

Conclusion: Suicidality of breast cancer patients is associated with QOL domains but not with clinical characteristics of the illness. Decreasing of faith is associated with suicidality.

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Anxiety and bruxist behaviour in the patients with temporomandibular joint disorder

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Background and aims: The level of anxiety depending on existing bruxist behaviour between temporomandibular joint disorder (TMJD) patients and asymptomatic volunteers was compared.

Methods: TMJD in 40 patients (mean age 35.5, 76% women) was diagnosed using RDC/TMD Axis I and was confirmed by magnetic resonance imaging. The control group consisted of 25 asymptomatic volunteers (mean age 23.4, 72% women). Bruxism was diagnosed based on case history and clinical findings. The anxiety was confirmed by State-Trait Anxiety Inventory (STAI).

Results: A higher level of anxiety was determined for all examined patients (the mean score in STAI 1=38.43, STAI 2=46.10). There was no statistically significant difference ($p>0.05$) with respect to the control group (STAI 1=34.25, STAI 2=39.00). Including only patients with determined anxiety depending on age and gender resulted in 62.5% of patients with anxiety according to the STAI 1=42.84, and 72.5% of patients with anxiety according to the STAI 2=44.20. Only 16% subjects from the control group and 40% patients had bruxism. There was a statistically significant difference in scores of both STAI tests in patients with bruxist behaviour ($p<0.001$). Statistically significant differences between patients with lower (1-4) and higher (5-10) degree of pain were rated on a visual-analogue scale for State-Trait Anxiety Inventory 2 ($p=0.012$).

Conclusions: This study has confirmed the connection between anxiety and bruxism as one of the central etiological factors. However, patients with TMJD experience a higher level of anxiety. Patients with estimated VAS pain score ≥ 5 show significantly more anxiety on STAI 2 subscale.

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Relationship between anxiety and hostility among teachers

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Aims: The purpose of the present study was to examine the relationship between anxiety and hostility among teacher.

Method: Participants were 531 teachers of education organization of Golestan province in Iran. The mean age of the participants was 37.49 years (SD = 5.58) and ages ranged from 21 to 50 years old. There were 215 men and 316 women.

Measures: All participants completed a questionnaire booklet containing one self-report measures: The Symptom Checklist-90-R (SCL-90-R).

Results: The results of the present study demonstrate that: 1) Correlation between anxiety and student's hostility is meaningful and positive ($r = 0.733$, $p<0.001$).

Conclusions: The present study revealed that a more anxiety is associated with a high level of self-reported hostility.

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A randomized, open-label comparison of paroxetine (reoxetine) and cognitive-behavioral therapy in management of panic disorder

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Background: The most effective treatments of panic disorder (PD) are serotonin selective reuptake inhibitors (SSRI) and cognitive-behavioral psychotherapy (CBT).

Aim was to compare efficacy of SSRI, CBT and combined therapy (CT).

Method: Forty patients (aged 25 to 50 years) with panic disorder were randomly assigned to one of the three treatment groups: CBT (30 hours, or 4 weeks), SSRI (paroxetine 20 - 30 mg daily, 24 weeks), or CT (both of the abovementioned together). All patients were followed for 24 weeks. Symptoms were assessed using Clinical Global Impression scale, Spilberger State-Trait Anxiety Inventory (STAI), Beck Depression Inventory (BDI) and Minnesota Multiphasic Personality Inventory (MMPI).

Results: At week 24, clinical improvement was reached in 61.5% of patients in the SSRI group, in 78.6% in the CBT group and in 92.3% in the CT group. Significant reduction ($p<0.05$) of the scores of STAI, BDI, and MMPI Hypochondriasis, Depression, Paranoia, Psychasthenia and Schizophrenia scales were registered also in all the three groups. Besides there were differences between CBT and SSRI MMPI profiles – increase ($p<0.01$) of Masculinity-Femininity, decrease ($p<0.05$) of Social Introversion and marked trend to reduction ($p=0.07$) of Paranoia scores in CBT group.

Conclusions: CT seems to be more superior to either monotherapy in the management of PD, whereas clinical effects of SSRI and CBT are close to similar. Obviously, SSRI and CBT exert different influences on personality structure.

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Relationship between psychotrauma and multiple sclerosis

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The interrelation between chronic stress and multiple sclerosis (MS) has always been known, but biological foundation for this phenomena has not yet been proven. Few clinical trials were performed to analyse this connection.

Our objective was to analyse the possible role of chronic stress in development and reoccurrence of MS. Throughout case series the authors described different clinical manifestations of these relations.

Six patients (two female and four male) with diagnoses of chronic combat-related PTSD and multiple sclerosis were selected as the sample for this study. None of the patients have family history of MS nor were they diagnosed with multiple sclerosis before or during the war. On the base of psychiatric interviews, medical records and different self-reported questionnaires the authors analysed the relation