

Today the institution of custody gets more of a dynamic meaning in social psychiatry. It means that it is not always a permanent measure to protect the rights and interests of patients, but should rather be considered a temporary measure which can be of help to achieve faster, more efficient and complete rehabilitation and re-socialization.

All legal proceedings of right and/or work abilities deprivation carried out by the authorized court in Belgrade during 1995. and 1996. were examined in order to get a better understanding how custody is provided and conveyed. Centers for social work as legal authorities for custody in court practice in FRJ, started this procedure in 52.47%, the authorized court in 19.18% and psychiatric hospitals in 28.75%. By these results the most common reasons for custody were: 1) Protection of the patient in 85.42%; 2) Protection of the family from the patient in 6.08%; 3) Protection of children from the patient in 8.25% and 4) Protection of the society from the patient in 3.25%. More than 50% of cases belongs to the group of endogenous psychoses, 31.42% to alcoholism, and less than one fifth to other different psychiatric diagnoses and clinical entities.

From the contemporary clinical and social psychiatry point of view, the institution of custody must be understood as a temporary measure, which can, in some phases and periods of the illness, be of help to health, social and/or legal status of a patient. Of course, mental retardation and progressed cases of sclerotic-senile psychiatric disorders must be here excluded. Custody should be properly used not only to protect interests of patients when their property and civil rights are concerned, but also in their rehabilitation process as a whole. Many times a so-called successive transition of partial work ability deprivation is used.

### Wed-P105

#### PSYCHOLOGICAL AND PSYCHIATRIC CONSEQUENCES OF COMPULSORY NEUROLEPTIC TREATMENT OF NON-PSYCHOTIC INDIVIDUALS

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Negative attitude towards medicine and medicaments, disappointment (projection, generalization), disorders (neurotic, personality) fixation, self-esteem, interpersonal and marital problems and global functioning as result of violence, biological manifestation of stress and stigmatization, are compared in 3 groups of individuals, treated by neuroleptics:

1. Hospitalized under civil proceedings, when various degrees of pressure took place (Method: interview in nonclinic (are afraid of until now) setting after announcement in Kaunas newspaper Group Exploring Misusings in Psychiatry had been organized, screening upon ICD-9 diagnostic criteria (1992): from 61 persons who came to tell about their horrible experience 19 were found as being schizophrenics;
2. Dissidents, convicted to be treated by Soviet Lithuania Supreme Court at KGB intention (Method: Interview "Victims of Psychiatric Abuse - after Their Point of View");
3. Patients with neurotic disorders, treated in psychiatric departments by tranquilizers, antidepressants and neuroleptics with Akathisia symptoms (Method; clinical observation and interview).

Results suggest, that the most dangerous action of compulsory neuroleptic treatment in the absence of psychosis to the individual took place, when he was young, had no support in the family, or had psychological problems.

### Wed-P106

#### ACUTE CHANGES OF REGIONAL CEREBRAL BLOOD FLOW FOLLOWING PLACEBO CONTROLLED INTRAVENOUS INJECTION OF METHAMPHETAMINE OR DIAZEPAM\*

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Previous studies using magnetic resonance imaging sensitized to changes in cerebral blood oxygenation (fMRI) investigated focal brain activation following functional challenge and global vasomotor responses to the application of vasoactive substances. The following study extends this approach to neuroactive substances and, in addition, to the detection of a related placebo effect.

Six healthy males (mean age 27 y) underwent MRI at 2 Tesla (Siemens Magnetom) using the standard imaging headcoil and rf-spoiled FLASH MRI. Recordings were obtained in four sessions per subject and performed in a transverse section angulated to include parts of cortical and subcortical gray and white matter. In each session, a 1 min. intravenous injection of either 10 mg diazepam, 15 mg methamphetamine, or saline was performed after half of the dynamic imaging series. Subjects were not aware of the possibility that placebo might be applied, however knew whether they got a stimulating or sedating substance. MRI signal intensity time courses were determined in regions of interest covering the cerebral tissue of the section. Irrespective of the substance applied, an unspecific signal decrease appeared which preceded the actual injection and may reflect anticipation. Drug specific signal changes were observed in that signal time courses diverged after injection of verum, falling and rising in response to diazepam and methamphetamine, respectively. Overall, time courses under drug influence displayed enhanced intersubject variability compared to baseline.

These findings indicate that studies of psychotropic drug action will have to consider both an immanent placebo effect and the temporal evolution of the drug response studied.

### Wed-P107

#### MEMORY DYSFUNCTION AND NEURO-IMAGING IN KORSKOFF AND ALCOHOLISM

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Memory dysfunction in man can be caused by different disorders and may be related to several neuronal substrates. Initially, in Alzheimer's dementia structures in the median temporal lobe are involved especially. The Korsakoff syndrome, caused by thiamine deficiency, can be described as a diencephalic amnesia, in that especially thalamic and basal forebrain structures are affected. The relative contribution of the direct neurotoxic effect of chronic alcohol abuse per se on the brain and on neuropsychological deficits can be evaluated by comparing Korsakoff patients and chronic alcoholics without this syndrome. There is a certain paucity in studies comparing neuropsychological functions deficits in alcoholics and Korsakoff patients with abnormalities in specific memory-related brain structures with MRI.

