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Psychological aspects of radiation risk perception by children after Chernobyl

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Characteristic features of Chernobyl accident as the factor causing stress in children and adolescents are conditioned by two leading factors. First of all, non-sensoric perception of radiation danger, which largely increases the importance of emotional-cognitive information about the accident. Secondly, this influence is of durable and constant character. This fact leads to "the penetration into the situation" by most of children and adolescents (62.5% according to our data). On the other hand, part of adolescent develops the reaction of psychological defence, resulting in neglecting reasonable measures of radiation protection. The perception of radiation danger in children and adolescents depends on the psychological position of parents, teachers, mass media and rumours circulated in contaminated area on the level of macro- and micro-surroundings. High level of parent's personal anxiety leads to development of emotional disorders and communicative disturbances in younger children. The specific feature of emotional disorders in children was the fear of radiation. We observed the specific phenomenon of "visualization of radiation" in 9 children. Children imagined the radiation as a cruel monster that could kill them or their parents. In adolescents the symptoms of "victimization" and elements of self-destructive behaviour were shown. The most dangerous demonstration of self-destructive tendencies is the growth of the number of suicidal attempts in adolescents in contaminated area.

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Lasting armed conflict in Chechnya and mental health of children

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Introduction: In the modern world necessity of special attention of the psychiatrists to extreme and disaster situations in particular to armed conflicts gets the increasing urgency. At the same time the lack of the special researches which have been carried out directly in a zone of the conflict is marked.

Method: we examined 44 children in Chechnya, addressed for the help according to clinical interview based on criteria ICD-10.

Results: It is necessary to note presence at the overwhelming majority surveyed of pathological "ground". To besides the significant densities so-called psychosocial infringements (social apathy, uncertainty, amplification of aggression, forming at the teenagers a stereotype "the man with a gun" etc.), the tendency to fixing negative forms of behavioral reactions and close connection with structure of available mental infringements was observed.

Conclusions: the acuteness of a problem has amplified in comparison with the last campaign of battle actions, relative increase of frequency of mental frustration, phenomenon "sensibilization" (fast rate of formation at the sensitized persons mental disorders) was marked, revealed tendency to a deepening and long current depressive disorders.

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Long-term sertraline treatment for pediatric OCD: remission rates and functional status

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Background: Given the chronicity and impairment associated with OCD, it is recommended that pharmacotherapy be continued for at least one year following a satisfactory acute treatment response. Few studies have evaluated the effectiveness of long-term treatment for pediatric OCD. The goal of the current analysis is to evaluate response and remission among children and adolescents with OCD treated with sertraline for 12 months.

Method: Children (6–12 yrs; n=72) and adolescents (13–18 yrs; n=65) with DSM-III-R OCD who had completed a 12 wk, double blind, placebo controlled sertraline study were administered open label sertraline 50–200 mg for 52 weeks. Efficacy was evaluated by the Children's Yale-Brown Obsessive-Compulsive Scale (CY-BOCS), NIMH Obsessive-Compulsive Scale (NIMH-GOCS), and Clinical Global Impression Scores.

Results: At endpoint, 72% of children and 61% of adolescents met response criteria (>25% decrease in CY-BOCS and a CGI-I score of <=2). Using LOCF-endpoint analysis, 47% of patients achieved a full remission (defined as CY-BOCS <=8) while an additional 25% achieved a partial remission (CY-BOCS <=15, but >8). Among study completers, full remission was achieved by 55% of patients and partial remission by 31%. Only 66% of patients with severe OCD at baseline (CY-BOCS>25) achieved full or partial remission. Children were more likely to achieve a full remission than adolescents. Functional response, measured as minimal-to-no "interference" in school or social activities due to obsessions and compulsions, was achieved by 72% of patients using an LOCF analysis.

Conclusion: Sertraline is effective in the treatment of childhood and adolescent OCD, with initial acute response converting to remission and improved functional status in a substantial proportion of patients. More research is needed to develop pharmacological and psychotherapeutic strategies that provide full remission for more patients with OCD.

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Psychopathology among 8 year old Danish children

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Objective: Population based child and adolescent psychiatric epidemiology have strong political and administrative impact. It is essential that we are capable of generating valid data on prevalence, diagnostic distribution and riskfactors.

Method: In a two-phase epidemiologic study, 8 year old children from mainstream classes were screened with Child Behavior Checklist (CBCL). All screen positive, a subsample of screen negatives and a sample of children attending special education were assessed in the second phase. Schedule for affective disorders and schizophrenia for school-aged children-present and lifetime version (K-SADS-PL) and additional material were used.

Results: CBCL had a sensitivity of 1.0. Predictive value of a positive test was 0.25 and correct classification rate was calculated to 0.72. The overall prevalence of child psychopathology and other results from the study will be presented.

Conclusions: CBCL can be recommended as screen instrument in population studies, but low specificity makes assessment time-consuming and expensive. Prevalence rates are discussed.