

Center, Beer Ya'akov, Israel ² Tel-Aviv University, Medical School, Tel-Aviv, Israel

Beds in Israel's private psychiatric hospitals, where the standard of care is markedly lower than in state-run facilities, are being closed down. Their patients - many hospitalized for years - are being re-assessed and those still needing inpatient care transferred to state hospitals. The aim is to give a better quality of life, conduct a thorough psychiatric reappraisal and offer the latest therapeutic options.

The merged Be'er Ya'akov-Ness Ziona- Israel Prisons Service Mental Health Center set up a multidisciplinary team to conduct a coordinated process of reappraisal, preparation, reorganization and admission for these patients and their families. We found in the patients complex self-management problems, a high level of dependency, severe neglect, a range of tendencies to violence, and mistrust of the staff. The family members revealed high levels of anxiety and fear. Given this situation, a nursing staffer was appointed to liaise with the families, be freely available for consultation and act as patient advocate.

In this presentation we describe the core principles for this multidisciplinary reassessment and re-placement process, which began by assessing the patients in their setting of origin. We report on the planning of new interventions incorporating the latest therapeutic advances, exceptional incidents, changing the profile of the psychogeriatric ward, etc. We offer the conclusions and recommendations drawn from this change process, undergone equally by patients, family members and staff, and report on its results, which for many of the patients led to a more open care-setting in the community and for some a return home.

P0353

Compression of Nortriptyline and Bupropion in major depression disorder among elderly patients

N. Mokhber, M. Modares Gharavi. *Psychiatry Department of Mashad University, Avicenna Hospital, Mashad, Iran*

Background: The number of the elderly is rapidly growing and depression is known to affect this group of people aged 60 years and above quite seriously. Pharmacotherapy in this age presents many challenges. Both bupropion, and Nortriptyline, a TCA with mild anticholinergic effect have been prescribed for the old patients suffering from depressive symptoms.

Method: In a randomized double-blind study with 8 weeks of follow-up we selected 52 elderly outpatients who had non psychotic major depressive disorder according to DSMIV criteria and they were allocated into two groups who received nortriptyline (at a dose of up to 150 mg per day) and bupropion (at a dose of up to 225mg per day). Cognitive state was assessed using the Mini-Mental State Examination.

Setting: The out patient clinics at the Ghaem and Avicenna Hospital, Faculty of Medicine of the University of Mashad.

Results: Both treatments were efficacious, and there were no statistically significant differences between the two antidepressant classes with regard to efficacy (pvalue<0.05).

Conclusions: For elderly depressed patients who completed a 8 week treatment trial, both nortriptyline and bupropion exhibited good efficacy and few side effects. There was no significant difference between the two groups in their response rate or the severity of side effects resulting from medication.

P0354

Prevalence of depression in an elderly population in Iran

N. Mokhber ¹, M.R. Majdi ², M. Salek Haghghatpoor ². ¹ *Psychiatry Department, Mashad University, Avicenna Hospital, Mashad, Iran* ² *Health System Department, Mashad University, Mashad, Iran*

Depression among elderly in Iran, has not been well studied. This research is part of a series examining health status of older people using the Geriatric Depression Scale (GDS-15).

Method: 1975older people living in Razavi Khorasan province were studied using the cluster sampling method. The Persian version of GDS was completed based on filling in questionnaires and after recognition of sample size of each city. Admission and data analyzing was followed by examining the relationship between depression and place of living (rural and urban), education, gender, type of living (alone or with family), occupation, source of income, supporting system (such as charities)

Result: The subjects' mean (\pm SD) age was 71.14 \pm 7.78 years (range: 60-98) and 52.9 of the subjects were women. According GDS score, 23.5% of the subjects were at risk of depression. The GDS score was significantly related to type of living (alone or with family) and source of income, and supporting system (such as charities). The percentage of depression was higher in subjects living alone than those living with others (P<0.01, respectively). There are significant differences between depression scores in elderly with family support, others, personal wealth and retirement salary (p<0.01).

Conclusion: Depressive symptoms are common among community-dwelling elders in Iran, and with its identical demographic characteristics, we suggest depression may be related to some factors including living alone and to source of income, and supporting system.

P0355

Associated factors with psychiatric symptoms in a Spanish community-residing elderly

F.J. Olivera Pueyo ^{1,3}, S. Benabarre Ciria ^{2,3}, T. Lorente Aznar ^{2,3}, M. Rodriguez Torrente ^{2,3}, C. Pelegrín Valero ¹, A. Castellón Fantova ⁴, S. Lausín Marín ⁵. ¹ *Mental Health Unit, Huesca, Spain* ² *Educational Center of Family Medicine, Huesca, Spain* ³ *Instituto Aragonés Ciencias de la Salud (I+CS), Huesca, Spain* ⁴ *Health Care Center Pirineos, Huesca, Spain* ⁵ *Health Care Center From Tamarite, Huesca, Spain*

Background: There are various physical, functional, psychological and social factors associated with the appearance of mental symptoms in the elderly. Our objective was to determine the relationship and influence of these different variables in the psychiatric symptomatology of the elderly who reside in the community.

Methods: Cross-sectional study of a sample of 324 patients over 65 years, representative of the elderly who reside in the community in the province of Huesca (Spain). Symptoms of depression (Yesavage GDS), cognitive impairment (MMSE), anxiety (GADS), psychotic symptoms, obsessive symptoms and hypochondriacal ideas (GMS) were measured. Social-demographic, physical and somatic, functional and social data were evaluated. Analysis was carried out in 3 phases: univariate, bivariate and multivariate with logistic regression.

Results: At the time of the study, 46.1% of the elderly studied suffered from some psychiatric symptom. 16.4% had cognitive