Long-term neuropsychiatric monitoring, neuroimaging data and results of neurostimulation allow to advance a hypothesis about three brain levels of OCD formation in contrast to accepted assumption about four symptom dimensions: symmetry/ordering, hoarding, contamination/cleaning, and obsessions/checking.

### P0174

Bipolar obsessive-compulsive-disorder

N. Lakhal<sup>1</sup>, W. Homri<sup>1</sup>, M. Cheour<sup>2</sup>, M.A. Bel Lakhthar<sup>1</sup>, H. El Kefi<sup>1</sup>.  
<sup>1</sup>Military Hospital, Tunis, Tunisia  
<sup>2</sup>Razi Hospital, Tunis, Tunisia

**Background and Aims:** Clinical research is largely focused on depressive comorbidity in obsessive-compulsive disorder (OCD). However in practice, treating resistant or severe OCD sufferers revealed many cases who seem to have an authentic OCD with a hidden comorbid bipolar disorder.

**Methods and Results:** To explore mood co morbidity, a sample of 33 OCD patients were administered structured self-rating questionnaires for major depression, hypomania and mania (DSM-IV criteria), and self-rated Angst's checklist of hypomania and cyclothymic temperament.

**Results:** The rate of bipolar co morbidity in OCD was notable; 18% of the patients were BPI. Furthermore, the hypomania checklist of Angst showed that 39% had a cut-off score of 10. Analysis of the self-rated questionnaire for cyclothymic temperament showed that 52% scored 10.

**Conclusions:** Our data extend previous research on « OCD-bipolar comorbidity » as a highly prevalent and largely under-recognised and untreated class of OCD patients.

### P0175

Emotional burden and psychological morbidity in caregivers of patients with obsessive-compulsive disorder

A.T. Ramos-Cerqueira, A.R. Torres, R.C. Torresan, A.P. Negreiros, C.N. Vitorino. *Department of Neurology and Psychiatry, FMB-UNESP, Botucatu, Brazil*

**Introduction:** The objective of this study was to evaluate the emotional burden, psychological morbidity and level of family accommodation in caregivers of obsessive-compulsive disorder (OCD) patients, according to sociodemographic and clinical factors.

**Method:** Fifty Brazilian DSM-IV OCD patients and their caregivers were evaluated using the Family Accommodation Scale, the Zarit Burden Interview (ZBI), the Self Report Questionnaire (caregivers), the Yale-Brown Obsessive-Compulsive Scale and the Beck Depression Inventory (patients).

**Results:** Most caregivers (80%) were aged between 30 and 59 years-old and lived with the patient (88%). Forty-two percent presented a common mental disorder and their mean ZBI score was 28.9. Family accommodation was moderate in 26% and severe or very severe in 24%. Caregivers' levels of psychological morbidity, accommodation and emotional burden were associated with each other and with the severity of patient obsessive-compulsive and depressive symptoms.

**Conclusion:** The results suggest that caregivers of OCD patients have important levels of burden and psychological morbidity and should receive orientation and support to minimize this emotional impact.

### P0176

Obsessive compulsive disorder in reproduction age women in Fatemi Hospital Ardebil in 2006

F. Sadeghi Movahhed<sup>1</sup>, E. Rezaei Ghale Chi<sup>2</sup>, F. Mostafazadeh<sup>3</sup>, M. Mashoufi<sup>3</sup>, R. Arab<sup>3</sup>.  
<sup>1</sup>University of Fatemi, Ardebil, Iran  
<sup>2</sup>Azad Medicine University, Ardebil, Iran  
<sup>3</sup>Medicine University, Ardebil, Iran

**Background and Objective:** obsessive-compulsive disorder is an anxiety disorder is Approximately 2% of the general population. Recent reports suggest that OCP occurs in menstruum, Pregnancy peripartum periods. The aim of study determined of onset OCP in women.

**Methods:** in a retrospective study 53 women out patients with OCP meeting DSM-IV criteria For (OCP) completed and asked a questionnaire by interview.

**Results:** Finding showed the in 88.7%(47)of samples onset o obsessive disorder not in menstruation priod.85.4%(41)of obsessive not onset in pregnancy 51.7%(4) of obsessive samples onset of obsessive in second pregnancy.81.1%onset of OCP not beginning after delivery.28.8%after first pregnancy onset once of OCP.30% after delivery had mental disorders.