

ASPECTS TRANSCULTURELS DU POST-PARTUM BLUES: AUTOUR DU QUESTIONNAIRE DE KENNERLEY ET GATH

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Objectifs: Dans le cadre de recherche d'éléments prédictifs à la survenue de Dépressions Post-Natales, différentes études se sont intéressées à la symptomatologie psychique rencontrée chez les jeunes accouchées lors de leur séjour en Maternité.

Depuis les questionnaires de PITT, différents outils d'évaluation quantitative du Post-Partum Blues ont été élaborés. Le questionnaire de Kennerley et Gath fait parti des plus récents, et présente l'intérêt d'explorer différents axes psychopathologiques (7 facteurs: Blues, Réservée, Hypersensibilité, Dépression, Découragement, Ralentissement, Perte de confiance en soi).

Méthodes: Après traduction en français du questionnaire de Kennerley et Gath, avec un recouvrement sémantique le plus large et concis possible, nous l'avons proposé à des accouchées du C.H.U. d'AMIENS aux troisième et sixième jours du post-partum, associé aux questionnaires Hospital Anxiety Depression (HAD) et Beck Depression Inventory (BDI) (13 items). 285 questionnaires ont été remplis au troisième jour et 239 au sixième.

Résultats: Les données quantitatives nous permettent de mieux cerner le contenu du Post-Partum Blues dans ses dimensions anxieuse et dépressive. L'analyse en composante principale (Varimax) nous a permis d'isoler 7 facteurs dont le facteur "hypersensibilité" demeure le facteur principal (20% de l'information totale). Ces facteurs sont identiques à ceux issus du travail de validation de Kennerley et Gath, mais le regroupement des items montre la différence quant à l'expression socio-culturelle de la souffrance. 18 à 44% des accouchées présentent un état anxieux, et 2.96 à 8% un syndrome dépressif à J3, significativement plus important qu'à J6 ($p < 0.001$), sauf en ce qui concerne le score de dépression à l'HAD ($p = 0.164$). Quant au score à la BDI, il demeure très bas (moyenne à J3 = 3.45 ± 3.68).

Conclusions: Le questionnaire d'auto-évaluation de Kennerley et Gath représente un outil de recherche clinique intéressant dans le repérage des symptômes présentés par les mères dans la période post-natale précoce. La.

MANAGING ALCOHOLISM AND OTHER ALCOHOL RELATED PROBLEMS AT WORK: THE ACCEPTANCE OF A TRAINING FOR SUPERIORS IN A UNIVERSITY HOSPITAL SETTING

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Over the last 5 years an employee assistance program (EAP) has been developed at the medical department, University of Tübingen, with more than 6,000 employees. Part of this EAP is a training of superiors to improve their knowledge and their abilities to handle alcohol related problems at work more successfully.

Up to now 70 superiors from 3 divisions (administration, technology, nursing) participated in the training. Their general knowledge and attitudes with regard to alcohol and alcohol related problems were assessed at the beginning and at the end of training.

86% of the superiors reported prior personal experiences at work with inferiors suffering from substance use disorders.

The superiors' confidence into their own ability to handle alcohol related problems successfully increased from 24% at the beginning up to 66% at the end of training, and 91% would recommend this training to others.

The results indicate that training of superiors is an essential part

of alcohol policies at work and that it is well accepted by the participating superiors.

CHILD AND ADOLESCENT PSYCHIATRY IN PRIMARY HEALTH ATTENTION: A DECADE

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Objectives: To analyze the psychiatric derivations of children and adolescents realized by primary attention teams in the Badajoz area (Spain) during a ten year period.

Material and method: We studied 1,796 children sent from primary health attention teams in this period. We recorded the diagnosis, year of derivation and other epidemiological variables.

Results: In a decade, 1,796 children and adolescents were derived; 1,034 were boys and 762 were girls. The mean age was 10.11 ± 3.92 years (mean \pm SD), interval between 0 a 17. 92.9% (1670 children) was living in the capital of province. The most frequent diagnose (DSM-III-R) were V codes ($N = 457$), elimination disorders ($N = 354$) and disruptive behavior disorders ($N = 86$).

Conclusions: Children and adolescents psychiatric derivations represents 26.8% of the global sample of patients sent from primary attention care ($N = 6702$). In each year, the most frequent diagnose were enuresis and attention deficit disorder.

PSYCHOSOCIAL NEEDS EXPRESSED BY PATIENTS ATTENDING THE ONCOLOGY OUTPATIENTS

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Several studies have provided evidence that psychosocial intervention extends survival time and decreases medical symptoms of cancer patients. It has been a natural development in oncology for support teams to be set up in order to meet the psychosocial needs of patients.

Aims: This study set out to assess the psychosocial needs of patients with cancer as perceived by the patients themselves.

Method: A qualitative study was conducted by means of a ten item self administered questionnaire. All consecutive follow up patients attending the oncology department at the Hammersmith Hospital, London, over a two week period were requested to complete the questionnaire. Each item was scored on a likert type scale quantifying the importance of that need as perceived by that patient.

Results: No significant difference was found between needs and age, duration or type of cancer, using chi square statistics. Early and late stages were significantly associated with the need to have additional information and females placed greater importance than males on psychosocial needs.

Conclusion: This study highlights the importance of targeting patient groups with cancer in order to meet their varying psychosocial needs. Further research is required to compare the help seekers from those who do not to understand how this affects prognosis and resource management in the organisation of services.

