

P0068

Social anxiety treatment in substance users

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Background and Aims: Social anxiety disorder (SAD) is a disabling condition. Individuals with SAD use behaviours to lessen their fears of negative judgement and danger and manage social situations better. Research suggests that SAD often co-occurs with other psychiatric disorders including substance use disorders. However, individuals are directed to seek treatment for SAD only after they have managed their other comorbid psychiatric problems. They are usually excluded from SAD treatment studies because of the belief that their concurrent disorders are a barrier to SAD treatment. Individuals with SAD may use avoidance strategies including substance use and problematic eating to manage their perception of danger in social situations. This presentation examines the efficacy of a 12-week CBT group modified for the treatment of concurrent SAD and substance use from existing CBT protocols for social anxiety (see Heimberg et al., 1999).

Methods: Participants with a DSM-IV diagnosis of SAD and substance use disorders were administered a series of social phobia, anxiety sensitivity, and expectancies on social evaluative situations pre and post SAD treatment. In addition, they completed weekly avoidance and fear hierarchies of social situations from pre to end of treatment. Treatment involved the identification and challenging of cognitive distortions, behavioural experiments and in vivo exposure.

Results: Multiple comparison analyses suggested that individuals experienced a decrease in fear, avoidance, and physiological symptoms related to social anxiety.

Conclusions: CBT can reduce symptoms of SAD in substance users. Strategies to address substance use and problematic eating while delivering SAD treatment will be also presented.

P0069

Grey matter correlates of cognitive measures of the simulated public speaking test in social anxiety spectrum: a voxel-based study

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Background and Aims: The diagnostic frontiers of social anxiety disorder (SAD) are still controversial, since it could be described as part of a continuum of severity rather than as a disorder based on an arbitrary threshold with qualitative distinctions. The present study aims to investigate possible differences among subjects along the social anxiety spectrum using the Simulated Public Speaking Test (SPST), an experimental model of human anxiety. Afterwards, the anticipatory measures of SPST among groups were correlated with different volume of gray matter areas by MRI using the voxel-based morphometry method.

Methods: We evaluated patients with generalized SAD (n=25), subjects with subclinical SAD (with fear of a social situation without avoidance or impairment; n=14) and healthy controls (n=22).

Results: The subjective SPST findings showed that avoidance and functioning impairment were due to a negative self-evaluation in SPST and not to the level of anxiety experienced. When all groups were pooled together, there was a positive correlation between levels of anxiety experienced and the volume of the right amygdala. The negative self-evaluation of performance in the SPST was associated with a reduction in the volume of the anterior cingulate complex (ACC) only in the SAD group.

Conclusions: These results suggest that the association between anxiety and amygdala volume may be a part of a continuum of social anxiety. However, the correlation between self-evaluation of performance with reduced ACC volume only in the SAD group does not support the idea that this association may be also part of a continuum.

P0070

Family structure and function among heroin addicts ; a case control study

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Background: It seems that the family of heroin addicts carry certain characteristics which constitute the base for the indulgence in psychosocial deterioration. Objectives : To clarify the elements constituting family structure and family function in heroin addicts and to compare it with that of non addict group. Methodology : A sample of 80 heroin dependents diagnosed according to DSM IV TR was studied and compared to a control (non addict) group composed of 20 persons. Data were collected using a pre-designed questionnaire.

Results: parental separation/divorce was higher in the group of addicts compared to control group. Comparing the main caring person among the two groups revealed the following : father (11.3% : 0%) , mother (8.8% : 35%) , both parents (33.8% : 60%) , Addicts were moved to grandparents in 6.3% of cases (0% in non addicts) , to other relatives in 11.3% of cases (0% in non addicts) , and to others (non relatives) in 7.5% of cases (5% in non addicts) , which reflects the instability and change of caring persons for addict. Positive family history for substance abuse was higher in the group of addicts compared to non addicts. Negative feelings towards father and mother were more predominant in heroin addicts' group and also perception of negative attitude from parents.

Conclusion: The family of heroin addict involves a lot of deformities and dysfunctions which need to be considered and highlighted in all therapeutic programs designed for such patients.

P0071

Post traumatic stress disorder and related factors following orthopedic traumas

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Background and Aims: this study designed to determine the prevalence of posttraumatic stress disorder among patients visited following an orthopedic traumatic injury and to identify changes in vital

signs and demographic variables associated with the disorder.

Methods: In a descriptive study with ex-post-facto design, one hundred patients admitted to outpatient orthopedic clinic in Imam-Reza Hospital (Mashhad, IRAN) who had the study criteria were included. Upon admission, demographic information, pain intensity, pulse rate, blood pressure were assessed and General Health Questionnaire-28 was filled. Then symptoms of PTSD were evaluated after one and three months follow up based on DSM-IV criteria. Finally the initial data from the patients developing PTSD after one and three months were compared with those without the disease.

