capability to cope (determined by one's existing personality) is exceeded by the challenges in life. Accordingly, stress symptoms manifests when boundaries of one's personality — the way one thinks, feels, and act — is exceeded for the better as well as for the worse. The author has found that 'Breakthrough Intimacy' - closeness between committed couples far greater than their previous maximum level, can eliminate stress symptoms such as anxiety, anger, physical-symptoms, depression, and symptoms of borderline personality disorder, by exhaustion without medications and often within 6 months.

**Method:** The patient and his/her partner perform daily subjective self-rating on 41 parameters to record daily changes in their psychological adjustment, according to a quantifiable model of personality and positive mental health. The couples' daily self-rating is tracked graphically via Internet, providing accurate and comprehensive data to guide the therapist and the patients. Working in three-way teamwork, the therapist actively help the couples to achieve closeness far greater than their previous maximum experience, overcoming waves of symptoms until they disappear by exhaustion, as the couple undergo personality transformation.

**Results:** 1,170 patients treated for various stress symptoms over the last 20 years will be presented.

**Conclusion:** Stress can be better understood and treated as the consequence of one's personality which can be transformed through 'Breakthrough Intimacy' - closeness between committed couples far greater than their previous maximum experience.

#### P0015

Absconding by patients from psychiatric hospital

R. Kigli <sup>1,2</sup>, D. Amital <sup>1</sup>, A. Barzilay <sup>3</sup>, T. Katz <sup>1</sup>, Z. Marzayev <sup>3</sup>, M. Kotler <sup>1,2</sup>. <sup>1</sup> Ness Tziona Be'er Ya'akov Mental Health Center, Ness Tziona, Israel <sup>2</sup> Sackler Faculty of Medicine, Tel-Aviv University, Tel-Aviv, Israel <sup>3</sup> Geha Mental Health Center, Petah Tikva, Israel

Absconding by patients from acute psychiatric wards is a high risk behavior profile in mental medical centers. Being admitted to an acute ward is a stressful event for the patient, accompanied by pathological psychiatric symptomatology, separation from family and familiar environment, adjustment to the environs of ward, the treatment process itself and the loss of autonomy over everyday life. Absconding by patients presents a legal, social and treatment challenge for caregivers. Absconding means abrupt stopping of medication and therapeutic processes, need for police and legal systems interference and worry for the family. Moreover, absconding disposes major safety issues for the patient and his surroundings.

This abstract summarizes prospective study in two mental health centers. Every absconding was mapped within 48 hours of occurrence. Mapping was carried out by a trained team member filling out a structured form.

Study goal: Collecting data and identifying absconders' characteristics, comparing absconders' data from the two centers, pointing out significant ward or hospital variables affecting absconding and comparing patient and staff apprehension of the event.

**Results:** The study collected data of 143 absconding patients, 33% of whom were in confined hospitalization. Most of them were young, single and of low socioeconomic status. Most escaped in the evening shift. There were no significant differences in patient variables between the 2 hospitals. Previous hospitalizations was higher in one of the hospitals (t=2.568, p= .013). There were more staff

members in one of the hospitals (t=4.016, p<.0001). There were no difference between the day and the absconding shift.

#### P0016

Adult life events increase the risk of Cardiovascular Disease and Depressiveness among those with childhood adversities

K. Korkeila <sup>1</sup>, J. Korkeila <sup>5</sup>, J. Vahtera <sup>2</sup>, L. Sillanmäki <sup>3</sup>, M. Koskenvuo <sup>4</sup>. <sup>1</sup> General Practice, University of Turku, Turku, Finland <sup>2</sup> Institution of Occupational Health, Turku, Finland <sup>3</sup> Biostatistics, University of Turku, Turku, Finland <sup>4</sup> Department Fo Public Health, University of Helsinki, Helsinki, Finland <sup>5</sup> Department of Psychiatry, University of Turku, Turku, Finland

**Background:** Childhood adversities are associated with depression as well as increased somatic morbidity.

**Methods:** The Health and Social Support (HeSSup) is a prospective survey of the Finnish working-aged population. Altogether 83 % of the participants of the 1998 survey responded to the second survey five years later (n=19,629). The BDI was used to measure depressiveness and physical illnesses were inquired by asking about physician diagnosed illnesses. Other variables include history of depression, social support, alcohol consumption, negative affectivity, adversities in childhood family, and a checklist of 19 life events.

