

## **P-438 - PSYCHIATRY WITHOUT FRONTIERS: ONE CASE OF “ZAR SYNDROME”**

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The concept of culture plays a major role in the understanding of mental disorders, as a human being is a social organism, modelled by the interaction with other people, and influenced by habits and objects in his/her own material culture, but above all endowed with a cultural heritage.

Disorders occurring in defined cultural contexts are identified as “Culture bound Syndromes” (DSM IV-TR). In the present paper one case of “ZAR Syndromes” is reported. Male, aged 35, from Camerun. At the beginning tense, anxious, suspicious, confused, thoughts oriented by delirious ideation. He declares to be convinced of being possessed by “evil spirits”, complains of hearing and sight hallucinations, speaks with altered voice. Feeble and changing mood.

Owning several belts and amulets which should protect him against evil spirits, or reduce their power. Removing such objects, at the beginning, caused anger and aggressiveness, later on resignation and depression. The different adopted therapy protocols, based on benzodiazepines, antipsychotics, stabilizers, proved only partially effective, with a partial remission of the “affection” symptomatology and a persistence of the “psycotic” one.

The patient, in his community, was considered as “possessed” since his adolescence, and was “educated” to worship “spirits”. The patient was dismissed, after his own and his relatives' requests, so to allow him to go back home, where his relatives had him cured by a “healer”.

“Migrants” must be considered as subjects with own identity, worth to be respected, and avoiding any hegemonic temptations on behalf of western doctors.