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ACCULTURATION STRESS IN IMMIGRANT POPULATION, MIGRATORY MOURNING AND ASSOCIATED COMORBIDITIES

M. Serrano Díaz de Otálora, J. Gómez-Arnau Ramírez, R. Martínez de Velasco, J. Andrada Meyer

Department of Psychiatry, Hospital Ramón y Cajal, Madrid, Spain

Introduction: Migratory mourning has specific features and migration is itself a risk factor for mental health. Basic grieving relate to seven areas: family and friends, language, culture, land, social status, contact with the national group and physical risks, as well as general mourning the failure of the migration project.

Objectives: We intend to trace the process of acculturation seeking to distinguish its symptoms from those of most common psychiatric disorders.

Methods: We conducted a literature review using the National Library of Medicine and PubMed search system.

Results: Adaptation process traces a U-shaped curve. In the second stage called crisis stage may appear rejection or isolation, sadness, crying, sleeplessness, irritability, distrust, recurrent and intrusive thoughts, psychosomatic symptoms (headaches, fatigue, musculoskeletal pain), dissociative and somatoform symptoms. Stress reactions can occur with cognitive fatigue, role and personal shocks.

Ulysses syndrome has features in common with acute stress disorder or adjustment disorder. Differential aspects regarding DSM-IV are: multiple identifiable stressors of high intensity, long duration, cultural interpretations and association of dissociative and somatoform symptoms.

Main observed pathologies are: PTSD, schizophrenia and paranoia, somatization and affective disorders, whose clinical expression is primarily determined by cultural factors.

Conclusions: Professionals should know the different manifestations of mental illness in immigrant population to distinguish them from experiential reactions and to avoid upset psychiatrization and therapeutic nihilism. Ulysses syndrome seems closer to preventive health and psychosocial support areas.