

Thus touch therapy has a similar effect to physiotherapy in reducing the severity of pain, while touch therapy requires no special instruments or techniques.

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Using our model of fairy-tale CBT (FCBT) at the psycho-social rehabilitation center

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The FCBT has been developed by us as a separate component of our Complementary Group Psychotherapy at the Psycho-social Rehabilitation Center in Tbilisi.

The structure of the FCBT model consists of: 1)preparatory talk; 2)reading of certain fairy-tales in group; 3)cognitive-behavioral analysis of the fairy-tale; 4)drawing a parallel between the content of the fairy-tale analysis and the group members' own experiences, problems, etc.

The cognitive-behavioral analysis of the fairy-tale implies: 1)cognitive analysis of the fairy-tale (what are: the main ideas of the fairy-tale, meanings of important elements of the fairy-tale, rational and irrational beliefs and views of the characters, peculiarities of the characters' thinking, etc.); 2)behavioral-situational analysis of the fairy-tale(how the character behaves in a concrete situation; what wishes, emotions and thoughts does the character have in a concrete situation; what are the causes, triggers and factors of the character's concrete behavior; what are the results of the character's behavior; how is it possible to change the concrete behavior of the character); 3)problem analysis of the fairy-tale (what problems and ways of their solution are presented in the fairy-tale; causes, sources and factors of the problems; scientific models of problem solving).

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The influence of physical activities on happiness of female students of medical sciences of Isfahan university

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The aim of the present study was to examine and compare happiness in athletic and non-athletic women. 120 female university students (athletes and 60 non-athletes) were randomly assigned to two groups and Oxford happiness Inventory (reliability and validity have been shown in Iran) was used. The results showed that athletic women were in higher level at the five scales (mental health, self-esteem, efficiency, satisfaction and positive mood). Also, there was a significant difference between level of happiness in two groups

Key words: Self-Esteem, Satisfaction, Efficiency, Positive Mood, Health, Happiness, Athlete, Non-Athlete

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The effectiveness of long-term and short-term psychodynamic psychotherapy on psychiatric symptoms - A randomized trial

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Background and aims: Insufficient evidence exists for a viable choice between long and short-term psychotherapy in the treatment of psychiatric disorders. This study compares the effectiveness of long-term and short-term psychodynamic psychotherapy in the treatment of mood and anxiety disorders.

Methods: The Helsinki Psychotherapy Study is a randomized clinical trial based on 229 psychiatric outpatients from the Helsinki area, with depressive or anxiety disorder. The patients were randomly assigned to either long-term or short-term psychodynamic psychotherapy. The patients were followed for 3 years from start of therapy. Primary outcome measures were depressive symptoms, measured by the self-report Beck Depression Inventory (BDI) and the observer-related Hamilton Depression Rating Scale (HDRS), and anxiety symptoms measured by the self-report Symptom Check List, Anxiety scale (SCL-90-Anx) and the observer-related Hamilton Anxiety Rating Scale (HARS).

Results: A statistically significant 49-64% reduction of symptoms was noted for the 4 outcome measures during the 3-year follow-up. Short-term psychodynamic psychotherapy was more effective than long-term psychodynamic psychotherapy during the first year of follow-up showing 15%-27% lower scores for the outcome measures. During the second year of follow-up no significant differences were found between the two psychotherapy groups. After 3 years of follow-up, long-term psychodynamic psychotherapy appeared to be more effective with 14%-37% lower scores of the outcome measures.

Conclusions: Short-term psychodynamic psychotherapy is more effective than long-term psychodynamic psychotherapy during its treatment period but in the long run long-term psychotherapy is more effective than short-term psychotherapy.

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PTSD

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After the war events in 1999 all of us in Yugoslavia inherited PTSD: night mares constantly repeated, causing terrible traumatic experience, daily inserted thoughts about the events which are involuntary mixing in current thinking, as well as "flash-back" episodes as particularly dissociative state of mind during which a person behaves and feels as if he in the some traumatic situation. The purpose of this work is to implement the rapid-eye movement, behavioral technique, belongs to the kind of system desensitization during psychotherapy treatment PTSD and to diminishing or total lose of all three rare components. The testing was conducted during the war since 1st of May to 30th of June 1999 in Nis. 52 of 164 patients have had the PSPD characteristic (23 male and 141 female). The rapid - eye movement technique was used during psychotherapy. The number of the seances was 4-5 times a month, after which the nights mares and flash-back episodes permanently stopped. Also it was notified that the inserted thoughts were quite random. The drugs therapy was decreased from 30 to 5 mg of Diazepam or none. The "rapid - eye movement" is easy applicable and effective as specific therapeutically method for PTSD treatment especially during the first month after the trauma took place.

