

Methods: We recruited a sample of patients with recent onset panic disorder from the Panic Disorder Unit of Cantabria (University Hospital Marques de Valdecilla, Santander, Spain). Data were analyzed with the statistical package SPSS 12.0 and parametric test were used to compare the means (T test for paired and for independent samples).

Results: We obtained measures in 54 cases and 43 age, sex and BMI matched controls. Mean age was 31.3 and 63% were women. Median duration of panic disorder was 7 months. Mean values of the markers were higher in patients than controls (vWF= 78.7 vs. 75.5; $p=0.4$, and E-selectin= 64.7 vs. 57.8; $p=0.3$) but did not reach statistical significance. When we analyzed evolution of markers in patients we observed a decrease in both (vWF= 78.7 \rightarrow 74.6; $p=0.058$, E-selectin= 62.1 \rightarrow 57.8; $p=0.1$) but again without reaching statistical significance.

Conclusions: These results could support our hypothesis of a relationship between the endothelial damage and panic disorder. The lack of statistical significance could be explained because of our small sample; therefore larger samples are needed to confirm our results.

P178

Social support and psychological consequences in females exposed to war trauma

M. Klaric¹, T. Franciskovic².¹ *Psijatrijski Odjel, Bolnica Mostar, Mostar, Bosnia and Herzegovina* ² *Psijatrijska Klinika, KBC Rijeka, Rijeka, Croatia*

Background: The war in Bosnia and Hercegovina caused a massive psychotraumatization in female civilian population. In addition the postwar transitional processes are causing unemployment, social insecurity, poverty and the disruption of family ties. In that situation the social support, especially that from family members could play the major role in preventing posttraumatic symptoms.

Objective: To find out what are the long term psychological consequences of war psychotraumatization and how social support influence the psychological outcome in female population in Mostar, BiH which was exposed to extreme war devastation and postwar ethnic division.

Method: Target group was 187 randomly selected females living in Mostar who were exposed to whole spectrum of war traumatic events. The control group were 180 females living in county close to Mostar area which was not directly exposed to war destruction. A battery of psychological tests were applied to measure traumatic exposure, psychological symptoms, social support and demographic data.

Result: Females in target group shows significantly more traumatic experiences (10,3:3,27) and PTSD prevalence (28,3%:4,4%). They experienced more stressful life events after war, are more often widows or divorced and have lower quality of life. Predictors of PTSD symptoms were level of traumatization and low support from colleagues and friends in target group and low family support and quality of life in controls.

P179

Dissociative disorders and dissociative symptoms among veterans of Iraq-Iran combat

A.G. Nejad. *Department of Psychiatry, Beheshti Hospital, Kerman, Iran*

Introduction: Dissociation is a disruption of the usually integrated functions of consciousness, memory or perception of the environment. Many individuals with PTSD reported dissociative experiences.

Method: In this case-control study, 130 of veterans with chronic PTSD and 130 matched individuals from normal population who

had not involved in war were selected. First patients' demographic data were recorded, and then some suggested contributing factors were evaluated. Dissociative symptoms were evaluated via dissociative experience scale (DES). In this scale, score above 30 shows significant dissociation. Respondents were also evaluated by dissociative disorder interview schedule (DDIS) which is a semi-structural interview to discover presence of any dissociative disorder

Results: The mean age \pm SD of veterans was 41.46 \pm 5.09 years. The mean score of DES in case group was 26.01 \pm 12.31 and was 9.58 \pm 7.23 in control group ($F=1.171$, $P<0.0001$). In case group, 74 (56.48%) received diagnosis of dissociative amnesia, 9 (6.87%) had diagnosis of dissociative fugue and 5 (3.81%) had diagnosis of de-personalization disorder. None of control group received additional diagnosis of dissociative disorder. Positive history of self cutting ($c^2 = 26.35$, $P<0.001$) opioid dependence ($c^2 = 16.28$, $P<0.001$) were more prevalent in case group.