Results: After one month, 5 patients (8.3%) and after three months 6 patients (12.8%) had complete PTSD criteria and 10 patients (16.7%) after one month and 6 patients (12.8%) after three months developed subsyndromal PTSD. Presence of high pulse rate ($P=0.000$), high intensity of the tolerated pain ($p=0.000$), more somatization symptoms ($p=0.041$) and more anxiety symptoms ($p=0.039$) predicted the development of PTSD after one month and presence of high pulse rate ($P=0.000$), high intensity of the tolerated pain ($P=0.000$), high maximum blood pressure ($P=0.047$), more somatization symptoms ($P=0.019$) and more anxiety symptoms ($P=0.024$) predicted the development of PTSD after three months.

Conclusion: High Blood Pressure, pulse rate and pain as well as more anxiety and somatization symptoms upon experience of trauma may increase rate of PTSD in sever orthopedic patients.

P0072

Study on suicidality in veterans of Iraq-Iran war suffering from chronic PTSD

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Introduction: The Iraq-Iran war lasted for 8 years and ended approximately 20 years ago. It left many physically and mentally injured individuals. Many of these veteran have been suffering from chronic post-traumatic stress disorder (PTSD). We observed a percentage of them, suddenly died which could be attributed to self over-medicated. In this research we evaluate tendency to suicide in them.

Material & Method: One hundred and four patients with chronic PTSD who referred to Beheshti psychiatric hospital in Kerman/Iran were included in the study. Subjects should met DSM-IV criteria for PTSD. After collecting demographic data, the risk of suicide was evaluated with California risk estimator for suicide. History of opium dependence and one to one fight were obtained from patients.

Results: The mean \pm SD of age was 39.90 ± 4.33 years and the mean duration of disease was 18.31 ± 1.99 years.. Severity of suicide based on California test showed 15.4% had high and 63.5% and very high tendency to suicide. History of substance dependence ($t=6.58$, $P<0.0001$) and history of one to one fight ($t=2.9111$, $P<0.01$) were two factors which are contributed to high suicidal tendency.

Conclusion: Veterans with chronic PTSD are patients who are at risk for many consequent problems. One of these is suicidal tendency. Suicide is a matter which was not paid sufficient attention. Veterans who had specific problem such as drug dependence and whom which were involved in one to one fight are more at risk of suicide.

P0073

Panic attacks and the homeostatic alarm system

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Several experimental evidences support the existence of a panic respiration connection, however only recent studies, investigating the complexity of respiratory physiology, revealed consistent irregularities in respiratory pattern and suggest that these abnormalities might be a trait marker of the panic disease. The high irregularity observed, together with the unpleasant respiratory sensations in patients with PD, could be the result of the activation of a suffocation false alarm. Basic physiological functions in the organism are strictly inter-related in a global network with reciprocal modulations and, since also abnormalities in cardiac and balance system function have been described in patients with panic disorder, perturbations of these other basic systems or a more general dysfunction of our homeostatic brain might explain respiratory findings (Perna et al 2004). A recent brain imaging study reported an increase in brainstem volume in patients with panic disorder (Protopescu et al 2006). Regulatory physiologic processes take place continuously beyond the consciousness and only occasionally they pervade the conscious awareness as "primal emotions". Panic attacks could be the expression of primal emotion arising from phylogenetically ancient brain circuits processing physiological perceptions/sensations linked to homeostatic functions.

Protopescu X, Pan H, Tuescher O, Cloitre M, Goldstein M, Engeli A, Yang Y, Gorman J, LeDoux J, Stern E, Silbersweig D. Increased brainstem volume in panic disorder: a voxel-based morphometric study. *Neuroreport*, 20;17:361-3, 2006

Perna G, Caldirola D, Bellodi L: Panic Disorder: from respiration to the homeostatic brain. *Acta Neuropsychiatrica*, 16: 57-67, 2004

P0074

Effect of yoga on depression and anxiety of women referred to yoga clinic

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Background and Aims: Yoga has been considered a stress decreasing method in treatment of depression and anxiety disorders whose prevalence is unfortunately increasing gradually. The goal of this study is to evaluate the influence of yoga on depression and anxiety in women referred to yoga clinic.

Methods: This is a clinical trial study on all persons who were referred to a yoga clinic for women, from July 2006 to July 2007. All new cases were evaluated on admission using a personal information questionnaire, Beck and Spielberger tests, and then divided into two groups of case and control randomly. The case group ($n=34$) participated in two weekly yoga classes of 90 min duration for two months. The control group ($n=31$) were assigned to a waiting list. Both groups were evaluated again after two months.

Results: The average prevalence of depression in the case group before and after yoga course was 12.82 ± 7.9 and 10.79 ± 6.04 respectively, a statistically significant decrease ($p=0.13$).