

P-121 - BALANCE REHABILITATION WITH PERIPHERAL VISUAL STIMULI IN NON-RESPONDER PATIENTS WITH PANIC DISORDER AND AGORAPHOBIA: A PILOT STUDY

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Introduction: A connection between balance system dysfunction and Agoraphobia (AG) in Panic Disorder (PD) has been found. Balance control of many patients with PD and AG rely mainly on visual cues (visual dependence) and moving visual stimuli in their peripheral visual field induce postural instability and anxiety. These features may maintain agoraphobic symptoms after standard treatments.

Objectives: To study whether balance rehabilitation with moving peripheral visual stimuli would benefit patients with PD and AG not fully responders to standard treatments.

Methods: Six patients with PD and AG were included. Inclusion criteria: 1) panic-phobic symptoms despite adequate treatments (SSRIs for at least 3 months; cognitive behavioral therapy) and 2) balance dysfunction with instability during peripheral visual stimuli (posturography with and without peripheral visual stimulation).

The patients went through 10 sessions (3 sessions/week) of balance rehabilitation: static and dynamic exercises, with movements of eyes and head, during projection of peripheral visual stimuli (video-films, 32 times-accelerated, on large lateral screens). Descriptive and non-parametric analyses were applied.

Results: After rehabilitation, the patients showed significant improvement both in panic-phobic symptoms (specific psychometric scale scores) ($p < 0.05$) and in balance performance (post-rehabilitation posturography with and without peripheral visual stimulation) ($p < 0.05$).

Conclusions: Balance rehabilitation with peripheral visual stimuli may increase the efficacy of standard treatments in patients with PD and AG and visual-balance dysfunction. Mechanisms of physical and emotional habituation to environmental destabilizing stimuli may be involved. Further larger and controlled studies are warranted.