

The researchers couldn't received the reliable definitions between two groups of psychotherapy comparing means. But SD in NLP group was dependable lower, than in the hypnotherapy one ( $p < 0.05$ ).

**Conclusions:** Spent work shows the effectiveness of using psychotherapy in case of local war participants with somatic complains because it reduces comorbid psychiatric disorders. NLP gives more predicted effect while hypnotherapy is more variable method. But both of them are more effective than out of psychotherapy.

### P0370

Bright light therapy for seasonal affective disorder in Israel (latitude 32.6 degrees N)

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**Introduction:** We describe a patient diagnosed as having seasonal affective disorder (SAD, winter depression), an unlikely condition in Israel (latitude 32.6 degrees N), a country with relatively minor daylight photoperiodic changes between seasons.

**Method:** Case report.

**Results:** A 46-year-old woman with a clinical picture of depression (Diagnostic and Statistical Manual of Mental Disorders diagnostic criteria for 'major depression with seasonal pattern') reacted positively to 3 weeks of daily bright light therapy of 10,000 lux/wide spectrum. She was asked to wear dark sunglasses during placebo sessions to accommodate an A-B-C single-case-design. The intervention resulted in an improvement of 74-80% in the Hamilton anxiety and depression scales (clinician-rated) and the Beck depression inventory, similar to results obtained in high latitude regions. The depression and anxiety levels returned close to baseline levels following 1 week of the placebo intervention.

**Conclusion:** Seasonal affective disorder is apparently not limited to certain latitudes. The effect of light therapy was short-lived after discontinuation of the treatment, with rapid relapse occurring in the placebo phase.

### P0371

Benefit of hagiotherapy for a war veteran suffering of PTSD: Case-report

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There is accumulated evidence indicating a beneficial influence of the usage of spiritual/religious parameters in the therapy of mental illnesses. In Croatia an authentic model of providing spiritual help, called hagiotherapy is used. It is based on the main principle that every human person is a spiritual/existential being, provided with a natural moral law, which differentiates him/her specifically from any other created creature. Its area of activity is the spiritual soul.

We present a patient (age 43) who has been in medical treatment for the last five years due to chronic combat-related PTSD. During the war in Croatia (1991 – 1995) he participated in a series of war actions. Before the war he did not have any mental difficulties. After the end of the war, he felt some of the PTSD symptoms. However, because of the fear of being stigmatized he refused to seek for help. He attempted suicide twice. Only when his business and social

functioning became severely disturbed, he initiated medical treatment. Due to a higher degree of religious engagement he was sent to the Center for Spiritual Help, where he underwent hagiotherapy. Before hagiotherapy a semi structured interview was conducted with the patient and the data on his spirituality/religiosity (SWB, DUREL, R-COPE), intensity of PTSD (M-PTSD, HAM-D, BDI, BHS, HTQ, SUAS) and biological markers (BMI, blood pressure, glucose, circadian rhythm of cortisol excretion, lipoproteins) were objectified. Some of these parameters were observed after hagiotherapy as well. The comparison of these results is presented in the poster.

### P0372

Diagnosis-independent, multimodal and bifocal group psychoeducation in psychiatric inpatients: Acceptance and efficacy

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At the Psychiatric University Clinics (UPK) Basel a standardized psychoeducative group program with a diagnosis-independent, multimodal and bifocal conception for patients with severe mental disorders has been established.

Recent publications show that this strongly recommended intervention is highly underutilized in its traditional, disorder-specific form. E.g. an extensive survey in Germany, Switzerland and Austria revealed that 2003 only 21 % of all schizophrenic inpatients and 2 % of their relatives received psychoeducation, and probably the data for other diseases are even lower. Among other reasons difficulties concerning the availability of enough patients with the same diagnosis were accused for not offering this effective and cost-effective method. Clinical and theoretical considerations also support a diagnosis-independent modification, and it should promote the wider employment of psychoeducation.

Apart from that we expect a stronger effect on treatment-adherence by the integration of cognitive-behavioural modules and psychodynamic aspects. The findings of compliance research clearly indicate that a mere knowledge transfer has significantly less impact than a combination of different therapeutic elements. This is of crucial importance because compliance strongly influences course and outcome of the diseases, as well as relatives' burden and socio-economic costs.

Since 2006 e.g. participants' satisfaction is examined and the data show very good acceptance. Currently a randomized controlled trial is carried out to evaluate the efficacy of the intervention concerning relapse and rehospitalisation rates, social functioning, quality of life, compliance, insight into the disease and burden on family during a 1-year-follow-up-period.

The curriculum of the program and first results will be presented.

### P0373

The study of the effects of pharmacotherapy on the chronic tension headache

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**Objective and Background:** The prevalence rate of headache is 69% (in male) and 88% (in females). This prevalence rate reduces at the age of 50, and this reduction continues in next decades of life. The objective of this survey is the comparison between efficacy and effectiveness rate of two therapeutic approaches (and pharmacotherapy) for tension headache treatment.