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Experiences of using neurofeedback in clinical practice

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Neurofeedback therapy is a method allowing for a change of the bio-electrical functioning of the brain. By using the mechanism of instrumental conditioning, it changes the amplitude of selected brain waves. It allows for suppressing the waves of a too high amplitude and amplify the waves of a too low amplitude, with correlates with psychological and neurological disorders. In the described cases primarily a global training was applied, than it was changed for a specific one, influencing the parts of the brain critical for the given disorder. The first case is a male aged 21 with an organic disorder of the CNS. In the childhood he was suspected of microcephaly. In that period a little retardation of his psychomotor development was observed. In the neurological examination signs of a vegetative dysregulation were found without focal dysfunctions of the CNS. Based on the interview, neuroimaging and psychological assessment he was diagnosed organic personality disorders. The therapy significantly improved the functioning of attention, and visual memory, increased the patients' self-esteem, and reduced anxiety. The second case a male aged 52 male suffering from cyclothymia. In the clinical picture sleep disorders were dominant, accompanied by deficits of memory and attention. The therapy reduced the anxiety level, improved his sleep, and enhanced cognitive functioning. The third case is a female aged 29, suffering from paranoid schizophrenia. The therapy significantly improved the functioning of attention and visual working memory. The cognitive changes reduced her autistic symptoms allowing for better social contacts, and reduced anxiety.

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Unresolved grief in boy depression in young man

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Background and aims: An unfinished process of grief can disrupt further growth and development especially if the loss of close person happens in childhood. The objective of this case report is to point out the importance of grief resolving as one of frequent causes of depression.

Method: Case Report

Result and Conclusion: The case shown is one of young man, occurring due to depressive symptoms. During the interview it was found that the patient had lost a brother 20 years before, and has neither ever cried over him after his death, nor has the subject ever been talked about in his family. In the integrative psychotherapeutic approach, the inclusion and emphatic bonding are followed by the gradual grief resolving process through re-experiencing the pain, the formation and transfer of memories and adjustment to the environment without the beloved person. After the grief resolving has been completed, the symptoms of depression subside. The patient remains in psychotherapeutic treatment with a goal to study further relationship and relating to other people.

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Cognitive behaviour therapy for autism spectrum disorders: Modifications and applicability

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Background and aims: Nowadays worldwide Cognitive Behaviour Therapy (CBT) is considered the therapy of choice for many psychiatric disorders. Its effectiveness has been noteworthy particularly for anxiety disorders and depression however due to the nature of Autism Spectrum Disorders (ASD) it has not been considered appropriate. The aim of the presentation will be to stress the importance of applying CBT with High Functioning Autism and Aspergers syndrome in adolescents and adults and to suggest ways that it can be modified to suit the needs of this population.

Methods: A comparison will be made of the main methods and techniques that are used in CBT programs for anxiety and mood disorders with state of the art methods for ASD and what modifications one might make particularly in terms of psychoeducation and cognitive restructuring.

Results: The available evidence from current research will be reviewed particularly for comorbid cases of Aspergers and Obsessive Compulsive Disorder.

Conclusions: A discussion of the potential benefits and limitations of modifying CBT treatments as well as training psychiatrists and Clinical Psychologists on issues surrounding ASD will be discussed.

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Influence of the group psychodynamic psychotherapy on negative affect, somatization and general psychological distress

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Background: Negative affect and somatization are closely linked to symptoms of neurotic disorders. Negative affect consist of different negative emotions e.g. anxiety and hostility.

Method: The study included a total of 52 inpatients of the day care clinic, 13 men and 39 women, aged 20-56 years. They suffered from neurotic, somatoform and personality disorders. All the patients participated in the group psychodynamic psychotherapy. The therapy lasted 12 weeks, there were 2 sessions of 1.5 hour every working day. The patients were examined before, immediately after and 3 months after the therapy. Negative affect, somatization and general psychological distress were assessed with SCL-90-R, GHQ-30 and PSE (a part of SCAN 2.0) questionnaires.

Results: Mean values of anxiety and depressive symptoms, somatic symptoms and general psychological distress changed in like manner. They dropped of about 1/3 of initial value during the therapy and then stayed stable for 3 months after the therapy. Differences between first and second as well as third assessment were statistically significant whereas between second and third assessment were not. A pattern of change in hostility (SCL-90-R subscale) was different. Mean value of hostility did not change significantly during the therapy and then dropped significantly 3 months later.

Conclusions: Anxiety and hostility could be triggered separately and it is important to assess them both in terms of improvement. Short psychodynamic group psychotherapy is effective in reducing symptoms of anxiety, depression and somatization, but not effective in reducing hostility assessed 3 months afterwards.

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Empathy in psychiatric setting. the contribution of self psychology
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