Materials and Methods: The clinical structure of the depressive disorders was estimated in 44 outpatients (26 men and 18 women, mean age - 31,2) with frequent genital HSV recurrences (>6 per year). Depressive disorders were diagnosed with a help of psychopathological method and the following psychometric scales: HAMD-21; CGI-S and SOFAS. The normal values for each scale are <7, >80 and ?2 respectively.

Results: Our screening data revealed depressive disorders in 32 of 44 patients. According to ICD-10 classification of Mental and Behavioural Disorders, recurrent depressive disorder, current episode mild [F33.0] was revealed in 15 patients (34,1%); recurrent depressive disorder, current episode moderate [F33.1] in 11 cases (25,0%) and dysthymia [F34.1] in 6 patients (13,6%).

Conclusion: These results testified that patients with genital herpes need psychiatric consultation. If an affective disorder is revealed a combined therapy should include both specific antivirus treatment and antidepressant therapy: Selective Serotonin Reuptake Inhibitors (SSRIs) or Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs).

P0246

The evidence base of complementary and alternative therapies in depression

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Background: Depression is one of the leading indications for using Complementary and Alternative Medicine (CAM). This paper reviews the evidence of efficacy of different types of CAM in depression with the aim of identifying the highest level of evidence for each approach.

Methods: We conducted literature searches restricted to the English language for studies on CAM as monotherapy in depression. All papers were reviewed by two researchers and the evidence was ranked according to a widely referenced hierarchy of evidence. Studies that addressed depressive states outside ICD and DSM based diagnoses of depressive disorders were excluded to ensure homogeneity.

Results: 19 papers formed the final review. We found Grade 1 evidence on the use of St. John's wort, Tryptophan/ 5-Hydroxytryptophan, S-adenosyl methionine, Folate, Inositol, Acupuncture and Exercise in Depressive disorders, none of which was conclusively positive. We found RCTs at the Grade 2 level on the use of Saffron (Herbal medicine), Complex Homoeopathy and Relaxation training in Depressive disorders, all of which showed inconclusive results. Other RCTs yielded unequivocally negative results. Studies below this level yielded inconclusive or negative results.

Limitations: Searches were restricted to the English language. Our list of CAM approaches may not have been comprehensive. We excluded studies on the use of CAM as adjunctive treatment and aimed to identify only the highest level of evidence.

Conclusions: None of the CAM studies show evidence of efficacy in depression according to the hierarchy of evidence.

P0247

Depression as consequence of war actions in Serbia in 1999

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Aim of study: Our investigation is an prospective analysis of group of patients treated in Primary Health Care Center "Savski venac", department of neuropsychiatry in Belgrade, Serbia. Thru the time period of 8 years we analyzed reactions connected with exposing to stress events which are consequence of war actions in Serbia in 1999, especially worsening of symptoms of depression until 2007 in patients with no history of mental illness.

Methods: Research included 100 patients from Belgrade, Serbia, average age group of 50 years and approximate equal number of male and female sex. They are divided in two groups in dependence of level of education. For examination we used: (1) original question mark — questions about reactions which frequently have people exposed to very stressful events, and (2) Hamilton Depressive Scale (HAMD)

Results: (1) Immediately after war actions in both groups are observed elements of PTSD; (2) in both groups during the time we have occurrence of depression, anxiety, raise of irritability, impulsivity, appearance of aggressiveness, suicidal tendencies, abuse of psychoactive products and alcohol with disorder of interpersonal relationships, disappointment in institutions of state and society; (3) in 2007 are discovered significant increase of depressive score (HAMD) at 45% of tested patients without significant distinction between groups.

Conclusion: Stress events as consequence of war 1999 is the reason of appearance and worsening symptoms of depression thru the time period of 8 years.

P0248

Dinamicelectrophsyological parameters in the depressive patients with the concomitant heart pathology

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The results of a clinical and epidemiological trial "Compass", concerning the depressions among the patients of general internal hospital, performed in 2002-2003 in 35 cities of Russia, showed that the diagnosis of depressive disorders in patients with cardiovascular disease is made in more than a half observations; moreover, the highest value is observed in the cases of chronic heart failure (61% of patients) and of the arterial hypertension (52%).

In this connection the special interest belongs to the detection of early signs of myocardial ischemia in the patients with depressive disorders by means of the new screening device "CardioVisor 06c" for the early detection of myocardial ischemia by the electrocardiogram at rest (Sula A.S., Ryabykina G.V., 2003). The world counterpart of this device is known as "HeartView 6S". This device is built upon the new technology of calculation and three-dimensional visualization of low-amplitude scattering of standard ECG-signal from the extremities. 31 patients (24 females and 7 males) from 18 to 55 years old, undergoing the medical treatment with the diagnosis of depressive disorder, were included in the study. The selection criteria of patients for this investigation were following: the presence of cardiovascular complaints or the cardiological diagnosis (essential or symptomatic arterial hypertension, mitral valve prolapse, vasomotor dyscrasia). The dynamic observation revealed, with the improving mental status in most patients, the relationship between the severity of