Conclusion: Additional diagnosis of dissociative amnesia was the most prevalent of dissociative disorders in veterans. It is suggested that many complaints of veterans with chronic PTSD could be rather due to their dissociative symptoms rather than PTSD per se. Similar mechanism which could result in PTSD, in veterans, can prone them to dissociative disorders.

P180

Factitious disorder with psychological symptoms: Learning to be ill

V. Gomez Macias, A. De Cos Milas, M.L. Catalina Zamora. *Department of Psychiatry, Hospital de Mostoles, Mostoles, Madrid, Spain*

Invention, production or falsification of physical and psychological symptoms, are the core traits of Factitious Disorder. The aim is to assume a patient role.

The etiology of Factitious Disorder is unknown, but cognitive-behavioural and psychoanalytic hypothesis have been formulated.

Cognitive-Behavioural theories consider that the Factitious Disorder is related to the learning of illness behaviour with its positive and negative reinforcements. Therefore, past medical history in childhood or medical illness in relatives are risk factors for the development of Factitious Disorder.

A Case-Control study was carried out to test this hypothesis. Patients with the diagnosis of Factitious Disorder with Psychological symptoms in a Psychiatric Inpatients Unit were included. We analyze medical history in childhood, age at the first admission in hospital, consequences derived of the patient role during this admission, and age and consequences of the first somatic and psychiatric severe episode in adult age.

Data obtained in our study show that patients with Factitious Disorder with psychological symptoms have a higher proportion of illness in childhood and higher percentage of admissions. In addition, hospital admissions take place in the late childhood, when is possible to be conscious of the consequences of the illness.

These results confirm that learning influences the pathogenesis of Factitious Disorder with psychological symptoms.

P181

Risperidone treatment for chronic PTSD

G.B. Grbesa, M.B. Simonovic, T.M. Milovanovic. *Clinic for Mental Health Protection, Nis, Serbia*

Clinically the most relevant issues associated with chronic posttraumatic stress disorder appear as problems with self-regulation,

including affect and impulse dysregulation; transient dissociative episodes; somatic complaints and altered relationships with self and others; as well as symptoms of depression and anxiety. Recommended medication for PTSD do not resolve all symptoms clusters, and can even worsen associated features. In searching for such medication which can stabilize mental tension, which improves information-processing and cognitive integration, that activates serotonergic pathways and improves sleep, we turned to risperidone (RisipoleptR) due to its receptor profile.

The study was designed to establish the efficacy of risperidone in the treatment of associated symptoms in chronic posttraumatic stress disorder. Subjects with chronic PTSD were assessed during first visit and again at the end of the treatment, using the following instruments: MADRS, HAMA, MMPI and PIE. The results obtained show significant reduction in total MADRS and HAMA scores. The results of the psychological testing shed some light on the possible mechanism of action of this medicament. We discuss the results, our own clinical impressions and further directions in this area of importance as to develop more efficient and successful approach in the treatment of chronic PTSD.

P182

The spiritual approach in the group psychotherapy treatment of psychotraumatized persons in post-war Bosnia and Herzegovina

M. Hasanović¹, I. Pajević¹, O. Sinanović². ¹ *Department of Psychiatry, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina* ² *Department of Neurology, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina*

There are strong evidences that intensive physical and/or psychical traumas can devastate human soul and leave traumatized persons in ruins. Psychological trauma and post-traumatic stress disorder (PTSD) may have intensive negative impact on the spiritual beliefs or the belief in God, so it can diminish social and professional skills of many survivors. During the war in Bosnia-Herzegovina (1992-1995) the whole population, regardless of age, gender, nationality or profession, was seriously damaged. Following up the needs of patients who were showing spiritual inclination, a session of group psychotherapy, with spiritual topics and content, was offered. The persons who come to the Psychiatry Clinic, who are interested to strengthen spiritually, are meeting each other in the group regardless of religious or spiritual conviction. Supportive and empathetic presence of such group in the community helps in prevention of withdrawal and isolation, alienation or deviation of traumatized persons. The presence of such group facilitates rehabilitation process of the victims, allowing them to understand that people are at their disposal in certain critical moments, to help, to offer protection or to console. Groups like this one, offer long term social and spiritual support to the extremely severe trauma victims.

