

### A DESCRIPTIVE STUDY OF MENTAL HEALTH AND SOCIAL ASPECTS OF EUROPEAN UNION (E.U.) NATIONALS WITH HIV INFECTION LIVING IN LONDON, U.K.

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**Objectives:** The main objective of the study was to find out the range of psychopathology amongst E.U. nationals, whose first language was not English, with HIV infection and also to know any psychosocial problems. **Method:** The computerised database of the Kobler Centre, Chelsea and Westminster Hospital, and of the Department of Psychological Medicine was searched for E.U. nationals in the HIV clinic who were referred to the Department of Psychological Medicine for psychiatric assessment between January 1991 and July 1995. Relevant information was elicited from their case notes. Republic of Ireland nationals were excluded from this study. **Results:** The total number of E.U. nationals attending the Kobler Centre was 438 and out of these 56 (13%) were referred to the Department of Psychological Medicine. Of these 56, there were 18 (32%) Spanish, 13 (23%) Italian, 12 (21%) French, 6 (11%) German, 4 (7%) Greek and 3 (5%) Portuguese. 46 (82%) were male and 10 (18%) female. 32 (57%) identified themselves as homosexual, 13 (23%) heterosexual and 1 (2%) bisexual and for 10 (18%) patients sexual orientation was unknown. The most common reason for psychiatric referral was mood disorder and not coping. The majority of patients received a diagnosis of adjustment disorder, followed by depression, recreational drug misuse, psychosis and 14 (25%) patients received no formal psychiatric diagnosis. 43 (77%) were single and 36 (64%) were unemployed. Their psychosocial problems ranged from relationship problems, worries about health, social isolation and housing to language problems. **Conclusion:** A wide range of neuropsychiatric and psychosocial syndromes were seen. It is clear that there are a number of unmet needs i.e. social isolation and language problems which should be addressed by a co-ordinated mental health team.

### AIDS RELATED KNOWLEDGE AND ATTITUDES AMONG HEALTH SCIENCES STUDENTS AND STUDENTS FROM NON-HEALTH RELATED SCIENCES

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The objective of this study was to assess differences in AIDS related knowledge and attitudes among students of health related sciences and students from other fields. A 40 item, self administered, anonymous questionnaire exploring AIDS related knowledge, misconceptions, attitudes and behaviour was used. The sample was comprised of 1,493 students of health related sciences (Medicine, Dentistry, Pharmacy and Nursing) and 3,843 students of non-health related sciences (Law, Physics, Geology, Biology, Computer Sciences, etc) from Granada University (Spain). Results show that health sciences students were significantly more knowledgeable about transmission routes and prevention measures than students from other sciences. A third of health sciences students believed they could get infected through public lavatories, no significant differences were found between the two groups regarding this misconception. Health sciences students were more likely to use scientific literature in order to get AIDS information ( $p < 0.001$ ) and to perceive themselves better informed about AIDS ( $p < 0.001$ ) than students from other fields. Surprisingly, although in a small percent (5.6%), health sciences students were more likely to show rejection attitudes towards AIDS patients than non-health related sciences students ( $p < 0.007$ ). The need for informational programmes that address misconceptions and

erroneous beliefs, as well as the implications of lack of attitude changes in spite of increased knowledge is discussed.

### THE PSYCHOLOGICAL DEFENSE STYLES FROM ADOLESCENCE TO ADULTHOOD: A FOLLOW-UP STUDY

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The aim of this study is to examine how the defense styles develop in the growing up process between the sexes, and the relationship of the defense styles to mental health.

A follow-up questionnaire was mailed to 707 young adults who five years earlier at the baseline study were aged 16–19 years. Completed questionnaires were obtained from 651 (92%) young adults, of whom 36% were men and 64% women. The questions and scales dealt with psychosocial factors, life events, trait anxiety, trait depression, self esteem, social support, worries of, and plans and expectations for the future, somatic symptoms, and the defense styles. In the follow-up study in 1995, the General Health Questionnaire (GHQ-36) was used to screen the possible mental health problems. Subjects with a score 5 or more were interviewed using the SCAN diagnostic method (Schedules for Clinical Assessment in Neuropsychiatry). 199 subjects scored above the cut-off point, of whom 139 volunteered to be interviewed. The defense styles were ascertained with the Defense Style Questionnaire (DSQ), the abbreviated 72-item version of Andrews et al. The three defense style clusters are described as mature, neurotic and immature. They are respectively seen here on the other hand as a factor protecting a person in his/her phase of growing adult, and on the other hand as a risk factor for both mental health problems and other difficulties in adaptation. It is a common observation that girls and women tend to suffer more from mood difficulties, while boys and men have more aggressivity, alcohol abuse and suicidality. In the first phase we searched for the differences in defense style development between the sexes, which might explain some of the changes in the overt behaviour, or even give some hints of the direction of the future development. Preliminary, we found out that in women the increased immature defense style correlated significantly with the highest GHQ scores. In males there was not such a correlation. We also interviewed controls (20 men and 20 women) who did not reach the cut-off point in the GHQ. We shall try to find out whether those who have mental health problems differ in their defense styles from those who scored below the GHQ cut-off point, and whether these differences are seen already five years ago.

### PSYCHIATRIC COMORBIDITY AMONG OPIATE DEPENDENT PATIENTS IN A METHADONE MAINTENANCE PROGRAM

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The present study was conducted to determine the prevalence of concomitant psychiatric disorders in 99 patients with a diagnosis of opiate dependence using DSM-III-R criteria, admitted to a methadone maintenance program (MMP) and followed prospectively for 12 months. In addition, we compared those patients who had another psychiatric diagnosis with those other who had no other psychiatric diagnosis in order to characterize the variables related with such psychiatric comorbidity. Clinical, sociodemographic and toxicological data were obtained with a structured questionnaire designed by our group. Of the 99 opiate dependent patients, 86