

in the metropolitan area of the city of Milan, Italy were studied. Results showed that comorbidity for DSM III-R diagnoses was 92% with 31% and 70% of the subjects showing respectively Axis I & II psychiatric disorder. No statistically significant differences were found between HIV seropositive and HIV seronegative individuals with regard to psychiatric comorbidity. Further work should aim to clarify factors that are associated with psychiatric comorbidity and therapeutic compliance in individuals with a triple diagnosis of drug abuse, psychiatric disorder, and HIV infection.

PREVALENCE AND PROGNOSTIC VALUE OF ANXIETY AND DEPRESSION IN PATIENTS UNDERGOING CARDIAC SURGERY

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Anxiety and depression are controversial risk factors for cardiac disease. We performed a bicentric study in order to quantify anxiety and depression in patients 24 hours before cardiac surgery intervention, and relating them with post-operative complications.

Method: Our study included prospectively 154 patients (99 coronary disease, 55 valvular disease), addressed for programmed cardiac surgery. Anxiety and depression were assessed by two independent methods: The autoquestionnaire Hospital Anxiety Depression Scale (HAD), and the subjective appreciation of the chief nurse and the physician (each quoting a rating scale from 0 to 10) the day before intervention. Post operative complications were notified: outcome, number of system failure, other somatic complications, psychiatric disorders.

Results: 48 (31%) patients were anxious using HAD, 71 (46%) using subjective scale. Thirteen (8%) patients suffered depression using HAD scale, 29 (19%) using analogic scale. Outcome ($p = 0.49$), number of system failure ($p = 0.14$) were not correlated to anxiety or depression scores. Other somatic and psychiatric complications were strongly related to anxiety ($p = 0.04$, $p = 0.006$) and depression ($p = 0.004$, $p = 0.0001$) using subjective analogic scale. These relations were independent from other classical risk factors in cardiac surgery. They were more significant for depression and for coronary artery disease patients. Analogic values quoted by physician and nurse were comparable.

Conclusion Anxiety and depression are present in between 30 and 50 percent of patients undergoing cardiac surgery. Evaluated by a subjective analogic scale, these troubles are related to more frequent post-operative complications.

MATERNAL THYROID PEROXIDASE ANTIBODIES DURING PREGNANCY: A MARKER OF IMPAIRED CHILD DEVELOPMENT?

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We recently described a 5 years follow-up study showing that children of women with antibodies against the enzyme thyroid peroxidase (TPO-Ab) but normal thyroid function during pregnancy are at particular risk for impaired development (after correction for confounding variables such as maternal educational level, maternal depression). However, these children were only assessed at the age of 5 years leaving the question open whether other (unknown) factors might influence the outcome of child-development during this period.

Therefore, in another sample, we assessed child development of 248 children at 9 months' postpartum by means of the Bayley

Scales of Infant Development. There was a significant difference between scores of the Motor Scale of children of women who had elevated TPO-Ab titers during gestation ($n = 19$) and the scores of children of TPO-Ab negative mothers during gestation (Mean Difference: 11.5, 95% CI 3–19). Besides, children of TPO-Ab antibody positive women during gestation had lower (although not statistical significant) scores on the Mental Scale (Mean Difference: 5.9) and the Non-Verbal Scale (Mean Difference: 5.6). Moreover we found that the titer of TPO-Ab during gestation was of importance: only children of women who had elevated titers both at 12 and 32 weeks' gestation (the titer declining physiologically during gestation) had significant different scores. This study confirms our earlier findings that children of pregnant women who had elevated titers of TPO-Ab but have normal thyroid function are at risk for impaired development.

HOW DOES THE PATIENT'S DEPRESSION AFFECT THE SURGERY SITUATION?

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Materials and methods: The study was carried out in three primary health care centres in the Tampere (Finland) region. A total of some 2 500 adult (18–64 years) patients were given a depression screening instrument and a second, more general questionnaire. On the basis of their responses, those who returned the questionnaires ($n = 1643$) were divided into two groups, i.e. screening positive and screening negative. All those in the former group plus one in ten from the latter group were invited to take part in an interview. The researchers evaluated the respondents' ($n = 436$) depressiveness on the basis of a PSE interview (the most crucial measure), the Hamilton scale and DSM-III-R criteria. The doctor who had originally seen the patient in surgery was asked to submit his/her assessment.

Results: Although in their questionnaire responses the patients showed a high sensitivity to their depressive symptoms, these symptoms were rarely stated as reasons for visiting the doctor. If the patient said the reason for the visit was psychic, this had many effects upon the surgery situation. If the patient had undiagnosed depression, its main effect was that these patients felt they had not been properly understood by the doctor. The use of health services was not higher among the depressive patients, but they did use a greater number of prescribed (somatic and psychiatric) drugs.

Conclusions: Patients should be encouraged more openly to raise and discuss their psychic problems during surgery. Doctors should pay close attention to the process of communication with the patient; depression is often accompanied by a decline of cognitive skills. The needs of depressive patients remain unmet and their symptoms treated with the wrong kinds of medicine.

EVALUATION OF PSYCHIATRIC COMORBIDITY AMONG DRUG ADDICTS AT OUTPATIENT TREATMENT CENTRES: CLINICAL EXAMINATION AND ASSESSMENT BY STRUCTURED DIAGNOSTIC INTERVIEWS

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The study of comorbidity between drug dependence and other mental disorders is significantly affected by methodological biases. Nevertheless, a reliable psychopathological screening of drug addicts is of great relevance while planning treatments. We compare two sets of data in order to point out merits and disadvantages of different procedures for diagnostic evaluation.