In the present study, 15 Korsakoff patients were compared with 15 alcoholics, matched for age, sex and intelligence and to a

certain degree for the duration of alcohol abuse. Assessments were done by means of a variety of neuropsychological tests involving domains such as: planning and attention, visual perception, visuoconstructive capacity, intelligence and memory. Magnetic Resonance Imaging was performed with a Gyroscan ACS-II and involved volumetric assessment of the hippocampus, the amygdala, de mammilian corpus, thalamus, third ventricle and prefrontal cortex.

Patient inclusion and exclusion criteria, methodological procedures and the main results will be presented.

### Wed-P108

#### SULPIRIDE IN THE TREATMENT OF PAIN DISORDER

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**Background:** Pain disorder (DSM IV) appears to be relatively common in general practice and to cause both psychological and functional impairment.

**Aim:** Assessing efficacy and safety of sulpiride in the treatment of pain disorder, under naturalistic conditions of use, in general practice.

**Method:** In a multicenter, open clinical trial, 669 patients (mean age: 47 years 12/female: 63%) fulfilling the DSM IV criteria for pain disorder (digestive localisation), were included by 321 General Physicians and treated for six weeks with sulpiride 150 mg/d. The pain was of psychological type in 93% of cases and caused social or working disabilities in 78% of patients.

**Results:** The investigator's scales showed from DO to DEnd a decrease in pain intensity (91% of patients) and in pain frequency (89%). Besides, at D42, 89% of patients were responders (much improved and very much improved) on the Clinical Global Improvement scale (CGI) item 2. A similar improvement ( $p < 10^{-3}$ ) was observed from DO to DEnd on the self evaluation parameters (Visual Analogic Scales), assessing pain ( $\Delta$ :  $17.1 \pm 15.9$ ), quality of sleep ( $\Delta$ :  $27.1 \pm 17.8$ ), activity ( $\Delta$ :  $24.4 \pm 18.8$ ), and appetite ( $\Delta$ :  $22.6 \pm 16.6$ ). 8% of the patients had at least one adverse event. 3% of patients withdrawn for adverse events. The safety assessed with a specific variable (grouping together adverse events reporting and results of CGI item 3) was estimated "good" for 88% of patients.

**Conclusions:** These results confirm the usefulness of sulpiride in the treatment of pain disorder which is known as an symptomatology causing difficulties to GP's in their practice.

### Wed-P109

#### REVIEW OF QUALITY OF LIFE STUDIES IN THE CZECH REPUBLIC<sup>1</sup>

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The communication reviews a relatively new topic in Czech Social Psychiatry - the quality of life (QoL) studies.

In the Czech Republic (CZ) the endeavour to measure QoL follows the same peripeties as in countries with a longer QoL history. At present the QOL research goes through the phases of its content delimitation, of development of Czech QoL versions of instruments, of their validization and transcultural comparison to follow-up studies of diagnostically homogenous samples with special attention paid to the QOL of family members of the mentally and physically ill individuals (especially in chronic course of the disease),.

Besides the lists of QoL studies, instruments, main research aims and results, the psychometric characteristics of the Czech version of the SQUALA (Subjective QUALITY of Life Analysis; © NICE 1992, M. Zannotti) instrument are demonstrated derived from about 800 psychiatric cases and 400 control subjects. The profiles of subgroups by age, gender, and diagnostic classes are presented.

The instrument used allows to evaluate not only the QoL scores of various life domains, but also their value orientation and the individual's satisfaction with their state. It was applied in longitudinal studies of course and outcome of mental disorders, of the effectivity of rehabilitation and in comparison of the effectiveness of various health and social care provision alternatives

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### Wed-P110

#### HEALTH-RELATED QUALITY OF LIFE IN PSYCHIATRIC AND OTHER PATIENTS BEFORE AND AFTER TREATMENT

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**Purpose:** To compare the health-related quality of life (HQOL) of psychiatric out-patients with that of other patients as well as the effect of treatment on HQOL.

**Method:** A 32 item questionnaire compiled by the authors for assessing various aspects of HQOL which has an acceptable reliability and validity was filled in by several groups of patients coming to the hospital before or early in the treatment and at least three months later. These included psychiatric out-patients, alcoholics in day-treatment, orthopedic, urology and coronary artery patients.

**Results:** The psychiatric patients had a low HQOL in most respects which improved slightly after three months. The orthopedic patients had a slightly better overall HQOL, but lower as regards general health, energy, pain, and sleep, all of which improved considerably following treatment. The coronary artery patients HQOL was better than the others, but similar before and after treatment.

**Conclusion:** HQOL is an important aspect of health which needs more attention in treatment and in allocation of resources. However, we still lack data on HQOL in the general population for comparison.

### Wed-P111

#### LITHIUM EVOKED DNA STRAND BREAKS AND APOPTOSIS IN IMR-32 CELLS ARE INDEPENDENT OF P53 AND INOS

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**Introduction:** We observed that lithium exerts a weak antiproliferative effect towards cells of the well-reported human neuroblastoma line IMR-32 accompanied with DNA fragmentation frequently leading to programmed cell death termed apoptosis. The line contains two cell types.

**Objective:** In search for intracellular regulators mediating the genotoxic and apoptotic effect of lithium in IMR-32 cells we tested the p53 tumor suppressor protein expression as well as that of the inducible nitric oxide synthase (iNOS).

**Methods:** Apoptosis was determined by detection of DNA strand breaks in the in situ nick translation (1) and by morphological