

Conclusions: HBO treatment to prevent the development persistent neuropsychologic disturbances, and to decrease the incidence of delayed neuropsychological sequelae. The use of HBO posing detoxication, antihypoxic and metabolic effects in the complex treatment of drug-addiction to improve the outcomes. Thus, HBO may be used as a method of a metabolic brain protect.

P03.436

CLINICAL SYMPTOMS AMONG FEMALE AND MALE DRUG-NAÏVE SCHIZOPHRENIC PATIENTS

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Background: Gender has been recognized to be an important factor in the expression of schizophrenic illness. The aim of this study is to identify differences between female and male drug-naïve first-episode schizophrenics regarding their clinical symptomatology and psychosocial functioning.

Methods: Twenty-five drug-naïve first-episode schizophrenic patients (14 women, 11 men) consecutively admitted at Eginition Hospital, Athens, were included in the study. Their mean age was 27.8 (± 6.8) years. Patients were assessed on admission (during the first week) using the Positive and Negative Syndrome scale (PANSS, Kay 1991) and the Global Assessment of Functioning Scale (GAF, APA 1987). There were no statistically significant differences between female and male schizophrenic patients regarding age (27.8 vs 27.7), education (years of schooling, 12.2 vs 12.0), employment status (unemployment, 78% vs 55%), way of admission (voluntarily, 93% vs 91%).

Results: Female and male schizophrenics did not differ in terms of the total PANSS score (113.7 vs 117.8), the PANSS-positive subscale score (27.3 vs 28.9), the PANSS-negative subscale score (27.8 vs 29.4), the PANSS-general psychopathology subscale score (58.6 vs 61.3) and the GAF score (32.2 vs 29.6). However, women more often presented with hostility (79% vs 18%, $p < 0.01$) and depression (86% vs 45%, $p < 0.05$) while men with grandiosity (21% vs 63%, $p < 0.05$).

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ARE REGIONAL SUICIDE RATES MIRRORED IN SUBSEQUENT NATIONAL POLITICAL CHANGES?

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Recently, political changes in Austria have received worldwide attention. We subjected the voting pattern in the preceding general elections in Austria (autumn 1999) to a suicide-epidemiological analysis. Previous research studied short-term effects of political changes on suicide occurrence. Regional suicide rates were found to decrease during U.S. Presidential campaigns and elections, and regional parasuicide and suicide rates were found to decrease after U.K. general elections. Reversing the question we investigated, whether regional suicide rates in Austria were related to the subsequent national political changes. For the 121 political districts in Austria, weighted by their size (measured by persons entitled to vote), we regressed 7 predictor variables (percentage of gains/losses of the 5 important political parties in Austria in the 1999 general election, as compared to the 1995 general election, '99-to-'95-changes of voters' turnout, and proportion of invalid voting) on average standardized suicide rates (SMR) for the preceding period (1988-94). Stepwise weighted multiple regression analysis lead to

a significant model, including 3 of the predictor variables. The '95-to-'99-changes for two oppositional parties and the changes in the proportion of invalid voting together accounted for no less than one quarter of the variability in preceding district-level suicide rates. Generally, pronounced caution should be exercised in interpreting this pattern as representing cause-effect relationships. Thus, additional analyses aiming to rule out possible confounding variables in the statistical model are presented. Nevertheless, this result gives some preliminary evidence that variations in preceding regional suicide incidence (which at first may seem of little direct concern to voting behavior) actually may be mirrored in subsequent changes in voting behavior (proportion of invalid voting, gains/losses of oppositional parties). This finding can be discussed and understood in terms of the classic Durkheimian concept of societal anomie.

P03.438

AN ACID TEST FOR NOSTRADAMUS: TOTAL ECLIPSE OF THE SUN 1999 AND SUICIDE INCIDENCE

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Apart from the millennium, the total eclipse of the sun on Wednesday, August 11th, 1999, was definitely the single most important mass-media event in Middle Europe that year. In Austria, extensive and in-depth mass-media coverage, announcing and hailing the coming event, started months before, leading to a collective experience of almost spiritual dimensions in the population. Approx. 40% of the Austrian working population were on leave that day, and approx. 750,000 of Austria's population (8 million inhabitants) traveled into the narrow strip (approx. 110 km wide) of eclipse totality, causing severe traffic jam and public transport disruptions. In advance of the event, several concerns of possible individual and collective psychiatric affections as well were published (Grallton & Line, 1999). However, any data concerning an eventual short-term impact of total eclipses of the sun on national suicide incidence are lacking. Given the circumstances of the event as described above, we took the opportunity to address this question. Austrian individual records suicide data for 1999 will be available from Statistics Austria in May 2000. The results of a comparison of suicide incidence at and around the day of the total eclipse with a preceding control period (suicide incidence on and around August 11th in the years 1984-98) will be presented. We hypothesize that a "Nostradamian" view (apocalyptic/bad omen) of the event under scrutiny will not withstand this acid test: in a line with broad empirical evidence upon the timing of suicide (cf. Voracek & Sonneck, 1999) we expect a significant decrease in Austrian suicide incidence before and at August 11th 1999. Furthermore, that decrease should have been more pronounced for regions within the narrow strip of total visibility of the eclipse.