Keywords: Spirituality - Group psychotherapy - Psycho-traumatized - Bosnia and Herzegovina

P183

The influence of religiosity on mental stability of war veterans

I. Pajević¹, O. Sinanović², M. Hasanović¹. ¹ *Department of Psychiatry, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina* ² *Department of Neurology, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina*

Aim: To determine the influence of religiosity on mental stability of war veterans after stress situations in Bosnia-Herzegovina war (1992-95).

Method: The sample consists of 98 healthy males aged 20-40 years, with equable educational level. The religiosity level of participants measured with frequency of daily prayers performing, and with inner motivation toward religion. The sample divided in: group of subjects that are highly religious (n=48) who perform prayers every day five times, and another group of subjects who are lowly religious (n=50), who do not practice any daily prayer. For sample selection the measuring instruments were used to assess spiritual, religious, and social profile of subject. For assessment of personality structure were used standardized psychometric tests (Minnesota Multiphase Personal Inventory – MMPI, Profile Index of Emotions – PIE, Life Style Questionnaire - OM) to assess personality profile, emotional profile, and subject's defense orientation.

Results: Regarding MMPI scores: highly religious war veterans presented significantly lower levels for depression (P=0.021), hysteria (P=0.048), psychopathic (P=0.004), and paranoid (P=0.005) than war veterans who were low religious. According the OM scores: highly religious war veterans expressed significantly lower levels for: regression (P<0.001), compensation (P=0.002), transfer (P<0.001), and reactive formation (P<0.001) than low religious ones. In PIE scores highly religious subjects had significantly higher levels for: incorporation (P=0.008) and self-protection (P<0.001), but lower levels for no-controlling (P<0.001), oppositionality (P<0.001), and aggressiveness (P=0.001).

Conclusion: Highly religious war veterans presented better ability to deal with stress and to keep mental balance than their peers who were lowly religious.

P184

PTSD, depression, anxiety, and substance misuse among of medical and philosophy university students in Bosnia-Herzegovina after 1992-95 war

O. Sinanovic^{1,2,3}, M. Hasanovic^{2,3}, E. Babajic³, M. Salkic³, J. Mujanovic³, A. Begic³, Z. Music³. ¹ *Department of Neurology, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina* ² *Department of Psychiatry, University Clinical Center Tuzla, Tuzla, Bosnia-Herzegovina* ³ *School of Medicine, University of Tuzla, Tuzla, Bosnia-Herzegovina*

Aims: To estimate prevalence of Posttraumatic Stress Disorder (PTSD), depression, anxiety and substance misuse among university students after the 1992-1995 war in Bosnia-Herzegovina (BH).

Methods: The sample of 372 students from University of Tuzla (234 females) aged of 21.9±2.4 years, divided in medical (n=108) and philosophy students group (n=264), were evaluated for prevalence of PTSD, depression, anxiety and substance misuse. The Harvard Trauma Questionnaire, Beck Depression Inventory, and Sheehan Patient-Rated Anxiety Scale were used.

Results: In the sample PTSD prevalence was 20.7%; groups did not significantly differed (Chi-square=0.895; df=1; P=0.344). Girls presented significantly more PTSD (24.4%) than boys (14.2%) (Chi-square=5.424, df=1, P=0.020). The prevalence of depression and anxiety in the sample was 30.1% and 35.5% respectively, with no significant differences between groups (Chi-square=1.265; df=1; P=0.261; Chi-square=2.278; df=1; P=0.131, respectively). Gender had no influence on the prevalence of depression and anxiety.

Prevalence of cigarette smoking and alcohol drinking in whole sample was 35.2% and 41.4% respectively with no significant differ between groups. Significantly, more boys were drinking alcohol (57.3%) than girls (32.3%) (Chi-square=21.362; df=1; P<0.001). Prevalence of marijuana and heroin misuse in whole sample was