result of occupying additional psychological mechanisms, even in psychotic patients, under circumstances of emergency. Prolonged stress and endangered survival usually leads to reduce of major defenses and that might be the explanation for the exacerbation after the fifth, eight and eleventh week.

P03.394

THE DIFFERENCE OF REDUCTION POSTTRAUMATIC STRESS DISORDERS TREATED by STANDARD and RETARD FORMS OF XANAX

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Objective: The purpose of this study was to compare two forms of Xanax (standard and retard) in reduction of clinical symptoms posttraumatic stress disorders (PTSD).

Methods: 68 men, age of 21–47 years (mean age 31.2 years) with symptoms, classified in criteria ICD-10, CAPS-1, CAPS-2 as PTSD, were assessed with the use of clinico-psychopathological structural-dynamic analysis. Anxiety scale and Hamilton scale of depression and our own scale developed for measurement main symptoms of PTSD and comorbid disorders were administered to all patients. Standard form of Xanax was administered to 32 patients and retard form to 36 patients as monotherapy.

Results: Retard form of Xanax in compare with standard one was more effective in patients with predominance of somatovegetatic disorders and less severe symptoms of anxiety and depression. Retard form had better profile of tolerance for first several days of adaptation to treatment. At the same time, standard form had induced more clear but less stable effect on dysphoric mood, irritability, aggressiveness, emotional withdrawal and angedony.

Conclusion: Both forms of Xanax (standard and retard) were effective for anxiety and depression. This effect had been confirmed by reduction of anxiety and depression, dyssomnia, dysphoric mood and somatovegetatic dysfunctions in forms of crises at evening and night time. The emotional intensity of "flashback" phenomenon was decreased, but the rate did not change.

P03.395

THERAPY OF DERPESSIVE DISORDERS WITH TIANEPTIN AND SERTRALIN IN PATIENTS WITH HYPERTENSION AND ISCHEMIC HEART DISEASE

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Purpose: Investigation of effectiveness and safety of application of tianeptin and sertralin for treatment of depressive disorders in case of hypertension and ischemic heart disease.

Methods of Investigation: Screening examination, clinical-pathological investigation with application of HAMD, HARS, SCL-90-R, daily monitoring of blood pressure (BP), Echo-CG.

Results: Due to results of screening depressive disorders among 69 of examined patients of somatic in-patient department (male-32, female-37, average age-55.2) are revealed in 76.3% (n = 53). Due to ICD-10 criteria F34.1-60.3%, F32.1-15.1%, F41.2-13.3%, F34.0-11.3% are diagnosed. Group of patients under treatment with tianeptin (I) 12.5-37.5 mg/day consisted of 31 persons (hypertension n = 15, Ischemic heart disease n = 16). Group of patients under treatment with sertralin (II) 25-50 mg/day consisted of 22 persons (hypertension n = 12, Ischemic heart disease n = 10). Duration of therapy - 4-12 weeks.

Significant (>=50%) reduction of HAMD, HARS values (somatic, psychical components of anxiety), statistically reliable reduction of values of somatization scales (p < 0.05), depression, anxiety SCL-90-R are notified. It is brought out, that tianeptin has stronger antixiolitic effect. In case of treatment with sertralin antidepressive effect is more expressed.

In functional investigation of cardio-vascular system condition during treatment reduction of systolic and diastolic BP, frequency and severity of hypertensive crisises, angina attacks, headaches, improvement of hemodynamic values, tolerance to physical loads are revealed. Side effects were observed only in few cases they were passing away with reduction of preparatus dose.

Conclusion: Effectiveness of tianeptin and sertralin in treatment of depressive disorders in patients with hypertension and ischemic heart disease, their good tolerance is approved.

P03.396

SCHOOL FOR PSYCHOPHYSICAL SELF-REGULATION OF DIABETES MELLITUS PATIENTS

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The diabetes mellitus often proceeds against a background of available or secondary psychic disorders. Our eight-year experience indicates that' such patients need treatment in the "School for psychophysical self-regulation". The treatment was applied to the insulin-dependent and non-dependent patients in conjunction with manic-depressive psychosis, latent schizophrenia and marginal forms of neuro-psychic disorders. Patients were examiner, by clinical-psychopathological and psychological methods. The training provides maximum information on the nature of disease, methods of self-control prophylaxis of complications, peculiarities of individual treatment – everything for continuous stable cure procedure.

The psychological aspect of our program helps our patients in getting back aims for the life, the motivation for self-control, an independent existence.

The psychotherapist establishes communicative connections with everybody in the group. New connections are developing between the patient's closed world and all other patients thanks to the transfer relations of patient – therapist. The communicative connections within the group established, the patients became able to join actively in the psychosocial relations after the treatment. The combination of the training program with the psycho-corrective measures allows to improve a quality of the therapy, to prevent a development of neuro-psychical disorders, and it ensures psychosocial adaptation in the society.

P03.397

EFFTCT OF RISPERIDON ON AUTONOMIC REGULATION IN PATIENTS OF AFFECTIVE DISORDERS IN PERIOD BETWEEN THE RELAPSES

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The research involved patients suffering from bipolar, phasing endogenous psychoses. Diagnosis, according to MKB-10, as follows: cyclothymia (F34.0), bipolar disorder (F31) and schizoaffective disorder (F25). Age from 18 to 65 (average 34.3 ± 9.2). Case history-at least 2 years with at least two relapses during the last year.

