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ETHNOCULTURALLY ORIENTED PSYCHOTHERAPY OF ANXIETY AND PANIC DISORDERS IN KYRGYZSTAN

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The reason for development of psychotherapeutic technologies is a picture of the wold of patients which reflects ethnocultural particularities of population. Ethnocultural particularity of population of patients is its mosaic for which decreasing of possible, mythological and naturally- scientific assessments of symptoms' origin is sugnificant.

In the group of patients with generalized anxiety and panic disorders (36 women of 25-55 years old) the system of psychotherapeutic intervention which is oriented on the consideration of ethnocultural picture of the world and such psychological characteristics as external orientation on the authoritarian style of psychotherapy with the striving for neurotic capriciousness was developed and conducted.

Technologies consists of body-oriented behavioral methodic, cognitive-behavioral therapy and using of psychodynamic approaches for some patients.

Some patients (25 clients) refused from domination of psychotherapists, partnership, and constructive internal position and replace the accent form the symptoms to a problem.

Conclusions: Psychotherapy should be ethnoculturally oriented and have staged character.

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DEPENDENT BEHAVIORS AND PSYCHOTROPIC DRUG CONSUMPTION

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This study is inserted in the broader research of network Dependence INSERM 494013 (1995–2000) on dependent behaviors, included 707 patients (drug addicts, alcoholics, anorexic subjects, bulimic subjects) and 786 controls.

In prospect of prevention, it aims at assessing in control subjects, psychological dimensions wich determine psychotropic drug taking behaviors, and to compare them to those of addict patients.

Subjects took part in semi-structured interviews to assess psychotropic drug taking behaviors (regular, occasional, self medication), and to estimate possible psychiatric diagnosis (MINI DSM IV). Psychopathological dimensions were investigated by self-reports: alexithymia (TAS), interpersonal dependency (IDI Hirschfeld), sensation seeking (Zuckerman), depression (BDI).

Results showed that 3.7% of control subjects, and 54.6% of addict patients were regular consumers.

In control subjects, regular consumption was correlated to depressive or anxious comorbidity (72.4%).

Controls regular consumers were significantly more depressed, more dependent at IDI scale, less sensation seeker than controls no consumers (p < 0.05).

Moreover, controls regular consumers significantly differ from addict patients by the fact that they were less depressed, less alexithymic, less dependent at the IDI scale, and less sensation seeker.

So, it seems that if the medical prescription partly determine psychotropic drug consumption, psychological dimensions may determine the way to use it.

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OPEN TRIAL WITH MILNACIPRAN TO ASSESS EFFICACY, TOLERABILITY AND QUALITY OF LIFE

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Introduction: Depressive disorders constitute a social problem because of their frequency and their complications, especially forced absence from work and in extreme cases suicidal attempts. Milnacipran is an antidepressant which acts by inhibiting the reuptake of serotonin and noradrenaline without any substantial interactions with other receptors, thereby increasing its efficacy and tolerability. The present study is an open trial to test the efficacy and tolerability of milnacipran.

Material and Methods: Included in the trial were all male and female patients who presented at the Main Out-patients Ward of the Clinical Department for Social Psychiatry of the University of Vienna and who were diagnosed as suffering from a depressive disorder according to ICD-10. They were treated for three months with 50 mg milnacipran b.i.d. Efficacy was assessed by a self-rating scale (modified after Zerssen) and a questionnaire for quality of life. Body weight and side effects were recorded.

Results: 15 patients were included in the trial of which 9 were treated for the whole 3 months' period. 2 patients discontinued the treatment because of side effects (1 female patient with tachycardia, 1 male patient with dysuria), 1 patient was hospitalized in a different clinic on the second day of therapy because of deterioration of his condition. 3 patients did not show up for the follow-up visits, 1 patient continued treatment with milnacipran, prescribed by his general practitioner, but did not show up to the follow-up visits.

Efficacy: Already at the second visit a substantial improvement with improved quality of life could be registered for all patients. No serious side effects and no changes in body weight were recorded.

Conclusion: According to the results from this trial, milnacipran is an effective and safe drug which also improves quality of life.

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A MOVEMENT THERAPY GROUP FOR MILD DEMENTED AND DEPRESSIVE PATIENTS – DESCRIPTION OF AN INTERVENTION

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Psychogeriatric patients suffering from dementia and depression, living in the community with their families, run the risk of increasing isolation, deterioration in their self esteem and even the danger of possible advanced regression of their emotional and cognitive functions.

The following paper will report on a therapeutic intervention which combined a group work process consisted of eleven, one and a half hour movement therapy sessions with 12 mild demented depressed patients.

The therapeutic sessions were videotaped, professionals who participated as observers, reported their conclusions and family members of the patients reported their impressions regarding the effects of the intervention at home.

The presentation will include a short film which was abstracted from the 11 taped sessions.