

P-691 - IS THERE A GENDER DIFFERENCE IN USING CRISIS CENTRES?

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Crisis intervention Centre (CIC) offers support, security and maintain of social integration in addition to a specific psychiatric-psychotherapeutic treatment based on the psychoanalytic crisis intervention model.

The aim of this study was to verify, whether there are gender differences in clinical and socio-demographic characteristics at admission into a CIC. A better description of the difficulties of patients could contribute to improve the future treatment program and outcome of patients.

Three hundred and fifty two middle aged patients (219 women, 133 men) were included. Gender groups were compared with socio-demographic variables (age, income, primary presenting problem, trigger event, referral, diagnosis and medication) as well as with symptomatology (SCL-90 R, BPRS 4.0), defense mechanism (DSQ 40), recovery style (RSQ) and global functioning (GAF).

At intake in the SCL-90 R somatization symptoms are more severe in women (mean=1.57, SD=0.93) than in men (mean=1.11, SD=0.80, Mann-Whitney U=6165, $z=-4.02$, $p<0.001$). On the other hand men tend to have more severe psychotism (mean=0.86, SD=0.57) than women (mean=0.77, SD=0.65, Mann-Whitney U=7531, $z=-1.86$, $p=0.064$) and they have more negative symptoms in BPRS 4.0 (mean=1.88, SD=0.93) than women (mean=1.64, SD=0.75, Mann-Whitney U=11505, $z=-2.41$, $p=0.016$). Family and couple difficulties were more common trigger in women group (Chi square=25.75, $df=5$, $p<0.001$). No other comparison reached statistical significance.

These findings support the opinion that family and couple approach are central ingredients in crisis intervention. There is a gender difference in the symptomatic expression of the crisis situation that has to be considered in clinical and groupal treatment.