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Background: The prevalence rates of depression and generalised anxiety disorders (GAD) have consistently been found to be higher in women than men. The question is whether this is a true difference or an artefact of definition.

Methods: In the Zurich study, a young adult sample representative of a geographic area was investigated by six interviews from age 20/21 to 40/41. Major depressive episodes (MDE) were diagnosed by DSM-III-R and GAD by DSM-III criteria. 27 symptoms of depression and 21 symptoms of anxiety were assessed; in addition eight self-assessments were carried out with the Symptom-Checklist 90-R including the depression sub-scale (13 items) and the anxiety scale (10 items).

Results: 192 subjects suffered from MDE (72 males, 120 females) and 105 from GAD (43 males, 62 females). Up to the age of 40/41 the cumulative incidence rates for MDE were 22.8% (16.9% males, 28.6% females) and for GAD 14% (12.2% males, 15.6% females).

In both diagnostic groups women suffered more often than men from work impairment, social impairment and distress; they also reported more symptoms than men in the interviews and self-assessments. The greatest gender differences were found in the following symptoms of depression: worse in the morning, fearful, fear of bad luck, lack of sexual desire, low self-esteem, guilt, hopelessness, crying easily, muscle tension, tiredness, increased appetite, weight gain and loss, and symptoms of anxiety: easily startled, dizziness and frequent urination,.

Conclusion: Compared to men, women suffer more often and more severely from both major depression and generalised anxiety disorder.

S02.02

Familial aggregation of mood disorders: Is there a sex of proband effect?

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Background and Aims: The effect of the proband's gender on the familial aggregation of psychiatric disorders has rarely been investigated. Consequently, the goals of the study were to assess the effect of the proband's gender on the familial aggregation of Major Depressive Disorder (MDD) and Bipolar-I Disorder (BP-I).

Methods: The present paper was based on data from a family study of 130 bipolar-I probands, 158 unipolar depressive probands and 97 normal controls as well as their adult first-degree relatives (n=1651). Diagnoses were made according to a best-estimate procedure based on a semi-structured interview (DIGS), medical records and family history information. Analyses were performed using logistic regression models.

Results: The major findings were that the relatives of female probands with MDD had an almost doubled risk of suffering from recurrent MDD as compared to the those of male probands with MDD. Moreover, the relatives of female probands suffered from anxiety disorders and committed suicidal attempts more frequently than those of male probands. In contrast, the proband's gender was found to have no impact on the familial transmission of bipolar disorder. However, there was a two-times increased risk for alcohol dependence in the relatives of female as compared to male bipolar probands.

Conclusions: Our data provided support for the influence of the proband's gender on the familial aggregation of MDD, suggesting higher genetic loading in depressed females as compared to males. A similar effect of the proband's gender could not be observed for bipolar disorder.

S02.03

A community study on gender differences in mental health indicators and mediating effects of stalking victimization

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Background and Aims: Studies on the impact of stalking on victims suggest that stalking may have serious psychosocial consequences. Using data from the Mannheim stalking study (Dressing, Kuehner & Gass, 2005) the present report analyses gender differences with regard to various mental health indicators and potential mediator effects of stalking victimization. Furthermore, we were interested in whether the impact of stalking on mental health was comparable for men and women.

Methods: The study included a postal survey of 675 community residents on the experience of intruding harassment and on mental health indicators.

Results: In the Patient Health Questionnaire (PHQ-D) women scored higher on most of the subscales. Furthermore, more women fulfilled criteria for at least one threshold or sub-threshold mental disorder syndrome according to DSM-IV, and more women than men used psychotropic medication. However, identified associations were completely mediated by the higher prevalence of stalking victims in women. In contrast, the associations of stalking victimization with poor mental health, psychosocial functioning, and use of medication were largely comparable across gender.

Conclusions: Our study indicates clear associations between stalking victimization and impaired mental health, quantified at diagnostic levels in the general population. Furthermore, the experience of being a stalking victim seems to act as a substantial mediator of the associations between gender and mental health outcomes in the community.

Reference

- [1] Dressing H, Kuehner C, Gass P. Lifetime prevalence and impact of stalking in a European population: epidemiological data from a middle-sized German city. *Br J Psychiatry* 2005;178:168–72.

S02.04

Gender differences in caregiver burden and depression: A population-based study in Germany

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Background and Aims: To examine the influence of gender on burden experience and depression among informal caregivers of frail older people.

Methods: The study was part of a large survey in private households in Germany headed by TNS Infratest Social Research. Based on a probability sample of the German population (n = 52,916), we contacted all people who were 60 years of age and older and who screened positively for at least one deficit in a range of activities of daily living as well as for