PSYCHOPATHOLOGY AND STRESS IN INFERTILITY

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Objectives: This study aims at: 1. Determining general psychopathol-

ogy, in particular psychological distress profile, in a sample of sterile women undergoing an assisted reproduction program. 2. Assessing affective distress in such patients. *Method:* The sample ($N = 35$) is constituted by sterile women undergoing clinical assessment and treatment in a university hospital human reproduction unit (mean age = 30.52 ± 3.90 , range: 23–40 y.o. patients). The Spanish Version of Derogatis' SCL-90-R Self-report Questionnaire and of Zung's S.D.S. depression scale was applied to the subjects. *Results:* 1. Psychopathology distress profile according to SCL-90-R scores is characterized by a main elevation of the symptomatic area of Depression (1.31 ± 0.78), followed by the dimensions of Interpersonal Sensitivity (1.12 ± 0.64), Obsession-Compulsion (1.06 ± 0.49) and Anxiety (0.99 ± 0.61). The capital contribution to the features of the symptomatic distress profile rests mainly on these areas.

2. Zung's S.D.S. mean score reaches a subdepressive figure (40.46 ± 9.88). The fact that over 20% of the patients record a clearly depressive level (values > 48) is noteworthy. A high positive correlation between Zung's S.D.S. and SCL-90-R Depression Scale scores ($r = 0.908$) was observed.

Conclusions: 1. Important depressive symptomatology is observed in our sterility sample. 2. Relevant complaints concerning interpersonal interaction are present too, as well as self-reported obsessiveness and anxiety. 3. The stressful condition of sterility itself and the very implications of undergoing a fertilization programme may account for these predominant psychopathology complaints. 4. Sterility deserves psychopathology assessment in order to provide an adequate support, if needed, and in order to facilitate undergoing treatment in human reproduction units.

QUALITY OF LIFE IN BREAST CANCER PATIENTS — A COMPARISON OF TWO QUESTIONNAIRES

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Background: The term "quality of life" has only been used as a relevant parameter in medical research since the mid-seventies. It has become more and more evident that not only a mere prolongation, but also the quality of life is an important factor in the treatment of oncological patients.

A big problem in quality of life measurement is the lack of interregionally accepted well validated questionnaires. The European Organisation for Research and Treatment of Cancer (EORTC) developed an international instrument for measurement of quality of life (EORTC QLQ-C33) in oncological patients, which has been psychometrically tested. Another similar questionnaire is the Functional Assessment of Cancer Therapy (FACT)-Scale, which was worked out and validated in the United States of America. These scales have also been used in our study.

Results: The present survey includes 99 breast cancer patients with an average age of 53.4 ± 8.3 years. All patients received individual cancer therapy (mastectomy or breast conservation with or without chemotherapy, radiotherapy or hormonal therapy) — the average period since the beginning of the treatment was 5.3 ± 4.9 years. Quality of life was evaluated with the above-mentioned questionnaires (EORTC QLQ-C33 Br23, FACT-B). The sample was split into 4 groups. The first 3 groups were divided due to their duration since diagnosis (0–2 years, 2–5 years, more than 5 years) and consisted only of curatively treated patients. A fourth group was represented by patients with palliative treatment. The EORTC-functioning subscales showed significant lower scores in almost every dimension (physical, social, role, emotional, cognitive) for the palliatively treated group in comparison to the 3 other groups. Significant differences were also found in the symptom subscales pain,

dyspnea and financial impact. The FACT-scores showed somewhat different results in this assessment. Most differences between the fourth group and the 3 others did not reach statistical significance. The comparison between the two questionnaires and an interpretation of the life quality scores will be presented.

DETERMINANTS OF TEMPERAMENT AND PSYCHOPATHOLOGY FROM INFANCY TO PRESCHOOL AGE

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In an ongoing prospective longitudinal study on the development of children born at biological and psychosocial risk 362 first born children and their families were investigated. Adverse temperamental characteristics and psychopathological symptoms were determined at the ages of 3 months, 24 months and 54 months. Temperamental characteristics and symptoms were measured with the help of behavioural observations in standardized situations and in a highly structured parent interview. Developmental outcome was also assessed by measures of motor and cognitive functioning.

Results from the first three waves of this study show low persistence and stability for adverse temperamental characteristics and for early disturbances from 3 months to 24 months with an increase in stability from 24 months to 54 months. Pre- and perinatal complications as well as psychosocial risks were associated with difficult temperament at the age of three months. Principal components analyses of adverse temperamental characteristics revealed similar three factor structures for all age groups. Hyperkinetic and conduct problems could not be predicted by adverse temperamental characteristics at 3 months. At 24 months there was a clear correlation between the factors "difficult temperament", "hyperkinetic behavior" and expansive symptoms. Emotional symptoms with 54 months showed relations to the factor "inhibition" with 3 months and 24 months. Whereas the relevance of infant problems for later disturbances is low, there is a remarkable continuity between adverse temperamental characteristics and behavioural disturbances from toddlerhood to preschool age.

GEPTRAL IN THE TREATMENT OF ALCOHOL DEPENDENCE SYNDROME

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Geptral is a new therapeutical medication of an anti-depressive and hepatotropic action. The importance of using this kind of medicine in treating alcoholic patients is obvious. The purpose of the study has been to see the efficiency of geptral in fixing depressive disorders and pathologic craving for alcohol, as well as the hepatotropic action of the medication. The drug was administered to 30 alcoholic patients over a 4 weeks period (850 mg parenterally for the first two weeks and 1600 mg for the following two weeks, every 24 hours). Conducted were chatecholamine and bio-chemical studies (ALT, ACE, timol and sulema samples); the data attained enable to arrive at the conclusion that geptral is a sufficiently effective medication to treat depressive condition in patients with withdrawal syndrome and with liver failures. Registered has been a mild therapeutical impact geptral causes to pathologic craving for alcohol. Geptral can be recommended for combined treatment of alcoholic patients. Geptral is expedient to be resorted to under acute alcohol withdrawal syndrome.