**Results:** Among women with childhood adversities the risk of depressiveness was significantly increased after a recent life event (1.81-fold). After adjusting for socio-demographic factors, smoking, alcohol consumption, social support, negative affectivity, baseline cardiovascular morbidity and person dependent life events the risk was still significant (1.48-fold). Among men the respective associations were a bit stronger as risk of depressiveness was 2.11-fold and after adjustments 1.84-fold. Recent life events did not increase risk of cardiovascular disease after recent life events among women and men after adjustments were made. Interestingly, in an analysis by type of recent events violence greatly increased risk of depressiveness and cardiovascular disease among men even after adjustments were made (OR=26.2, 95%CI: 6.99-96.1 and 23.6, 4.61-120.6, respectively) if one had childhood adversities.

**Conclusions:** Especially experienced violence was associated both to depressiveness and onset of cardiovascular disease. Violence cannot be considered to be fully independent of the person, but according to the adjustments made, impulsiveness probably does not explain the findings.

### P0017

Assessment of stress at work

A.V. Mazgutov, A. Burtenshaw. Northern West Sussex Assertive Outreach Team, Crawley, UK

**Background:** Stress at work is estimated to be the biggest occupational health problem in the UK. This study assesses work-related stress in a local team of mental health workers.

**Aim:** To identify the work-related stress within multidisciplinary Assertive Outreach Team (AOT).

**Methods:** All sixteen AOT members were given a self-assessment questionnaire. This stress assessment tool consists of six domains and is made up of forty-six questions with a scoring system. Completed questionnaires were filled and anonymously returned back via team secretary.

**Results:** The overall response rate 80% (n=12). Among six domains of the questionnaire the highly scored item were —

"Demands" which in average had a score of 12.3. In this section - "Do you feel that you have much work to do?" was the most scored item with 27 points. At the same section - "Do you feel unable to complete work on time?" and "Do you feel that pressure from work affects your health?" were 2nd and 3rd most scored with 20 points each.

Next significant scores were given for "Control" and "Role" where each scored 9.3. Least points were given for "Relationship" with 4.3 only.

**Conclusions:** People feel overwhelmed with work demand which affects their ability to work and general health at the same time. It appears that a strategy of efficiency measures can be addressed within the team whilst others need to be taken to higher management level.

## P0018

A survey to assess burnout of physicians working in the belgian pharmaceutical industry

P. Mesters <sup>1</sup>, M. Czarka <sup>2</sup>, N. Schepers <sup>3</sup>, D. Renard <sup>4</sup>. <sup>1</sup> European Insitute for Intervention & Research on Burn Out, Brussels, Belgium <sup>2</sup> Green Dragon Lifescience Consultancy, Brussels, Belgium <sup>3</sup> University of Louvain-la-Neuve, Louvain-la-Neuve, Belgium <sup>4</sup> Novartis, Bale, Switzerland

**Objectives:** Burnout is a state of physical, emotional and mental exhaustion. It affects talented and committed individuals working in demanding working conditions.

Although the risk of the medical community to develop the syndrome is extensively documented, this is the first study that assesses the risk of Burn Out in populations of physicians working in the pharmaceutical industry as managers, researchers or executives.

**Method:** The survey was performed amongst the 175 members of the Belgian Association of Pharmaceutical Physicians. The primary objective aimed to assess the lifetime prevalence of burnout.

Maslach Burnout Inventory Scale was used to assess gravity of the components of burnout (depersonalization, professional accomplishment, emotional exhaustion).

**Results:** Eighty members responded. Fifty percent suffered from purpout.

Marital status, solid social network are protecting factors. Stress antecedents aggravate the risk of relapse.

There is a relationship between occurrence of health problems and intensity of emotional exhaustion.

