

Results: Significant associations were found between eczema and anxiety and depression (OR=1.48 for eczema and co-morbid anxiety/depression). Tendency of somatisation explained about 2/3 of the association between eczema, anxiety and depression. IgE did not contribute in the association. Eczema increased the risk of long-term sick-leave during follow-up. Impairment from eczema was partly explained by adjustment for psychosomatic and mental factors, which was not the case for asthma.

Conclusions: The tendency of somatisation seems to explain much of the association between eczema and common mental disorders. Tendency of somatisation and common mental disorders also explain much of the impairment following eczema, which is not found for impairment from asthma. In summary, our study underlines the relevance of psychosomatics in eczema.

FC02.04

Emotional burn-out in medical doctors in the Moscow region

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Aim: To assess the level of emotional burn-out (EB) and its relation to affective state and personality characteristics of medical doctors in the region of Moscow.

Methods: A random sample of 80 medical doctors (MD) (mainly internists, aged 25 - 72, M/F 6/74) was given Boyko's Emotional Burn-out Test (BEBT), Spilberger's State/Trait Anxiety Inventory (STAI), Zung depression scale (ZDS), Minnesota Multiphasic Personality Inventory (MMPI), Job's Satisfaction Scale (JSS), Professional Attitudes/Locus of Control Scale and Specialty knowledge Test (SKT).

Results: EB was present in 34/80 (42.5%) MD, with no difference between hospital and ambulatory doctors and no correlation with age, years in profession, SKT score, professional locus of control and attitudes towards patients' autonomy. It increased with the number of patients seen monthly ($r=0.25$, $p<0.05$) and was inversely related to JSS score ($r=-0.47$, $p<0.001$). MD's with EB, compared to those without, scored higher on state (33.5 ± 10.5 [32] vs. 26.9 ± 9.0 [25], $p=0.004$) and trait anxiety (52.4 ± 10.6 [52] vs. 43.1 ± 8.4 [45], $p<0.001$) and ZDI (37.9 ± 7.6 [39] vs. 33.4 ± 6.7 [32], $p=0.008$), respectively. MD's with EB scored significantly higher on MMPI scales Depression, Paranoia and Social Introversion and significantly lower on Masculinity.

Conclusion: EB, affecting a large proportion of MD's in the Moscow region, is only weakly linked to workload, if at all. It is associated with depressive/anxious affect and personality traits, such as more rigid thinking and low confidence with others, sensitivity and vulnerability, decreased ability/willingness to communicate. If some of these traits predispose to EB or represent various types of reaction to EB, remains to be assessed prospectively.

FC02.05

Lay help to reduce dementia caregiver's burden: results of a project in Goettingen, Germany and conclusions for a broader audience

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International studies showed that caregiver interventions are efficacious especially when they provide the possibility to be free from

caregiver role for some hours (holidays for some hours). However, lay helpers should be trained for their role.

Based on the previous experiences of other groups the memory clinic of the Medical Faculty of the University of Goettingen, Germany initiated a cooperation with a diaconic social service provider. The latter provided the organisation of care (caregivers contact, a nurse makes a home visit to assess the needs, the lay helper is informed), while the memory clinic organises the selection and training of the helpers and the scientific evaluation, which has been paid by the government by the federal state of Lower Saxony.

Media promotion raised much interest. Sixty-four of 180 applicants finally finished a 40-hours-training including role play and group discussions. The training included information on the disease, its diagnosis and treatment, legal situation, caregiver burden and typical problems in communication. Noone regarded the training as too long. Lay helpers were mostly female and about every fifth had a professional background in the psychosocial area. They were attracted by the possibility to get further qualification and work in a more flexible setting. All lay helpers got a certificate and an insurance for the service related work. The service reached mostly caregivers of severely demented patients. It was for the first time, that lay help service is organised by a medical (university) facility.

FC02.06

Filial maturity as predictor of caregiver burden in adult children of demented patients

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Introduction: Filial maturity has been discussed as important part of a successful development. In this study we investigated, whether it is related to the subjective burden of care for demented parents.

Method: N=61 adult children, who took care for a demented mother and/or father were recruited for his study. We used the following scales and tests: The Louvain Filial Maturity Scale, the Freiburger Persönlichkeitsinventar for the personality profile, the Symptom Check List (SCL-90) for general psychopathology, the Nurses Observation Geriatric Scale (NOSGER) for the caregiver-rated symptom profile of the demented parent, the Zarit Burden Interview for caregiver burden. The demented parent was investigated by experts using a standardised interview for the diagnosis of dementia (SIDAM) and the Mini Mental Status Test for dementia severity

Results and conclusion: Overall filial maturity was not related to the subjective caregiver burden as measured in this study. However, higher "parental consideration" was related to lower burden. And higher "filial obligation" was related to later nursing home admission. The construct deserves further scientific interest in this context.

FC02.07

Mothers, fathers and children with developmental problems

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Background and Aims: The result of many studies is that developmental problems are caused by many socio-psychological factors in the environment of children. The purpose of the study is to investigate those factors.