Design: Cardiovascular parameters had been investigated in period between the relapses. Computerized ECG analysis was

used to calculate the R-R distribution parameters: modal index (M) reflects the level of humoral heart rate regulation, modal amplitude (AM) characterizes the activity of the sympathic system and variability range of R-R interval (X) indicates the influence of the parasympathic system on the myocardium.

Results: ECG analysis revealed significant individual variability of the patient's heart rate before treatment. The average variables in the heart rate of patients were higher compared with control. Analysis of the histogram of the distribution of R-R-intervals after therapy revealed changes in all three parameters. (M) displacemented to short intervals, (AM) was significantly higher, (x) was decreased. This confirms the data about influence to the regulatory function autonomic regulation during treatment state with risperidon.

P03.398

HEART RATE VARIABILITY FOLLOWING TRANSCRANIAL MAGNETIC STIMULATION IN MAJOR DEPRESSION

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Background: Transcranial magnetic stimulation (TMS) has recently been suggested to be effective for the treatment of major depression. The objective of the study was to specify the impact of slow repetitive TMS on cardiac rhythm.

Design: 20 patients according to ICD-10 criteria of major depressive episode were observed. All patients were examined with heart rate variability (HRV) ECG before and after treatment. The ECG parameters of RR-interval distribution (modal value, mode amplitude and variation range) reflect the influence of para- and sympathetic regulation on cardiac rhythm. Stimulation occurred over the right dorsolateral prefrontal cortex. The subjects received everyday 20 ms 1 Hz stimulation 1.6 TL intensity from 8 cm diameter coil over 30 minutes (10 sessions per treatment phase).

Results: At the end of the study all patients had no essential changes in ECG data. Responders (11 patients) exhibited more increased values of moda amplitude, reduction of variation range and transformed moda in short-interval region at the baseline. There was some increasing of sympathetic and reducing of parasympathetic activity after TMS course.

Conclusions: There are no data of cardiac disturbances of TMS in the study. These results suggest that some baseline ECG-indexes can be used as predictors of response to TMS therapy.

P03.399

THE STRUCTURE OF PSYCHOSIS AMONG PATIENTS WITH CONTEMPORARY FORMS OF ORGANIC DAMAGE OF BRAIN

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Marked in Russia during the last time the growth of different forms of psychical disturbance includes psychical disorders of the organic nature too. However, specific gravity of the diseases connected with injure or dysfunction of brain in the structure of psychosis and their clinico -psychopathologic peculiarity were not reflected in literature enough.

Aims of this Investigation: Making more precise the structure and phenomenology of organic psychosis by data of population of special hospital.

Methods: Clinico-psychopathologic, clinico-catamnestic, clinicostatistic.

Results: By the results of analysis the contingent of patients from special hospital of Moscow Research Institute of Psychiatry during 1998-1999 years, patients with organic psychical disorders completed 13.15% from all population. For contemporary forms of this disorders complex etiology was typical. Among etiological factors there were neurotrauma, neuroinfections, cerebrovascular pathology and posthypoxic violation in perinatal period (68%). Residual states were more frequent (72%) in comparison with active process (28%). Among this patients woman were found more frequently. The middle age was 30.1. 56% of examined patients had got duration of disease more then 6 years. In accordance with ICD - 10 we distinguished 3 variants of psychotic syndromes: a) organic hallucinosis (F.06.0) - 48%, b) recurring depressive disorders (F.06.32.) - 48% (among them patients with completed suicide - 12%), c) bipolar affective disorders - 4%. The peculiarity of this disorders was the comorbidity of the efficient disturbances with epileptic phenomenon in the form of partial (32%) and generalize (28%) seizures. This fact may be certificate serious of process.

Conclusion: By the results of investigation organic hallucinosis and psychosis with depressive symptoms were most frequently among the psychoses of organic nature. Bipolar affective disorders were very uncommon.

P03.400

XANAX-RETARD IN THE AMBULANT TREATMENT OF PSYCHOGENIC DEPRESSION

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Rationale: The improvement of the pathogenic influences (ecological factors, technogenic catastrophes, local conflicts and other) lead to increasing of different forms of stress disorders, which can be atypical in cases of development on the pathological basis. The aim of this study is to estimate the efficiency and safety of Xanaxretard in treatment of the psychogenic depressions in patients with organic diseases of CNS in the ambulant practice (N = 38).

Methods: Clinical, neurological, psychopathological, psychological investigations was used in open pharmaco-therapeutical study.

Results: Among responders (consist 29.4% of the all studies population), selected according ICD-10 (organic affective disorder F06.3 and organic anxious disorder F06.4) there are 32 patients with reduction of depressive and anxious symptoms including the clinical futures and score on Hamilton's Scale after the change noneffective antidepressant on Xanax-retard. The dosage of Xanax-retard on ambulant treatment was 1-3 mg/day, treatments duration - 4-7 weeks.

Among nonresponders (6 patients) there were patients, which broke regime of therapy or had the high toleration.

4 patients had side-effects (asthenia, somnolence) during the first few days.

Conclusion: Xanax-retard is effective and safe antidepressant in treatment of patients with organic disease of CNS.

P03.401

MOCLOBEMIDE AND PSYCHODYNAMIC PSYCHOTHERAPY IN COMPLEX TREATMENT OF SOCIAL PHOBIA

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The aim of this research was to study the therapeutical dynamic of out-patients with various forms of social phobia (SP) who had 300-