Demography, symptoms profile and the significant factors contributing to the risk are presented.

**Conclusion:** This snapshot reveals that pharmaceutical physicians continue to be burned out at the same rate as their colleagues clinicians, not aligning on the general employee population.

Given the significant mutual investment from pharmaceutical companies and physicians in each other, prevention should be actively pursued to provide higher job satisfaction as well as better productivity.

The authors believe this findings warrant further study, possibly longitudinally, to uncover possible coping strategies and occurrence of relapse.

## P0019

Sleep spindles in kindergarten children: Relation to sleep and Hypothalamic-Pituitary-Adrenocortical (Hpa) activity

T. Mikoteit <sup>1</sup>, S. Brand <sup>2</sup>, J. Beck <sup>2</sup>, E. Holsboer-Trachsler <sup>2</sup>, M. Hatzinger <sup>1</sup>. <sup>1</sup> Psychiatric Outpatient Department, University Hospital, Basel, Switzerland <sup>2</sup> Depression Research Unit, Psychiatric University Clinics, Basel, Switzerland

**Introduction:** Sleep regulation is closely associated to HPA activity. Alterations in both systems may be precursors of psychiatric disorders like depression even at an early stage of development. So far the impact of microstructure in sleep regulation like sleep spindles is unknown. In recent studies, sleep spindles have been linked to efficient cortical-subcortical connectivity and cognitive abilities especially during neurodevelopment.

**Aim:** Sleep spindles in kindergarten children were analyzed and related to sleep regulation and HPA axis functioning.

Patients and **Methods:** Nine five-year old kindergarten children were enrolled in a cross-sectional examination of HPA system activity assessed by saliva cortisol measurements (morning cortisol after awakening) and sleep regulation investigated by sleep EEG-monitoring. Sleep EEG spindles were visually scored and were put into relation to macrostructural sleep and HPA activity parameters.

**Results:** Sleep spindles were correlated to basal morning cortisol secretion (AUC basal) (curvilinear r=.83, p=.01), though were negatively correlated to cortisol increase (AUC netto) after awakening (r=-.77, p<.05). Though not statistically significant but by trend, spindle density (i.e. number of spindles per hour of stage 2-sleep) is negatively correlated to REM density (r=-.57, p=.11), as increase of awakening cortisol was associated to REM density by trend (r=.63, p=.07).

**Conclusion:** Not only sleep continuation parameters as reported before but also sleep microstructure reflected by sleep spindles may be associated to sleep regulation and HPA system functioning.

# P0020

Clinical-Immunological criteria of prognosis of prolonged course of posttraumatic stress disorders

V.B. Nikitina <sup>1</sup>, T.P. Vetlugina <sup>1</sup>, E.M. Epanchintseva <sup>2</sup>. <sup>1</sup> Clinical Psychoneuroimmunology Laboratory, Mental Health Research Institute, Tomsk, Russia <sup>2</sup> Borderline States Department, Mental Health Research Institute, Tomsk, Russia

70 men have been examined — participants of military actions in Caucasus with PTSD. According to type of course and duration of disease patients have been divided into 2 groups: 1—acute-subacute course of PTSD, duration of disease not more than 3 years (36 persons); 2—prolonged course of PTSD, duration of disease 4 and more years (34 persons).

Clinical signs of secondary immune deficiency have been revealed in 58,6% of exam-ined of group 1 and in 78,6% - group 2. In group 2, combination of several syndromes of im-mune deficiency is observed.

During comparison of incidence of accompanying somatic diseases pathology of vari-ous systems in group 1 has been noticed in 63,2% of combatants, in group 2, somatic pathol-ogy has been revealed in 100% of combatants. In patients with prolonged course of PTSD in anamnesis we have noticed fighting traumata and contusions - 60,0%. In patients of group 1 - 39,5%.

Significant differences have been identified between parameters of the immunity in pa-tients of examined groups. Immune status of combatants with prolonged course of PTSD as compared with the group 1 was characterized by lower values of number of T-lymphocytes - CD3+(p<0.05), natural killers - CD16+(p<0.05); higher values of