

unsuccessful and can lead to the development of serious psychiatric conditions and diseases, most often to depression.

**Key words:** crisis, depression, crisis intervention, prevention.

## P0280

Analysis of suicides committed in Podgorica

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This paper analyzes suicides committed in Podgorica during the 2000-2005 period divided according to gender, age and the way these have been performed. In 2000 we have 25 suicides on 100.000 inhabitants, and in next five years there is a growth in trend thus in 1999, there are 17.3 suicides on 100.000. Comparing to 1989 when suicide rate was 7.89, and 2003 rate which was 35.74, we can notice that significant social stresses, lead to a rise in rate of suicides so average rate for period of 2000-2005 is 28.29 which puts Podgorica into area with high suicide rate. The male/female ratio was 2.8:1. The largest number of people who killed themselves are between 35 and 44 years old. The way that people use to perform suicide is mostly by firearm (40.78%) and hanging themselves (38.03%) which is near to average numbers in the world. This research shows that there is significant rise in suicide rate. As a conclusion, on the basis of cited literature, the authors lined up all moments which can explain why have happen significance rise in suicide rate.

**Key words:** suicide, social stress, depression.

## P0281

Psychological distress among migrant patients admitted in acute psychiatric ward

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The adaptation process of migrants has been considered to arise from the differences that may exist between the migrant's traditional cultural background and the cultural norms and values of the society of settlement. These differences are thought to be stressful, and may induce socio-cultural and psychological changes on the part of the migrant, some of which may be maladaptive.

The main purpose of this study is to determine the prevalence of psychological distress and socio-cultural adaptation among migrants who attend acute psychiatric wards. A second purpose is to examine whether or not acute psychiatric wards are used by refugees in situations of crises, like when they asylum application is turned down by the Norwegian authorities.

All immigrants, irrespective of nationality and ethnicity, admitted to acute psychiatric ward by St. Olav's hospital, were eligible to participate in the study. The sample studied included all patients admitted to the hospital from 2005-2008.

The instrument used was a self-administered questionnaire and a structured interview. The questionnaire includes questions on demographic variables, social, psychological and psychosomatic symptoms. In addition, the Beck Hopelessness Scale and Harvard Trauma Questionnaire (HTQ) were used. The data were also collected from the patients' records and from the hospital protocols.

The admission rates, including admission by coercion, length of hospital stay, diagnosis and type of treatment were also compared among the different migrants groups.

## P0282

Some aspects of mental health of population of Kazakhstan

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**Objective:** To find out distribution of levels of mental and psychologic health within a certain age group and to determine main parameters of correlation of the above mentioned health categories among the population of Kazakhstan. A large number of researchers make precise distinctions between definitions of mental and psychologic health: the first is recognized as absence of mental disorders (biologic criteria); the latter – as a whole complex of personal qualities ensuring satisfactory adaptation of a person (psychologic criteria).

**Methods:** 7968 respondents, aged 12 -55, underwent epidemiologic study with an aim to find out how levels of mental and psychologic health are correlated. Clinical-epidemiologic and clinical-sociologic methods were applied. There was used a special map of multilevel monitoring, which includes indicators and parameters, defining levels of mental and psychologic health.

**Results:** In general, the research clarified all the difference between conceptions of mental and psychologic health; besides analysis revealed relevantly deeper crisis condition of psychologic health of population of Kazakhstan as compared to mental, as well as more dynamic reaction of a mobile level of a psychologic functional activity (psychologic health) to social and economic changes of the last decades. It is necessary to elaborate differentiated psychohygienic and psychoprophylactic approaches to the analysed health categories with more attention to psychologic.

## P0283

Descriptive study of an inpatient sample from the brief hospitalization psychiatry unit at the University Hospital of Valladolid, Spain

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**Background and Aims:** To establish the main sociodemographic and clinical characteristics of a sample of inpatients admitted at the Brief Hospitalization Psychiatry Unit from the University Hospital of Valladolid, Spain during 2005.

**Methods:** Descriptive study of a sample of inpatients (n=160) admitted in 2005 by means of the discharge report. Sociodemographic variables include age, sex, civil status and both socioeconomic and education levels; clinical variables include diagnosis according ICD and DSM-IV criteria, substance use, duration of admission and pharmacological treatment.

**Results:** The type patient is a male between 31 and 40 years or a woman between 51 and 60 years, single, with a middle socioeconomic and education levels. Substance use is frequently found in male patients, mainly concerning several substances. Mean duration of admission was about 13 days. Women usually are diagnosed of affective disorders and men of adaptive disorders associated with substance use; schizophrenia also appears more frequently in men.

