Conclusions: There may be substantial benefit in providing a support network system for women doctors and other health care professionals who suffer from stress in the workplace.

Keywords: stress, women doctors, job satisfaction, mental ill-health.

P0028

Posttraumatic growth within war torture survivors in Bosnia and Herzegovina

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Aim: Aim of this research is to assess the level of posttraumatic growth within war torture survivors.

Method: Research sample consisted of 128 clients who experienced war torture and who are included in multidisciplinary rehabilitation in The Center for torture victims in Sarajevo. As research instruments Sociodemographic questionnaire (CTV Sarajevo, 2006), List of stressful events (Butolo,Foa,Riggs-PSS 3) and Posttraumatic Growth Inventory (Tedeschi and Calhoun,1996) were used.

Results: Sociodemografic data in this study shows that average age of the sample is 56, and that 55% male examinees were included in the study. Most of them were Bosniaks, and 53,1% unemployed. The results on the List of stressful events shows that 96,9% of clients experienced physical assault by unknown person and 92,2% of them experienced ethnic cleansing. The results on total PTGI in this research shows the mean value (2,2909) which indicates that they experienced moderate change after traumatic event. The highest score (2,9531) is related to subscale of Higher appreciation of life, while the lowest score (1,7578) is obtained at the subscale of New possibilities.

Conclusion: The results of this research shows that after being exposed to extreme traumatic events like war torture, even fifteen years after that, the level of posttraumatic growth within war torture survivors in Bosnia and Herzegovina is moderate.

P0029

Childhood Trauma, alterations of Hypothalamic-Pituitary-Adrenocorticol (HPA) Activity, and Psychopathology in patients with Alcohol Dependence

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Background and Aims: The consequences of Childhood trauma (CT) become increasingly apparent. The available data suggest that (1) CT is related to persisting alterations of HPA activity, (2) CT is related to psychopathology in patients with substance use disorders (SUD), and (3) alterations of HPA activity are related to craving and psychopathology. However, none of the existing studies have tried to integrate these different perspectives.

Methods: We assessed anxiety (STAI), depression (BDI) and craving (OCDS-D) in a consecutive sample of 42 patients with alcohol dependence (37% female, 63% male) on day 1 (t1) and day 14 (t2) after their admission to a detoxification unit. Morning plasma

levels of cortisol and ACTH were assessed and a standard dexamethasone test (DST) was performed (t2). Finally, the Childhood Trauma Questionnaire was administered.

Results: At t1, cortisol levels correlated significantly with anxiety (r=.34*) and sexual abuse (r=.38*). An inverse relationship was found between ACTH levels and both, emotional abuse and emotional neglect (t1: r=-.33*, r=-.39*; t2: r=-.32*, r=-.51**). This relationship persisted when controlling for depression. Craving was related to anxiety and depression (t1: r=.53**, r=.60**; t2: r=.39*, r=.35*), but not to cortisol or ACTH levels. No relationships existed between CT and the DST outcome.

Conclusions: Our results give first evidence that CT is related to changes of the HPA activity in SUD patients, but they could not be further clarified by the DST. Psychopathology was related to both, early trauma and craving. Future studies should try to further examine these complex relationships.

P0030

Affective model of stress related disorders: State-Trait approach

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The purpose of the study was to elaborate of integrated psychopathological and psychological affective model of stress related disorders for the improvement of individual treatment approaches.

Methods: Diagnostic interview (based on ICD-10) - 125 symptoms (Stress Syndrome, Generalized Anxiety Disorder and Depressive Episode); Types of Affectivity Scale (Kovalevskaya, 2006), Pictogrammes Test (Luria, 1961); statistical analysis.

Results: A total of 175 out-patients with stress-related disorders have been investigated - 104 females and 71 males, mean age-33.9+10.6. Mean duration of disorder - 11.5+11.3 months. Psychic traumas: family conflicts - 70.3%, sever relations - 15.4%, death of a close person - 4,6%, severe disease of a close person - 4%, occupational conflicts - 1%. The results have shown three affective ways of psychic trauma fixation and disorders persistence - in anxious, melancholic and apathetic type. In elaboration of affective model of stress-related depression an integration of psychopathological and psychological results for statistical analysis was applied. The characteristic features in clinical symptoms, affectivity traits and psychic trauma perception variants of each type of affective spectrum revealed.

Conclusions: The results of the study have shown three types of affectivity in heterogeneous group of stress related disorders —anxious, melancholic and apathetic. The integrated clinical and psychological (state-trait) diagnosis of the spectrum variants is the basis for the individually directed complex therapy and rehabilitation.

P0031

Synergetics of syndrome of professional burnout in psychiatric community

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Professional activity connected with intensive and close communication with people often causes psychological, mental overfatigue, and in the time context, it disturbs the state of balance and inevitably leads to the syndrome of professional burnout (SPB). Activity of medical workers presupposes emotional saturation, psychophysical tension and big percentage of factors causing stress: up to 80% of doctors-psychiatrists and psychotherapists have SPB signs of different degrees.

