

Background and Aims: Describe and analyze the sequence of facts that families and patients have to cope with during the admission process at the hospital.

Methods: Based on a simple questionnaire applied to patients and relatives at the entrance of the hospital we obtain some interesting information about expectations and fears that may interfere in the relationship between users and staff. This information is very useful in order to plan not also the sequence of persons that may talk to the patient and/or their relatives but the content of the conversation to aim the best relationship and minimize stressors during hospitalization.

Results: We list the main fears that appear in the process classified in four topics:

1. Fears previous to admission
2. Fears at first contact
3. Fears in proper admission process
4. Fears in relationship with the therapists

We also list main expectations in two topics:

1. Relative's expectations
2. Patient's expectations: related to diagnosis, therapeutic process, staff, structures and rooms of the hospital and other circumstances.

Conclusions: Fears and expectations of patients and relatives interfere in admission process but also in hospitalization and post discharge period.

It is very useful to know those fears and expectations in order to plan the hospitalization process.

This information is also useful to plan staff training and edit an information guide given at the entrance. This may also improve quality care parameters at Hospital.

P0209

A Survey of patients' sources of knowledge of medication side effects and implications for compliances

V.O. Agyapong¹, R. Bangaru¹, R. Kirrane¹, E. Cryan¹, R. Browne², J. Benbow¹, M. Gannon², Y. Bimpeh³.
¹Department of Psychiatry, Connolly Hospital, Dublin, Ireland
²Department of Psychiatry, St Brendan's Hospital, Dublin, Ireland
³Department of Statistic and Computer Applications, Dublin City University, Dublin, Ireland

Objectives: Assess the sources of patients' knowledge of medication side effects and the effects of their knowledge on compliance with prescribed medication.

Methods: 476 patients attending psychiatric services were randomly selected and asked to fill a questionnaire designed to assess parameters relevant to the objectives of the study.

Results: Overall, 44% said they had learnt of side effects of their medication from multiple sources including doctors (52.31%), leaflets (54.2%), internet (14.29%), books (13.02%), chemist (11.34%), other patients (5.67%), friends/relatives (7.35%), self-help groups (2.94%) and other sources (4.2%). 8% said they were not aware of any side effects of the medicines they are taking presently.

13.44% of patients reported that they never find out about side effects of their medication before taking it for the first time with a high proportion of these being males (17.93% vs. 10.69%, $p = 0.0366$). 46.2% reported that they have had concerns about taking medication because of their knowledge of side effects with females more likely to have such concerns than males (49.83% vs. 40.76%, $p = 0.0269$). Finally, when asked if they would have taken the medicines prescribed for them now if they were told initially of all the side effects, 51.05%

answered 'more likely', with a higher proportion of these being males (56.67% vs. 49.46%, $p = 0.06$)

Conclusion: Doctors and information leaflets are the leading sources of patients' knowledge about side effects of medication. The knowledge of side effects of medication has a potential to impact more on the compliance of female patients compared to males.

P0210

Culture and psychopharmacology

G.H. Ahmadzadeh, A. Malekian. *Behavioural Science Research Center, Khorshid Medical Center, Isfahan, Iran*

Introduction: Culture is defined as the sum total of the way people think, feel, and act as members of a social group. Culture is learnt. Cultures can overlap and individuals can belong to several cultures. cross-cultural psychopharmacological studies have mainly focused on differences in the pharmacokinetics and pharmacodynamics of psychotropic medications among various ethno-cultural groups and research on many socio-cultural non-biologic contextual factors in psycho-pharmacotherapy is sporadic and often not widely known. In this paper, the authors review the relevant literature in all these areas.

Methods: Searching the recent thirty years studies on cultural issues in psycho-pharmacology in a wide area and then screening them systematically, fifteen relevant studies were selected and evaluated. Results were conceptually re-arranged and re-classified and are presented in the format of a narrative review.

Results and Discussion: In a general aspect, cross-cultural factors affecting psycho pharmacotherapy can be divided in two groups i.e. primary variables which directly influence pharmacodynamics and pharmacokinetics and confounding variables which indirectly interact with drug treatment, selection, usage and response. In another point of view, trans-cultural psychopharmacological issues are classified in the domains of patient variables, doctor variables and environmental variables, each including many different factors and considerations which are elaborated and discussed in the full-text of this material.

Keywords: culture, race, ethnicity, psychopharmacology, cross-cultural, trans-cultural

P0211

Association between psychological distress, subjective sleep quality and health-related quality of life in patients with obesity: A preliminary study

A. Algul¹, U.B. Semiz¹, M.A. Ates¹, Y. Onem², S. Ebrinc¹, C. Basoglu¹, O. Gecici¹, M. Cetin¹.
¹Department of Psychiatry, GATA Haydarpaşa Training Hospital, Istanbul, Turkey
²Department of Medicine, GATA Haydarpaşa Training Hospital, Istanbul, Turkey

Objective: Recently, increasing prevalence of obesity has been elucidated for a major public health problem. Previous research propose that obesity may be significantly associated with psychological distress, considerable disturbances of sleep and health-related quality of life (HRQL). The aim of this study is to examine the psychological distress, subjective sleep quality and HRQL in a group of patient diagnosed with obesity.

Methods: A total of 57 obesity patients and 53 healthy control subjects were involved in the study and self-administered questionnaires was submitted to measure by using the General Symptomatic

Index of Symptom Checklist (SCL-90-R), Pittsburgh Sleep Quality Index (PSQI), HRQL (Short-Form 36). Several clinical and socio-demographic data were also recorded.

