

It is known that people who own a pet have a smaller incidence of illness, but, except for few sparse studies, this issue has received very little attention in psychiatry.

Aims: To study the usage of therapeutic dogs as co-therapy for depression and anxiety in a psychiatric day hospital.

Methods: The study consisted of twice weekly sessions of 20 + 10 minutes each, during 6 weeks. First, patients were asked to give instructions and interplay with a dog specifically trained for this activity, under supervision of a psychiatrist. Afterwards, patients walked the dog, giving sets of instructions. Hamilton depression rating scale (HDRS) and Hamilton anxiety rating scale (HARS) were recorded, for each patient, at the beginning, at the end of the third, and end of the sixth week. A questionnaire was administered at the end.

Results: Ten patients were enrolled. There was a decrease in HDRS and HARS scores (HDRS mean at beginning 26; at 6 weeks: 13,4; HARS at beginning 24,7; at 6 weeks: 15,7). However, results are hard to interpret; Patients were under other therapies (pharmacological, psychotherapy...); the study enrolled a heterogeneous group of patients, with different diagnoses, making interpretation difficult.

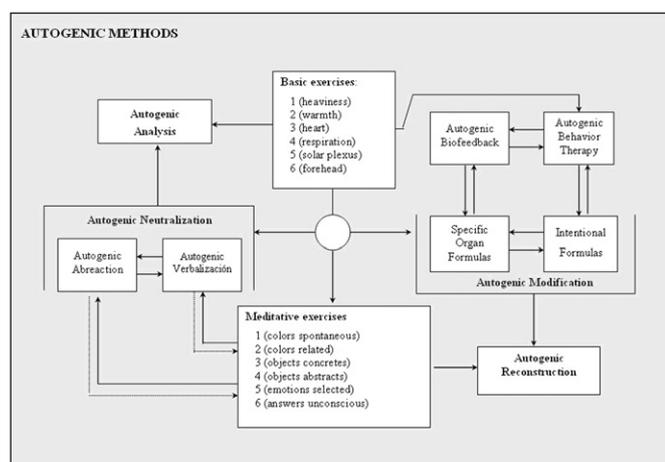
Conclusions: Therapeutic dogs can be useful as co-therapy for depression and anxiety, but results must be validated in larger, randomised controlled studies. This approach may improve aspects such as self-confidence, basic affective skills and group cohesion.

P0359

Autogenic psychotherapy

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Autogenic Psychotherapy is a psychophysiologicaly oriented psychotherapy introduced in Europe by JH Schultz in 1930 and in North America by W. Luthe in 1970. It is the pioneer of mindfulness psychotherapies. It is organized around three basic methods: autogenic training, the basic technique described by JH Schultz, Autogenic Neutralization, the advanced technique described by W. Luthe and Autogenic Reconstruction, the advanced technique described by JLG de Rivera.



P0360

Psychotherapeutic crisis intervention following suicide attempt

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Background: All persons who attempt suicide are offered a psychiatric treatment, psychopharmacological and psychotherapy too.

Aim of the study is to describe the implementation a psychotherapeutic crisis intervention of suicide attempters.

Methods: The subjects consisted of 30 inpatients who attempted suicide of self-poisoning and were treated at Clinic for toxicology in Military Medical Academy Belgrade. We excluded patients with psychosis, substances abuse, dementia. For all patients, suicide attempters, a psychotherapeutic crisis intervention following attempted suicide was applied in order to ease the emotional tension and to help them to explain the possible motives of their suicide, especially to explain “what has really happened”.

Results: We presented some case vignettes of suicide attempters.

Conclusion: The application of psychotherapeutic crisis intervention is well-succeeded, with a good acceptance by our patients

P0361

Psychiatric pathologies following major or minor trauma

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Posttraumatic stress disorder (PTSD) is a largely under-diagnosed condition probably because clinicians expect it only as a consequence of enormous (thus rare) trauma. Seemingly insignificant life events or incidents may cause typical PTSD or other severe pathologies with great impact on quality of life and mental health.

One such disabling condition, presenting as atypical PTSD, without flash-backs or nightmares and barely discernible restlessness, is ignored by textbooks or classifications and seldom recognized by health and invalidity insurance agencies.

Apparently minor traumatic events may also cause personality disorders, recurrent and resistant depression, phobias, General Anxiety Disorder, Obsessive Compulsive Disorder, dysthymia, somatoform disorder, manic episodes. There is no apparent connection between the objective importance of trauma and the severity of the resulting pathology.

Furthermore, the body itself stores the memory of trauma, and can thus produce various pathologies, sometimes of severe importance, such as backaches, headaches, muscular, joint, or even visceral disorders, whose basic cause is generally ignored. Therefore, post-traumatic physical conditions may generate significant medical expenses in diagnostic and therapeutic procedures, generally with disappointing results.

The economical implications of post-traumatic syndromes are enormous in terms of absenteeism, invalidity, medical and psychiatric expenses.

Since the treatment of psycho-trauma is most often salutary, it is imperative to recognize post-traumatic syndromes: clinicians should thus begin to consider this possibility, carefully detailed anamnesis of life events should be obtained, and subjective importance of traces left by each event investigated.

Significant case reports will be discussed.

P0362

Packing therapy in children and adolescents with autism and serious behavioural problems

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