Results: Preliminary results show that the level of anxiety is higher in female than in male workers, while the level of depression and sum score is highest in male workers. Without adjusting for job and demographic characteristics, agricultural and fishery workers have the highest depression level and sum score. The results are consistent throughout the different levels of industrial and occupational classification.

Conclusion: Anxiety and depression are costly to the society, especially due to increased absenteeism and reduced productivity. Knowledge on the relationship between anxiety/depression and work life, including identification of occupations and industries with increased level of anxiety/depression, is important before deciding on strategies for reducing the mischief of these disorders.

P18.09

Dementia and cognitive disorders in an oldest old population: a neuropsychological and genetic study

V. Volterra[1]*, I. Faranca[1], L. Cavrini[1], S. Ragni[1], C. Franceschi[2], M. Bonafe[2]. [1]Institute of Psychiatry, University of Bologna; [2]Department of Experimental Pathology, University of Bologna, Italy

Epidemiological and genetic studies have demonstrated an high prevalence of the ApoE4 allele in the common late-onset form of AD. The hypothesis is that Apolipoprotein E4 does not protect key neuronal structures, thus leading to neuronal degeneration. On the other hand, person who inherit Apo E2 receive the needed neuronal protection and are much less likely to develop AD.

We started on January 2000 an epidemiology study on the people aged over 85 years. The aim of our research was to identify: a) the prevalence of dementia and cognitive disorders in an oldest old population and their relation with the APO E polymorphism; b) the bio-psycho-social characteristics of the demented group. The participants received a semi-structured interview assessing demographic data. Each subject underwent a general and neuropsychological assessment performed by physician. Dementia was clinically diagnosed using the DSM-IV diagnostic criteria. The neuropsychological battery included: Mini Mental State Examination (MMSE); Alzheimer's Disease Assessment Scale (ADAS); T.I.B. (Brief Intelligence Test); IQCODE; Global Clinical Dementia Rating (CDR). Functional abilities were assessed by ADL (Activities of daily living). We also valued the subjects by using the Yesavage's Geriatric Depression Scale (GDS), UCLA Neuropsychiatric Inventory and Modified Cumulative Illness Rating Scale for the assessment of organic diseases. Finally we determined the APO E genotypes of participant subjects.

115 subjects (mean age 89.91 years ranging between 85 and 101, 37M/47F) have been evaluated in the first phase; 27 of them with dementia, according to DSM-IV diagnostic criteria. Only 16% were institutionalised in rest home with the remaining 84% living in their own homes alone(40.9%) or with their spouse or with their relatives. 66.7% of patients subjects did not revealed negative indices in the depression symptoms. 45.5% of elderly were self-sufficient, 29.4% were slightly dependent and 25.1% completely dependent. A significant correlation was observed between cognitive disorders and disability and between cognitive state indices and a regular social life.

Our results could confirm the association between the APO E e4 allele and AD/SDAT dementia. In AD/SDAT the frequencies of the e4 alleles were higher than those found in the oldest old population. None of the subjects with dementia presented the e2 allele, which probably has a protecting value.

P18.10

The temporal association between fatigue and psychiatric morbidity

P. Skapinakis[1]*, G. Lewis[1], V. Mavreas[2]. [1]University of Bristol, Department of Psychiatry, UK
[2]University of Ioannina, Greece

Aim: The aim of the present research was to study the temporal association of psychiatric morbidity and fatigue in a culturally diverse sample in primary care.

Methods: We used data from the WHO collaborative study of psychological problems in general health care. 3201 subjects from 14 countries were interviewed with a modified version of the Composite International Diagnostic Interview at two times in 12 months.

Results: Cases of psychiatric disorder at Time 1 were more likely to report fatigue of a new onset at Time 2 after adjusting for sociodemographic variables and intercentre variability (odds ratio 3.16, 95% CI 1.88 − 5.31). In addition, cases of fatigue at Time 1 were more likely to fulfill criteria for a psychiatric disorder of a new onset at Time 2 (odds ratio 3.27, 95% CI 1.65 − 6.49)

Conclusions: Previous psychiatric morbidity predicts future fatigue but the same is true for previous fatigue and future psychiatric morbidity. These results do not support simple cause and effect models of aetiology and show the complexity of the relationship between fatigue and psychiatric disorder.

P18.11

The study of depression disorders' spreading among the ambulatory patients in Kyrgyzstan

V. Solozhenkin*, V. Ten. Kyrgyz State Medical Academy, Bishek, Kyrgyz Republic

There are two main problems of depressive disorders' correction in Kyrgyzstan: the absence of statistical data of spreading and the lack of primary care physicians' experience in identification.

The objective of present research was the solving of these problems. Primary screening have been carried out among the ambulatory patients in Bishkek. Screening model included the using of standardized WHO questionnaires. Preliminary stage of research included the educational training in depressive disorders' identification and there were 118 trained in depressions' diagnostics primary care physicians.

The period of pilot population investigation consisted of 24259 screening patients (both genders, age of 17–65). Primary care physicians inspected ambulatory patients, psychotherapists were recruited as the consultants.

There were revealed 5175 cases of clinical recognized depression of different kinds of severity, which was 21,3% of all examined population. Our data corresponded with the analogous ones in other NIS regions, such as Moscow and Harkov. All revealed cases of depressive disorders were identified by the order of ICD-10 criterions and were considered as primary ones, because there wasn't any patient who got any psychiatric care.

The main conclusions were about high prevalence of depressive disorders in non-organized population in Bishkek and the necessity of specialized educational programs for primary care physicians in depressive disorders recognition.

(1) Treatment of patients with depression in the condition of primary medical care. Edition 2.2 ERB WHO, 1998.