

conflict; nevertheless has considerably increased the staff's job satisfaction.

## P0215

The prevalence and experience of harassment of people with mental health problems living in the community in Iran

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**Background:** There have been concerns about people with mental health problems living in the community in Iran experiencing harassment.

**Aims:** This study measures the prevalence and nature of harassment experienced by people with mental health problems and compares them with the general population.

**Methods:** Face to face interviews were conducted by trained interviewers to ascertain experiences of harassment. Interviews were carried out with 112 people with mental health problems and with 104 people from the general population.

**Results:** Sixty-one per cent of people with mental health problems reported experiencing harassment, nearly ten times more frequently than those in the general population (7%). Among the people with mental health problems, being female, having higher levels of education, or being unemployed were significantly associated with experiencing harassment. The harassment commonly involved verbal abuse, often made reference to individuals' mental health problems and was primarily committed by family members.

**Conclusions:** A significantly higher prevalence of harassment was reported among individuals with mental health problems living in the community than in the general population sample. Mental health professionals should proactively ask their service users about their experiences in the home, and educational interventions are recommended, particularly for families of people with mental health problems.

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**Keywords:** Harassment, mental health, community

## P0216

Psychiatric comorbidity in dermatologic patients in Iran

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**Introduction:** There is a high prevalence of psychiatric disorders in dermatological patients.

**Aim:** To evaluate the prevalence of this problem and to find a set of variables associated with the presence of psychiatric disorder.

**Method:** 414 adults attending the outpatient clinics of a dermatological hospital or in inpatient ward were given a questionnaire comprising the DLQI and the 28-item General Health Questionnaire (GHQ-28).

**Results:** In total, 414 questionnaires were given at admission. Of these Using a stringent cut-off threshold (5<) for psychiatric case identification with the GHQ-28, the overall prevalence of psychiatric

morbidity was 51.3%. We found a higher prevalence of psychiatric disorders in married and low educated patients. Higher score of GHQ-28 accompanied with higher score of DLQI. High prevalence rates were observed among patients with vitiligo, psoriasis, pemphigus. There was not significant difference in psychiatric co-morbidity between men and women.

**Conclusion:** Our study has shown the situation that is actually faced by dermatologists in their everyday practice, where they are in an especial situation to detect psychiatric morbidity and to take appropriate measures. The GHQ-28, being easy for patients to compile and for physicians or nurses to score, may be a practical instrument to increase identification of patients with prominent psychological distress or formal psychiatric disorder in order to provide more appropriate intervention.

**Key Words:** GHQ-28, prevalence, psychiatric disorders, psychological distress, quality of life, skin disease

## P0217

Defining the dissociative disorders and childhood trauma among outpatients at Ege university, neurology headache unit

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**Background:** Dissociative disorders have comorbidity with conversion disorder, borderline personality disorder, depression and somatization disorder. Though dissociative disorders and medical illness comorbidity is not investigated enough, epilepsy, chronic pain such as headache, pelvic pain and backpain are frequent with childhood trauma and dissociative disorders. Few studies indicated that headache is more frequent in people with childhood trauma but the relationship between dissociative experiences and headache, childhood and other traumas is not investigated enough.

**Objective:** The aim of this study is to investigate the frequency of childhood trauma and dissociative disorders and the relationship between them among patients with chronic headache.

**Method:** DIS-Q, SDQ, DES and Childhood Trauma Questionnaire is given to 90 patients presented to Neurology headache unit. Patients scored DIS-Q>2 or SDQ>30 or DES>25 are called for another session to apply DDIS and SCID-D.

**Results:** 46,7% of the patients had comorbid psychiatric illness. In this population the percentage of childhood trauma was 58,9% (34,4% neglect; 24,7% physical abuse; 22,6% emotional abuse; 10,8% sexual abuse). 21,1% of the patients had at least one suicide attempt; 17,8% had self destructive behaviour. DDIS was applied to 33 and SCID-D to 19 of 90 patients. Any type of dissociative disorders is diagnosed in 31 of 33 patients evaluated with DDIS.

**Conclusion:** We found high prevalence of childhood trauma and dissociative disorders among patients who present to neurology headache unit. These findings may indicate that childhood trauma can play a role in the development of dissociative disorders and somatic symptoms such as headache.