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SUICIDAL BEHAVIOR IN PRISON INMATES: PROSPECTIVE AUSTRIAN NATIONAL DATA 1996-99

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It is widely known that prison inmates represent a special, high-risk subpopulation for suicidal behavior and suicidal acts. Typically, investigations of prison suicide are based on retrospective research designs (cumulative case records). For apparent reasons, reliability, validity, and generalizability of suicide-epidemiological findings from such retrospective research designs are clearly limited. In Austria, within an ongoing surveillance system and prospective research design which started in 1996, extensive data of all suicidal

acts of prison inmates are obligatory reported to the Austrian Federal Ministry of Justice by all Austrian prison administrations. These data contain various suicidological, psychiatric, demographical, psychological, social, contextual, biographical, and institutional variables. As yet, these prospective data cover 4 years (1996–99) and comprise over 300 reported suicidal acts, including more than 50 inmate suicides. The present contribution gives an interim report of this prospective study. Specifically, main emphasis is put on the estimation of current suicide and suicide attempt rates within prison inmates in Austria, on the distribution of suicide and suicide attempt methods, and on risk factors for suicidal behavior identified within this investigation. The most pronounced risk factors and features for male prison suicide – either single, or in typical combinations – turned out to be: hanging as suicide method, solitary cell, imprisonment on remand or long confinement, but rather short period of imprisonment, ages 30 to 40, no evident suicide announcement, no suicide note, no previous suicide attempt, no previous psychiatric utilization or institutionalization, but utilization of counseling or psychiatric services in the prison. The interim results support the existence of certain high risk- constellations for prison inmate suicide under contemporary detention environments, that should be taken into account in prison suicide prevention models.

P03.440

DEPRESSIVE DISORDERS AND ANXIETY DISORDERS IN PATIENTS DIALYSED DUE TO CHRONIC RENAL INSUFFICIENCY

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Together with the development of the dialysis treatment we notice a importance influence of the mental state of dialysed patients in the course of the disease and in the somatic treatment. Particular attention is paid to depressive and anxiety disorders, both due to a possibility that their influence is of the most importance and to their common occurring.

The group of 60 patients aged 26–81, treated with dialysis (30 with hemodialysis and 30 with peritoneal dialysis) due to the chronic, renal insufficiency was examined. The duration of the treatment has lasted from 0.5 to 10 years. The mental state was estimated according to the 5 axes of the DSM-IV. Additionally, the SCL-90R questionnaire and the DFS scale of defense mechanisms were used.

In 15 of those examined were identified affective disorders (depressive disorder and dysthymia) and in 4 were identified anxiety disorders. We looked for factors deciding about appearing these syndroms.

Social functioning and the level of the defence mechanisms were considered to be amongst the most vital factors. Existence of the mechanism of a vicious circle binding depressive disorders, anxiety disorders, the somatic condition of patiens and psychosocial functioning was considered.

P03.441

INFLUENCE OF ALCOHOL AND ALCOHOLISM ON CRIMINAL OFFENCES

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The role of alcohol in genesis of criminal manifest itself in two basic directions:

- *direct influence* of alcohol in committing crime act

- *indirect influence* where alcohol has indirect effects on patients under permanent mental disorder

The perpetrators who committed criminal offenses under the influence of alcoholism as primary illness or as symptoms of other mental illnesses are situated on department for forensic psychiatry.

We are going to present the statistical part of alcoholics and symptomatic alcoholism (in relation to varieties of criminal offenses) in our paper.

The study has been made on survey of 238 patients who were all men.

These groups are distinguished:

1. Patients with alcoholism as primary illness
2. Schizophrenic patients with symptomatic alcoholism
3. Patients under temporar influence of alcohol in whose basic structure is personality disorder
4. Other patients who consumed alcohol in specified situations

All obtained results will be presented analysed and statistically processed.

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IMPAIRED CONDITIONAL DISCRIMINATION LEARNING IN PATIENTS WITH SOCIAL PHOBIA

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Background: An eyelid conditional discrimination learning (ECDL) task, which has been shown to selectively test temporal lobe function, was used to examine unconscious discrimination learning capacity in social phobia (SP) patients to test the hypothesis that in SP the ability to differentiate between significant (i.e. dangerous) and unsignificant stimuli could be impaired.

Methods: 25 unmedicated SP patients (mean age 29.5 ± 7.0) diagnosed according to DSM-IV criteria and 25 gender and age matched healthy controls (HC) (mean age 34.0 ± 8.6) were examined. In the ECDL experiment two differently colored stimuli are randomly presented. Only one of the stimuli is followed by an aversive airpuff to the cornea (a "reinforced trial") as opposed to "unreinforced trials" not followed by an airpuff. Conditioned responses (CR; reflectory eyelid closures already upon light presentation) were scored separately for both trial types.

Results: HC as well as SP patients showed a significant difference between reinforced and unreinforced trials ($p = .008$ and $p = 0.017$ for HC and SP, respectively). However, HC were superior in discrimination ability as compared to SP for reinforced trials ($p = .039$). Concerning discrimination learning HC steadily increased CR frequency on reinforced trials during the course of the experiment but in SP patients, CR frequency did not increase during ECDL task. Thus SP patients were not able to benefit from the information contained in the task

Conclusions: This is the first experimental study showing that there is a reduced discrimination learning capacity in SP patients. As was shown in a previous study panic disorder patients failed to develop any conditional discrimination ability, therefore in SP patients impairment lies between normal controls and panic disorder patients. Similar to preliminary neuroimaging results our study points out further evidence for temporal lobe dysfunction in SP.