As a new methodological instrument of studying professional activity of the psychiatric community, one can use synergetics which allows to look for transitions between spirit and substance occurring in persons. Arbitrariness of human behavior is dictated both by subjective (biopsychosocial properties) and objective factors simultaneously, it is not determined as simple summation of factors, but as system determination that contributes to human self-organization as a result.

The synergic approach presupposes considerable reconsideration of preventive and medical \in "rehabilitation strategies of care of persons with the syndrome of professional burnout. The biopsychosocial synergic model requires introduction of multidisciplinary brigade forms of organization of psychoprevention and SPB correction.

P0032

Influence of stressful life events frequency on multiple sclerosis disease activity

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Background and Aims: There is growing body of evidence that support an association between stressful life events (SLEs) and an increase risk for Multiple Sclerosis (MS) exacerbations. The aims of this study were: first, to examine the relationship between SLEs and MS exacerbations; second, to investigate how SLEs frequency influence MS disease activity.

Methods: Twenty six ambulating women (Expanded Disability Status Score, EDSS \leq 3) with relapsing-remitting Multiple Sclerosis were followed-up for one year or more. Patients documented SLEs weekly in self report diaries which were then collected at regular clinic visits every 4 weeks. Neurological examination was performed, at baseline and at every regular and additional visit after a suspect exacerbation.

Results: A Cox univariate regression analysis showed that 1 or 2 SLEs had no effect on risk for relapses. In the opposite 3 and ≥ 4 SLEs were associated with 5.3 (95% CI 1.7 to 16.4, p=0.003) and 16.7 (95% CI 4.6 to 60.5, p<0.001) times respectively the rate of relapsing during the following four weeks. The number of the reported SLEs was not correlated with the EDSS score [r(26)=-0.10, p>0.05], the system involved [r(26)=0.01, p>0.05], or the duration of the relapse [r(26)=0.02, p>0.05].

Conclusions: This data provide prospective evidence that SLEs may trigger MS exacerbations. The effect of stress on relapse risk in MS is cumulative. A higher density of stress is not related with a mayor inflammation process.

P0033

Narrative Exposure Therapy compared to treatment as usual for refugees with PTSD - Preliminary results from a randomized controlled trial H. Stenmark¹, C. Catani³, T. Elbert³, K.G. Gøtestam².¹ Center on Violence and Traumatic Stress in Mid Norway, St. Olavs Hospital, Trondheim, Norway² Medical Faculty, Norwegian University of Science and Technology, Trondheim, Norway³ University of Konstanz, Konstanz, Germany

Background: There exist almost no data on the efficacy of treatment of posttraumatic stress disorder (PTSD) in refugees coming to Western countries, even though many studies show a very high prevalence of posttraumatic problems among refugees. The present study focuses on the efficacy of a culture sensitive treatment for PTSD primarily designed for work in refugee camps in third world countries. Using a randomized controlled design, Narrative Exposure Therapy is compared to Treatment as Usual in a sample of refugees and asylum seekers in Norway.

Methods: Adult refugees or asylum seekers diagnosed with PTSD according to DSM IV were included in the study. Treatments comprised of 10 sessions and follow-up interviews were conducted 1 and 6 months after treatment using Clinician Administered PTSD Scale, Mini International Neuropsychiatric Interview, and the Hamilton Rating Scale for Depression. The study will continue until the end of 2008.

Preliminary Results: So far, 72 patients with PTSD have been included in the trial, and among them 40 have completed treatment and post-tests. Preliminary results at 1 month follow up show a significant PTSD and depression symptom reduction in patients who had received NET and, to a much smaller extent, in those treated with usual therapy protocols. However, data present so far indicate that only in the NET group, PTSD and Depression symptom reduction remains stable over time.

Preliminary findings indicate the importance of providing also refugees and asylum seekers with focused treatment of PTSD, where Narrative Exposure Therapy seems to be a promising treatment approach.

P0034

Social functioning and stress coping in schizophrenic patients

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Introduction and Aims: We assumed that the shizophrenic patients with low social functioning use less successful stress coping skills. The study was designed to examine connection between social functioning and stress coping skills in a group of schizophrenic patients according to the influence made by age, gender, professional education, involvement in occupation therapy, guardianship, duration of illness and social contacts.

Methods: Examinees (n=123) with diagnosed shizophrenia accommodated at a social care Institution for mentally ill persons. The housing process was identified as a stressful event. Coping skills scale adapted from Arcel and Ljubotina and an Adaptive function scale according to Bellack have been used in the study. The following methods have been used for statistics: descriptive analysis, regression analysis, discriminatively analysis and group centroids.

Results: There were statistically significant between better social functioning and use of special types of stress coping, especially by females and patients involved in occupation therapy. There is no statistically significant difference between groups of examinees considering their age, professional education, guardianship and duration of