Results: HRQL was significantly reduced in obesity as compared to healthy controls. The obesity group exhibited greater psychopathology and suffered greater disturbed sleep quality than did controls. In particular, psychopathological distress was positively correlated with global PSQI scores.

Conclusions: Obesity is associated with psychopathological distress, poor subjective sleep quality and reduced perceived health status. Recognition of sleep disturbances in obese patients is also relevant to management, because effective strategies to improve sleep in this patient group might also lead to vast improvements in their psychopathological distress and perceived health status.

References:

[1]. Marchesini G, Bellini M, Natale S, et al. Psychiatric distress and health-related quality of life in obesity. *Diabetes Nutr Metab*. 2003 Jun;16(3):145–54.

[2]. Simon GE, Von Korff M, Saunders K, et al. Association between obesity and psychiatric disorders in the US adult population. *Arch Gen Psychiatry*. 2006 Jul;63(7):824–30.

P0212

Hidden victim of incestuous father: Case report

A. Delic¹, A. Sutovic^{1,2}. ¹Department for Psychiatry, University Clinical Center, Tuzla, Bosnia and Herzegovina ²School of Medicine, Tuzla University, Tuzla, Bosnia and Herzegovina

Due to the societal attitude against incestuous relationship, its prohibition became universal throughout the world. It is related to the cultural obstacles for it implies violation of moral and moral comprehension about interfamilial relations. However, the incest is mostly unreported, hardly detected and recognized because the child-hidden victim of incest, shame and fear is suffering in silence. Therefore, probability of prevention, support and treatment of the victim is decreased while severe psychological consequences are increased. It is known that, in certain cases, when the mother get to know about incestuous relationship between her daughter and the father, due to various interests and dependence-related reasons, the child is forced not to report on it. As those crimes mostly occur in "private circle" of the family, with no witnesses, even if reported, the perpetrator is usually released due to a lack of evidence, which will be illustrated in this case report. Sexual taboos, especially present in undeveloped countries, contribute to the expansion of societal moral crisis and sexual delinquency, as well as to the alienation and isolation of its victims. Our future should be marked with more efforts invested in raising public awareness about the presence of this problem in our country and a comprehensive care for children where multidisciplinary approach is required.

P0213

Factors influencing attitudes of deinstitutionalized patients' neighbours

G.D. Giaglis, B. Michailidou, G.F. Angelidis. *Psychiatric Hospital of Petra Olumpus, Katerini, Greece*

Objective: The purpose of this study was to assess the factors that influence attitudes of people neighbouring to residential care facilities that host chronic psychiatric patients formerly hospitalized in a psychiatric hospital, 2 years after their deinstitutionalization.

Methods: One member of at least 30 households neighbouring to 8 community-based psychiatric facilities (hostels and sheltered apartments) was interviewed by a group of specially trained social workers. The structured interview used was compiled specifically for the needs of this study.

Results: Less than 25% of our sample had adequate knowledge of the term 'deinstitutionalization' and in particular people with higher education and that have been visited by a psychiatric resident. Nevertheless, their attitudes were in general positive. In a regression analysis, attitude towards deinstitutionalization was found to be positively correlated with having visited a psychiatric facility, years of education, and living near 4 out of the 8 psychiatric hostels [R-squared=0.20]. Female neighbours were generally more favourable, but this effect was only marginally significant. Attitude towards the psychiatric patient was best predicted by years of education, having visited a psychiatric hostel and living near 2 out of the 8 psychiatric hostels [R-squared=.21]. Age was generally negatively correlated with attitudes towards the patient [r=-0.23]. There were also significant differences among the attitudes of the various hostel neighbourhoods.

Conclusions: Apart from education, age, and gender the most important factors in influencing attitudes towards deinstitutionalization and patients are local. Choice of favourable locations for psychiatric facilities and cultivation of a positive neighbourhood climate are important.

P0214

Deinstitutionalization increases conflicts but also job satisfaction of a psychiatric hospital's staff

G.D. Giaglis^{1,2}, K. Mantziava², G.F. Angelidis¹. ¹Psychiatric Hospital of Petra Olympus, Katerini, Greece ²Psychology Department, Aristotle University of Thessaloniki, Thessaloniki, Greece

Objective: The study of the impact of deinstitutionalization on a Psychiatric Hospital staff's perceptions regarding the sources of conflict at work, the presence of injustice, and their job satisfaction.

Material and Methods: A questionnaire specially made for the purpose of this study was anonymously completed by the working staff two years before and two years after the closing of the chronic wards of their hospital.

Results: The staff felt that there are more conflicts between nursing staff and patients as well as between colleagues themselves. The lack of staff was the greatest cause for conflict reported [t(346) = 2.735, p < 0.01], as was before the deinstitutionalization, while female gender, younger age [r = -0.117] and closer contact with patients were correlated with perception of more conflicts. The opinions about justice in the work environment were not significantly influenced by the deinstitutionalization, but by younger age [r = 0.150] and the female gender, as well. Finally, the staff reported higher levels of general satisfaction from their work [t(343) = 2.923, p < 0.01] and especially that they felt safer in their new workplaces, than in the chronic wards of their hospital [t(349) = 1.976, p < 0.05]. This effect was independent of gender, age or job type [F(5, 231) = 2.361, p < 0.05].

Conclusions: This follow-up study verifies the previously found effects of the staff's demographic characteristics on perceptions of conflicts, justice and job satisfaction. The relocation of patients to community-based psychiatric facilities, which are smaller, with less staff and more responsibilities has created more opportunities for