

the cardiovascular safety of a psychopharmacological agent is its potential influence on autonomic neurocardial function (ANF).

**Methods:** We therefore routinely evaluate ANF assessed by serial standardised measurements of heart rate variability (HRV; 1) in schizophrenics, who are treated with Sertindole (baseline, 4 mg, 8 mg, final dosage).

**Results:** Preliminary data obtained from the Sertindole treated group demonstrated a reduction of the LF/HF power ratio suggesting a decrease of sympathetic arousal. Moreover, there were no pathological reductions in those variables known to reflect parasympathetic activity (e.g. CVr, RMSSDr or high frequency power).

**Conclusion:** The integrity of the autonomic nervous system (ANS) may be important in the prevention of cardiac arrhythmia and reduced vagal efferent activity may favour cardiac electrical instability. Indeed, survival studies of patients with diabetes, chronic alcoholism or myocardial infarction indicate a higher mortality rate due to cardiovascular causes in those patients with cardiac vagal dysfunction. Sertindole only has a low or negligible affinity for alpha-2-adrenergic or cholinergic receptors and, thus, may not cause substantial disturbances in ANS functioning. Our preliminary clinical data are in accordance with these theoretical implications.

- (1) Task Force Report of the European Society of Cardiology. Heart rate variability. *Circulation* 1996; 93: 1043-1065.

### Wed-P80

#### OBSERVATION OF PHYSICAL DEVELOPMENT INHIBITION OF CHILDREN TREATED IN PSYCHIATRIC HOSPITAL

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The purpose of the present study was to investigate the physical development of schoolboys treated in psychiatric hospital.

For investigation were chosen schoolboys, who were treated as inpatients in Tartu University Psychiatric Hospital from year 1994 to 1997. All boys were investigated during their being in children's ward. They had different nonpsychotic disorders diagnosed according to ICD-10 criteria.

Anthropological investigation was carried out by rules of R. Martin (1957) and Heath-Carter (1968, 1990) recommendations. The height and weight of boys were evaluated with physical development scales for Estonian schoolchildren by J. Aul (1978) and R. Silla (1984). The nutritional status was evaluated by A.R. Frisancho's (1981) standards for male. Altogether data of 255 inpatient boys were used. We divided our material to subgroups: organic disorders, mood, neurotic, mental retardation, psychological development and behavioral disorders with onset in childhood. Chi-square criteria were used for evaluating differences in subgroups.

Mean age of boys was 11.4 + 2.6 years. The height below 50 percentile was observed in 66 percent of investigated boys ( $p < 0.05$ ). The weight below 50 percentile was observed in 80 percent of treated boys ( $p < 0.001$ ). The arm circumference below 50 percentile occurred in 75 percent ( $p < 0.001$ ) and triceps skinfold thickness below 50 percentile in 80 percent ( $p < 0.001$ ) of psychiatrically treated inpatients' boys.

Psychiatrically treated boys were frequently with physical development inhibition. Complex psychosocial rehabilitation should contain also physical rehabilitation.

### Wed-P81

#### QUANTITATIVE ASSESSMENT OF MOTOR ACTIVITY IN STRUCTURED SITUATION IN CHILDREN WITH ADHD

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ADHD may not be discernible in all situations, and signs of this disorder may not be obvious at home or in a clinician's office. The most accurate measures of hyperactivity have used portable electronic actigraphs, however this method is quite expensive and difficult accessible in East Europe. The simpler and cheaper method is direct observation of global motor activity in test situation as sitting, but the results are different according to observer. We try to evaluate the cheap screening method of assessment of motor activity using video-camera.

50 children aged 8-12 (25 with DSM-IV diagnosis of ADHD and 25 healthy controls matched according to age and sex) were videotaped during 15 minutes of fixed sitting. The motor activity of the head, trunk and limbs and total motor activity was assessed by 2 independent researchers using the video-tape.

Analyses were conducted in order to evaluate the differences in number and type of movements between groups. Correlations between results of this examination and Conner's Rating Scale and clinical diagnosis according to DSM-IV and ICD-10 (ADHD subtype and severity) were also analysed.

### Wed-P82

#### STATE AND TRAIT ANXIETY AND DEPRESSION IN MOTHERS OF CHILDREN WITH ADHD

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In recent years some researches were done on the associations between attention deficit hyperactivity disorder (ADHD), affective disorder and anxiety disorders. The high prevalence of depression and anxiety was found in relatives of ADHD children, however the results are sometimes contradictory. To estimate the anxiety and depression level in mothers of ADHD children and mothers of healthy controls, we examined 22 mothers of children with DSM-IV diagnosis of ADHD and 22 mothers of healthy controls using the Polish versions of the State and Trait Anxiety Inventory and the Beck Depression Inventory. Short structured personal interviews were also done. Analyses were conducted in order to evaluate differences in age, family history, education, occupation, general health status between both groups.

We analyzed also the associations between the level of anxiety and depression in mothers and level of hyperactivity and conduct problems in children estimated by parents, and the DSM-IV and ICD-10 criteria for ADHD and conduct disorder (CD) as well.

The mothers of hyperkinetic children exhibited higher levels of depression and anxiety. The level of depression might have an influence of mother opinion about her child and it should be taken into consideration in the clinical examination.

### Wed-P83

#### THE LONG-TERM COURSE OF CHILDREN WITH ADHD TREATED WITH CENTRALSTIMULANTIA

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**Objective:** To study the long-term course (10-25 years) of children who have been diagnosed with attention-deficit-hyperactivity-