NR7. Liaison psychiatry

Chairmen: A Farmer, R Mayou

PSYCHIATRIC MORBIDITY IN THE BONE MARROW TRANSPLANTATION SETTING

J. Blanch, J.M. Prieto, J. Atala, C. Gastó, E. Cirera. Department of Consultation-Liaison Psychiatry, University of Barcelona, Villarroel 170, 08036, Barcelona, Spain

Objective: This prospective in-patient study was conducted to determine the nature, extent, and timing of psychiatric morbidity in a group of patients hospitalized for bone marrow transplantation.

Method: A consecutive series of 103 patients admitted at the Hospital Clinic in Barcelona were evaluated on admission and weekly until discharge. We used DSM-IV criteria for diagnosis as well as the Hospital Anxiety Depression Scale to monitor affective symptomatology. Endicott's revised criteria (substitution of somatic symptoms by non-somatic alternatives) were used to diagnose major depression. Results: Forty-nine (48%) patients received at least one DSM-IV diagnosis. We found the following prevalence rates: adjustment disorders 29%, major depression 10%, other anxiety and mood disorders 3%, medication-induced disorders 16%, delirium 6%, and personality disorders 3%. When only considering anxiety and mood disorders, we diagnosed 28 (27%) patients on admission and 15 (15%) during hospitalization; 28% of these affective disorders persisted until discharge whereas 37% were considered to last \leq than 2 weeks. Psychotropic medication was prescribed in a high percentage of patients: antihistamines 69%, benzodiazepines 64%, methadone 46%. neuroleptics 25%, and antidepressants 12%. Conclusion: High prevalence of psychiatric disturbances (mainly affective disorders) is observed in this population. Consultation-liaison psychiatry plays an important role in the management of these patients.

THE CARDIFF CHRONIC FATIGUE SYNDROME (CFS)

<u>Anne Farmer</u>, Irene Jones, Andy Smith, Lesek Borysiewicz, Meirion Llewellyn. University of Wales College of Medicine, Department of Psychological Medicine Heath Park, Cardiff, South Glamorgan, CF4 4XN, UK

The Cardiff Chronic Fatigue Syndrome (CFS) study consists of medical, psychological and psychiatric research into this complex disorder. Initial assessments comparing the first cohort of 100 CFS subjects and 50 healthy controls will be presented.

Associated psychiatric morbidity as defined by ICD-10 and DSMIIIr operational criteria in the Cardiff group will be compared with other studies and the problems of using self rating screening questionnaires for case finding will be highlighted.

Lastly the preliminary psychometric test results will be discussed which show increased fatigability for repeated motor tests in CFS subjects with associated severe sleep disorder compared to those with only mild sleep disturbance and normal controls.

EMOTIONAL ADAPTATION OF CHILDREN IN THE LIFE ISLAND AFTER BONE MARROW TRANSPLANTATION

<u>M. Günter</u>¹, M. Karle¹, A. Werning¹, T. Klingebiel². ¹ Dept. of Child and Adolescent Psychiatry and Psychotherapy, Osianderstr. 14, D-72076 Tübingen, Germany; ² Pediatric Hospital; University of Tübingen, Osianderstr. 14, D-72076 Tübingen, Germany

Stress reactions and psychic adaptation of 8 to 12-year-old children

in the life island after bone marrow transplantation (BMT) were examined by free diagnostic interviews and by a large test battery. The study's design and initial results from the intense examination are given. As of yet, a mixture of projective tests (Rorschach, Thematic Apperception Test, Draw-a-person-test), questionnaires, two tests recording the body image and an intelligence test (HAWIK-R) proved to be very instructive. The questionnaires show clearly the strong tendencies to adapt to the situation and to normalise behaviour under isolation conditions. In contrast, the psychoanalytic interview and the projective tests prove a very differentiated emotional adjustment: Before transplantation, coming to terms with the life-threatening situation must be deferred. After transplantation one can detect a very intensive emotional examination of the illness, the future prospects, the isolation and the loneliness, the somatic problems and fantasies of guilt and punishment in addition to a superficial adaptation in the sense of a protective denial. Experiencing loving care seems to be most important for emotional stabilisation in this situation. Very impressive documents of these psychic processes are the patients pictures.

EMOTIONAL DISTRESS AND OCCUPATIONAL BURNOUT IN NURSES AND PHYSICIANS DEALING WITH H.I.V. PATIENTS: A COMPARISON WITH ONCOLOGY AND INTERNAL MEDICINE SERVICES

J.J. López-Castillo¹, <u>M. Gurpegui</u>², J.L. Ayuso-Mateos³, J.D. Luna⁴. ¹ Dept. of Psychiatry, Ciudad de Baza Hospital, Granada, Spain; ² Dept. of Psychiatry, San Cecilio University Hospital, Granada, Spain; ³ Dept. of Psychiatry, Valdecilla University Hospital, Santander, Spain; ⁴ Dept. of Statistics, Universidad de Granada, Granada, Spain

Objectives: To determine levels of emotional distress and professional burnout in staff working with HIV patients.

Methods: A cross-sectional anonymous survey was collected from 196 individuals in four different public hospitals. Participants were 55 subjects from three Infectious Disease Units, 30 from an Haemophilia Unit (both groups dealing with HIV patients), 41 from two Oncology Units, and 70 from three Internal Medicine Units. Psychological condition, occupational stress, work and social adjustment, and information about stressors, supports and coping methods of the health care workers were evaluated by means of the General Health Questionnaire (GHQ-28), the Maslach Burnout Inventory (MBI), the Modified Social Adjustment Scale (SAS), and other self-report questionnaires.

Results: High levels of psychological morbidity were found in 38.5% of the participants, with significant differences between groups (Haemophilia staff were less affected). Stress level was significantly higher in both Oncology and Internal Medicine staff, with significant differences among groups. On multivariate analysis, HIV groups were more affected than the other two groups. Training was the principal method of coping in all the groups.

Conclusion: Health care workers suffer from significant levels of emotional distress and occupational burnout. HIV staff were more affected, a fact probably due to distinct HIV risk group in Spain, where drug users are predominant among the HIV-affected population.

AFFECTIVE DISORDERS IN THE PARTNERS OF CANCER PATIENTS: PREVALENCE, COURSE & RISK FACTORS

Peter Haddad, Carolyn Pitceathly, Beverley Jones, Peter Maguire. Cancer Research Campaign Psychological Medicine Group, Stanley House, Wilmslow Road, Withington, Manchester, M20 9BX, England

A representative sample of newly diagnosed cancer patients was fol-