

C. Geretsegger<sup>1</sup>, M. Hornsteiner<sup>2</sup>, K. Voglreiter<sup>2</sup>, R. Stelzig<sup>1</sup>, W. Aichhorn<sup>1</sup>, C. Egger<sup>1</sup>, G. Kemmler<sup>3</sup>, A. Saria<sup>2</sup>, C. Stuppaeck<sup>1</sup>, G. Zernig<sup>2</sup>. <sup>1</sup> *University Clinics of Psychiatry and Psychotherapy I, Paracelsus Medical University, Salzburg, Austria* <sup>2</sup> *Experimental Psychiatry Unit, Department of Psychiatry, Medical University, Innsbruck, Austria* <sup>3</sup> *Division of General Psychiatry, Medical University, Innsbruck, Austria*

Therapeutic drug monitoring (TDM) in psychiatry, and adherence to orienting therapeutic ranges (OTRs) of medications in particular, is regarded as useless by many psychiatrists.

To evaluate the hypothesis that pre-medicated patients requiring acute psychiatric inpatient treatment have plasma levels below OTR and have actual plasma that are below the level expected from their dosing regimen.

Included were all patients who were consecutively admitted for acute inpatient treatment in June 2005 and who had been treated with medications (N=161) for which OTRs are available. A determination was done of all plasma levels and their comparison to their OTRs, and to the expected plasma levels, based on known preadmission dosing regimen and average pharma-cokinetic data.

A significantly higher-than-chance fraction of medicated patients who had to be admitted for acute inpatient treatment had plasma levels below OTR. Of 149 patients for which OTRs are available, 105 (70.5%) were below OTR, 37 (24.8%) were within OTR, and 7 (4.7%) were above OTR. Of 161 (100%) admissions, 99 (61.5%) had actual plasma levels that were below the expected individual plasma level, and 62 (38.5%) were at or above the expected plasma level, 23 (14.3%) out of them had a plasma level of 0.

Failure to reach the orienting therapeutic level (OTR) of a psychiatric medication increases the risk of hospitalization.

## P0251

Relationship between superstitious beliefs and anxiety, depression in Iran

A.G. Nejad, F. Pouya. *Department of Psychiatry, Beheshti Hospital, Kerman, Iran*

**Background:** Superstitious, the beliefs in supernatural causes of events are common all around world. In our society (Iran) many psychiatric patients especially in rural areas attribute their mental illness to supernatural causes. In previous study, authors showed 77.8% of patients in Beheshti psychiatric hospital, Kerman, Iran had superstitious beliefs. Many of our patients come from southern parts of province Kerman. This study was carried out in Jiroft, one of the important cities in the south part of Iran, we tried to evaluate the relationship between superstitious beliefs and anxiety and depression among them.

**Method and Materials:** In this research 388 individuals whom were randomly selected were evaluated with Beck's inventory for depression assessment, Cattell's questionnaire for evaluation of anxiety and, superstitious inventory which was standardized for research in Iran.

**Results:** The mean score of depression  $\pm$ SD was  $15.1 \pm 10.8$  and the mean score of anxiety were  $6.7 \pm 1.6$  in men and  $6.4 \pm 2.1$  in women respectively. Spearman's regression test showed that an increase in score of depression and anxiety results in an increase of score of questionnaire of superstitious beliefs ( $P < 0.0001$ ).

**Conclusion:** Superstitious beliefs could result in medication non compliance in psychiatric patients. From other point of view people with superstitious beliefs showed more depression and anxiety, so these patients are prone to be treated by local traditional healers than psychiatrists. Depression and anxiety are supposed to be 2

important factors in strengthening of superstitious beliefs. So depressed anxious patients are more prone to delay treatment and seeking superstitious treatments.

## P0252

Paintings as instrument for treating patients with dissociative identity disorder

A.G. Nejad, F. Pouya. *Department of Psychiatry, Beheshti Hospital, Kerman, Iran*

**Introduction:** Dissociative identity disorder (DID) is one of the dissociative disorder which was difficult to be treated completely. These patients created several identities to be protected from experiencing the pain of inescapable and unrelieved trauma and abuse. Engaging these patients in meaningful activities is one of the treatment tools. In this report we presented a young female patient with impression of DID whom had treated with psychodynamic oriented psychotherapy associated with promoting her in painting abilities.

**Case history:** A 19 years old woman with 15 separate identities was described. In the first sessions, therapist identified her famous ability to draw. (one of her first paintings was associated with this abstract). During four years treatment, gradually she became an amateur painter. At the end of therapy she drew famous paintings instead of childish ones (induced in article). At this time she had nearly full integrated personality.

**Conclusion:** Painting could play a role not only as an useful instrument to discover patient's conflict, but also a complementary tool for integrating patient's personality in one strong personality.

