

thickness was lower ($p < 0.02$) in AD (5 ± 3.7 mm) (Controls: 9.1 ± 4.7 mm). Our results are indicative of lower fat stores in AD and therefore of lower energy stores in AD. Lower energy stores could possibly contribute to the altered energy metabolism which has been described in AD.

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TRANSCULTURAL ADAPTATION AND VALIDATION OF THE QUALITY OF LIFE QUESTIONNAIRE

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Objectives: Quality-of-Life-Enjoyment-and-Satisfaction (Q-LES-Q) questionnaire (1) validation in the Czech population of depressive patients.

Methods: Q-LES-Q (self-administered QoL quest.) consists of 8 domains, seven specific and one general. Transcultural adaptation process within the cohort of depressive patients admitted to the psychiatric ward (F32–33, ICD-10) was performed. Pilot phase consisted of translation, retranslation and comprehensibility tests with 18 subjects. Reliability was assessed using the test-retest and internal consistency methods. Validity was tested comparing the CGI, HAMD, BDI and by the content analysis. SPSS software was used for statistics.

Results: Data of 56 patients were analyzed. Reliability part (test-retest) of testing was performed with 24 patients, validity and internal consistency assessments are based on 93 measurements. The analyses indicated the high internal consistency ($\alpha = 0.8–0.9$) and stability of answers over the time (test-retest). The particular Q-LES-Q domains correlated highly ($p > 0.01$) with the HAMD, CGI and Beck questionnaires.

Conclusions: The Czech version of a new inventory for depressive disorder patients was validated. It proved satisfactory reliability and validity parameters to be used in daily routine. Medical students were actively involved in quality of life research and their activities brought them new understanding of the patients' other than medical troubles.

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(1) Endicott Jet al.: *Psychopharmacol Bull* 1993; 29: 2 321–6.

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PREVALENCE OF DEPRESSION (SHORT VERSION OF DEPRESSION QUESTIONNAIRE): SOCIOLOGIC ISSUES

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In Russia up to the last period there didn't exist any systematical experience that may be compared to the depressive disorders investigations. As a sociological action there was made a research in prevalence of depressive disorders among Tomsk population. There were interview 1000 persons (45.7% mail, 54.3% female). Screening inquirer included 5 questions, reflecting the basical depressive symptoms: disforia, loss of interest, loss of pleasure, anergia, suicide thoughts. Also there were marked some sociodemographical data.

27.5% didn't show depressive signs. 6.5% gave affirmative answers to the 5 questions which were defined by clinical syndrome of depressive disorders. 16.8% affirmatively answered the four questions without suicide thoughts which define the depressive symptomcomplex. 38.5% are people under 60 years old with the

max. quantity of depressive signs and the age group up to 30 years old made up 9.2% ($p = 0.001$). 58.6% men and 41.4% women differ in the absence of depressive signs and the amount of men, collected the max. quantity of depressive signs is (33.8%) that is less than women had (66.2%), in multiplicity 1:2 that conforms to the clinical-epidemiological indicators of prevalence depressive disorders in a number of different countries. There were found the significant statistical connections between the in-come scale in a family for one person, the rise of depressive disorders among people with low educational level, and unemployed ones.

The screening inquire well screened the depressive signs and its value proves by outstanding researches in epidemiology and by sociological risk factors of depressive disorders.

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SUICIDAL BEHAVIOR IN ADOLESCENCE IN WESTERN SIBERIA

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The increase of suicidal behavior all of the world. In Russia the crisis in politics and economy make this phenomenon more vivid. Big number of parasuicide influencing on mental and physical health of adolescents. 509 inpatients (87 male, and 422 female) were examined during the 1997–1998 years in somatic hospital in Tomsk (Western Siberia of Russia). Diagnostic was made according to ICD-10. Social and demographic characteristics and types of parasuicides were registered.

Among those patients the number of females was 4.8 more than males, that reflects population data in different regions of Russia and Europe. 38.9% of the patients were unemployed, 27.1% school students, 18.9% - university students. The parasuicides were such as mixed type - 1% (poisoning, cut wound of neck, chest and arm), poisoning - 99%. 95% used drug for poisoning. The most of the patients (45.7%) were took several kinds of drugs. Mental disorders at the moment of committing a parasuicide were the following: connected with stress disorders - 409 (79.2%), affective disorders - 72 (14.1%), personality disorders - 23 (4.5%), schizophrenia 10 (2%), mental retardation - 1 (0.2%). The important factor is registering of personality disorders because they can influence the symptoms of the current disorder, and sometimes they are one of the parameters that determine the risk of severity of suicidal behavior. The frequency of personality disorders was 34.7%, opium dependence - 2% (males - 6.9%, females - 0.9%).

The data show that adolescence more often commit parasuicides having temporary mental and behavioral disorders and been unemployed.

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PHENOMENOLOGICAL ASPECTS OF DISSOCIATIVE EXPERIENCES IN DEPRESSIVE AND SUBSTANCE ABUSE PATHOLOGY

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A number of works has pointed out the high prevalence of dissociative symptomatology in many psychiatric conditions such as depression (Gleaves et al, 1996) and substance abuse disorders (Wenzel, et al, 1996). The purpose of this investigation is to study comparatively the frequency and type of dissociative experiences in different samples - depressive patients, alcoholic patients, normal controls - also correlating with demographic variables and chronicity of illness. To assess the dissociative symptomatology we applied