**Conclusions:** The characteristic patient admitted at the Brief Hospitalization Psychiatry Unit from the University Hospital of Valladolid, Spain in 2005 is either a male between 31 and 40 years suffering from adaptive disorders and substance use, or schizophrenia, or a woman between 51 and 60 years diagnosed of affective disorders.

## P0284

Study on the Greek demographic chart of psychic disorders

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The aims of the present study are: a) to examine the extent of psychiatric network in provinces and in smaller urban centers, b) to provide motivation to experts in order to expand and support the network and c) to provide information for therapeutic interventions. We investigated 60 cases (from 1998 until 2005), both from urban centers and provinces, randomly selected from those who contacted Association of Psychology and Psychiatry for Adults and children (A.P.P.A.C.) for diagnostic and therapeutic reasons. Patients were grouped by age (0-18, 19-35, over 36), sex and according to the ICD-9 diagnostic criteria. We hypothesized that the greater percentage of people who addressed to A.P.P.A.C.: a) would stem from large urban centers b) would most commonly be diagnosed as psychotic, depressive and neurotic, and c) would be aged over 36. The data collected also showed that a major problem is the stigmatization of the psychiatric patient. This rigidity leads them to see psychiatric help as a failure for the family. Moreover information Greek people have about psychiatric and clinical work and therapy is distorted and very poor. Research results indicated that the first two hypotheses were verified, while our third hypothesis was not confirmed, since the greatest percentage of incoming patients belongs to the age cohort 19-35 (43.3%).

## P0285

The impact of sparse data at the household level in the multilevel modelling of neighbourhoods and mental health

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**Background and Aims:** Multilevel models are invaluable in area-level research for investigating the impact of context on health outcomes. Frequently datasets are collected which include sparse levels of data and published studies of household-level effects on mental health often contain many single response households. This results in the household level being sparse. The effect of this sparsity on the validity of results from a multilevel model investigating mental health has not been investigated to date. The aim of the work is to determine the impacts of including and excluding a sparse household level in a multilevel analysis.

**Methods:** Three-level datasets were simulated with known variance structure in order to imitate individuals nested within households nested within areas. The relative importance of the household level, sample size and level of sparseness were all varied in order to assess their impact on multilevel modelling. An outcome measure was simulated based on the variance structure, as well as an individual-level predictor of this outcome. Hierarchical models were fitted to these data using the R programming language.

**Results:** Variance component estimates for three-level null models were unbiased for most levels of sparseness. Under extreme sparseness conditions (average number of respondents per household < 1.5) the variability of the household and individual level variance components increased. Excluding the household level resulted in most of that level's variation being attributed to the individual level.

**Conclusion:** Sparseness can reduce variance component estimation precision and so caution should be exercised when interpreting these models.

## P0286

Domestic violence against women in Bushehr province

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**Backgrounds and Aims:** Domestic violence towards women is frequently hidden and prolonged. Domestic violence is both a direct and an indirect risk factor for physical and mental health problems, and is associated with increased health care utilization. Intimate partner violence affects the person, his/her family, and society as a whole.

**Methods:** In a cross sectional case series study, 100 women with the experience of domestic violence, who were inhabitants of Bushehr Province, were evaluated in 1999. The sampling method was snow ball method. A questionnaire was filled out by interview. Physical, emotional (verbal abuse, criticism, threats, intimidation) and ethical violence (inhibiting birth control, and referring to physicians) were assessed.

**Results:** 49.4% of the women's spouses had lower than high school diploma educations. All the victims had experienced the three aspects of violence. The duration of violence was more than two years in more than half of them. 50.6 % of the women had experienced severe violence. All the women had symptoms of physical, behavioral, personal, social, and psychological problems. Social isolation (38%), headache (50%), nightmares (25%), misbehavior with children (39%), and irritability (32%) were the most common manifestations. Fearful of losing their children (23%), shamed by what is happening to them (19%) and loss of knowledge (17%) were the most common reasons that they kept it to themselves.

**Conclusion:** The women in our survey experienced high rates of severe lifetime violence. International, national, and municipal commitments are necessary to combat domestic violence.

## P0287

Factors associated with multiple admissions in a psychiatric unit during the period 1998-2006

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**Background:** The high prevalence of those called "revolving-door patients" continue supposing a high sanitary cost. The aim of this study was to identify factors associated with multiple admissions in a psychiatric unit.

**Method:** The sample included all patients hospitalized in a psychiatric unit at the hospital "Virgen de las Nieves" in the city of Granada (southern Spain), during the time period between 1998 and 2006