## P0218

Social and psychological aspects of haemophilia

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Hemophilia is a life threatening, life long condition caused by absence of or defective coagulation factors. Our clinical experiences show us, that patients with haemophilia, especially older patients, who did not use prophylactic treatment, often are under negative stress and suffer from different psychological problems. They have difficulties talking about their feelings and emotional life and use several defence mechanisms to reduce their mental pain. They start to talk about their feelings late during the psychological treatment. Aim of our study will be to evaluate social and psychological aspects of haemophilia during the long-term psychotherapy and compare them with the ESCHQoL Study results.

**Background:** Clinical experiences.

Patients with haemophilia often experience high level of anxiety for the risk of bleeding and difficulty in coping with the situation. Comparison between the clinical data and the ESCHQoL Study results showed us, that patients with haemophilia initially tend to denial anxiety, which manifest itself more often through the body symptoms. Some of our patients experienced stigmatised behaviours during their childhood, which, of course is very traumatising.

**Conclusion:** The ESCHQoL Study results, especially the part, which evaluate the social and psychological problems of patients with haemophilia should be interpret with the caution. Clinical experiences in working with patients with haemophilia have shown that they have difficulties in expressing feelings. During the long-term psychological work with the patients they progresively start to open emotionally and the level and quality of their defence mechanisms start to change. As a consequence the management of haemophilia often improves.

## P0219

The evaluation of analgetic use (abuse) in patients with haemophilia

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Haemophilia is a life threatening, life long condition caused by absence of or defective coagulation factors. People with haemophilia tend to bleed internally into joints and muscles, which can lead to pain. Pain is a distressing symptom that can affect people with haemophilia in a number of ways. A bleed into a joint can cause acute, severe pain whereas the long-term effects of recurrent bleeds can lead to chronic and disabling symptoms. People with haemophilia use different types of analgetics for pain relief. Patients with haemophilia need to manage psychological pain, too. A high percentage of hemophiliac patients suffer from different psychological problems, most common anxiety, depression and somatization disorders. Physical and psychological pain need to be differentiated and assessed correctly in order to be managed properly.

According to our clinical experiences, several patients with haemophilia were abusing analgetics to reduce and control comorbid anxiety or depression.

Aim of our study will be to evaluate the analgetic use in patients with haemophilia. We will evaluate the medical records of 180 patients with haemophilia from Slovenian Haemophilia society and search for type of analgetics, indications for its prescription and potential complications: physical and psychiatric side effects (overdoses, analgetic abuse or misuse. The pattern of the analgetic use

will be compared to the results of the quality of life questionnaire and functional parameters of the large joints.

## P0220

Psychopathological variables and electrical pain threshold

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**Background and Aims:** Although there is growing interest in human health and psychological factors efficiency in chronic pains, specially in lowback pain, there has been limited studies of psychopathological aspects, such as somatization, interpersonality sensitivity, hostility and ... with pain threshold. Pain is a affective, complex and cognitive phenomenon, which is highly common in a variety of medical conditions, and debilitate normal life. By the reason, the main aim of this study is to measure the relation of psychopathological variables, consistent with demographic factors with pain threshold and tolerance.

**Method:** By multi stage sampling of Tehran central branch of I.A university, 50 subjects (25 female, 25 male) in the age range of 22-26 years old, have selected. After testing by specific scales and electrical pain threshold-tolerance, (TENS), data analyzed by two-way analysis of variance.

**Result:** There is statistical significant relation in pain and psychopathological variables.

**Conclusion:** This study consistently showed that not only personality characteristics, but also psychopathological aspects, specially anxiety, depression and hostality have relation with pain threshold and tolerance.

## P0221

What is the role of HIV positivity in patients with ESLD who undergo to OLTx Iter?

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**Introduction:** Since 2003 the national research program for solid organ transplantation in HIV patients is active at the Liver Transplantation Centre of Modena. HIV patients who enter this protocol are assessed by the CLP Service. The aim of the present study is to evaluate their psychiatric comorbidity.

**Methods:** An observational prospective study was conducted comparing ESLD patients with and without HIV. After the assessment, the psychiatrist compiled the TERS and the MADRS. Baseline (B) evaluation was made before the inclusion in the OLTx waiting list and the Follow-Up (FU) one was made 12 months later.

**Results:** From January 2003 to December 2006 we assessed 553 patients: 39 (6%) with HIV and 361 (94%) without HIV. The two groups were homogeneous for gender (75% of male patients; p = ns) but not for age ( $46 \pm 5$  vs  $56 \pm 9$ ; p = ns). Psychiatric anamnesis was negative in 176 (49%) patients without HIV and in 6 (15%) patients with HIV, p<0.001.

At baseline psychiatric comorbidity was present in 33 HIV patients (85%) and in 148 non HIV patients (41%), p<0.001.