positive(23.35%) and negative group(3,30%) while in sporadic cases outbred cases are more in number(39.43%).

Discussion: This study shows consanguinity as an important factor in the onset of mental illness and is a fertile base for further molecular genetic studies to locate genes contributing in the development of illness

P0291

Prevalence, recognition and treatment of depression and anxiety in a general hospital inpatients: A report from Iran

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Aims: To study the prevalence of anxiety and depression in a general hospital and to determine the ability of non-psychiatric residents to recognize the patients with clinically significant depression or anxiety.

Methods: This study was performed on a cohort admitted to Dr. Shariati Hospital in Tehran. Within 72 hours of admission, the patients were screened using the Hospital Anxiety and Depression Scale (HADS). Simultaneously, the residents who provided care for the patients were asked whether they believed the patients had significant levels of depression or anxiety. They were also asked to rate the degree of depression and anxiety of their patients in a 5 point Likert scale. Prescription of antidepressants and benzodiazepines during hospitalization was recorded by chart review. Assessments were completed for 401 patients.

Results: According to HADS score, 136(34.25%) patients had probable depressive disorders(HADS-D score>7) and 157(39.75%) had probable anxiety disorders(HADS-A score>7). The residents only asked 26(6.4%) and 32(8.2%) patients about depression and anxiety respectively. Among the patients, only 10.2% with probable depressive disorders and 10.8% with probable anxiety disorders were identified. No significant correlation was observed between HADS scores and the residents' assessment of severity of depression and anxiety. Only 16.4% of the patients with probable depressive or anxiety disorders were given medication.

Conclusions: This study confirms the results of previous researches that had shown high levels of depressive and anxiety disorders among patients admitted to a general hospital. It also indicates that non-psychiatrist physicians overlook a marked proportion of depression and anxiety diagnoses identified by standardized instruments.

P0292

Mental disorders in children, affected with bronchial asthma

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The importance of neuropsychic factors in aetiology and pathogenesis of bronchial asthma in children is generally acknowledged. The affective abnormalities range among the most common mental disorders in children and adolescents. 120 children with the diagnosis of atopic bronchial asthma were evaluated in the children's polyclinic. Together with the general disturbances of health status, affective disturbances in the form of depression of different stage of severity were revealed in 108/120 subjects (90%). In all 108 people the sufficiently significant somatic and autonomic nervous disorders were observed. In our study the subdivision of depression into 3 types proved to be possible: asthenic depression - in 10 patients (8,5%), worried depression - in 74 (60,5%), astheno-worried depression - in 36 (30%). Asthenic depression (10 observations - 8,5%) was defined by a mild, free of specific depressive particularities, but continued decline of holothymia. The decreased mood was combined with the exhaustion and the irritable weakness. Worried depression (74 cases -60,5%) was defined by the sensation of internal discomfort, indescribable unrest, expectation of the future events, distressing anxieties connected with the past. Astheno-worried depression (36 cases - 30%). The decreased mood was commonly combined with the severe emotional lability, asthenia, slight anxiety, hypersensibility to any exogenous irritant. Thus, in children, suffering from the bronchial asthma, the most frequently occurring psychosomatic disorders revealed in the ambulance situations, present as various typological forms of depressions with a distressing aspect.

P0293

Prevalence of Hepatitis B and C markers in psychiatric patients

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Background and Aims: To investigate seroprevalence rates of hepatitis B (HBV) and hepatitis C (HCV) virus in an acute psychiatric ward in Greece.

Method: 289 (168 male and 121 female) consecutively admitted psychiatric patients were recruited during a two-year period. Their mean age was 42,5 years (SD:13.8). The most common diagnoses at discharge were schizophrenia or schizoaffective disorder (60%) and mood disorders (24%). Data from patient's charts with respect to HBV and HCV status, liver functions, demographic characteristics, psychiatric history and hospitalization were collected.

Results: 59 patients (20.4%) were positive for HBV. 23 patients (8%) had a history of hepatitis C infection. 10 patients (3.5%) were positive for both HBV and HCV. Patients positive for HBV were older (p=0.022) than those without such a diagnosis, but did not differ in terms of the duration of their psychiatric illness. The seroprevalence of HBV was lower in Greek compared with immigrant patients (p=0.02). Substance abuse was associated with testing positive for HCV (p<0.001) but not for HBV. There was no difference in the duration of hospitalization between psychiatric patients testing positive or negative for HBV and HCV.

Conclusions: More than one in four psychiatric patients hospitalized in an acute psychiatric ward were positive for HBV or HCV. The implications of this finding for the psychiatric care of patients with mental disorders in acute psychiatric settings need to be taken into account.

P0294

Estimation of inpatients in psychiatric department of General Hospital, Lesbos, Greece, 2006 (a retrospective analysis)

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Aim: Estimate sociodemographics and diagnostic parameters of inpatients in Psychiatric dep. of General Hospital Lesbos, Greece. during 2006.

Method and material: A retrospective analysis of all patients (n=177) that were admitted in psychiatric dep. Demographic variables (age, sex, region) and clinical data (diagnosis, obligatory and non-obligatory hospitalization).

Results: 177 patients studied, 42% women, 58% men. 66% were non-obligatory hospitalized while 34% were under obligatory hospitalization. Age mean 42,6 years. 28% were urban and 64% were rural. 6% were transferred to other hospitals. Diagnosis: Mental Retardation 3%, Dementia 1%, Mental disorder due to a General Medical Condition (not elsewhere classified) 3%, Personality disorders 5%, Alcohol related disorders 13%, Substance-related disorders 5%, Schizophrenia and Psychotic disorders 44%, Mood disorders (Major Depressive disorders 11%, Bipolar disorders 4%) 15%, Somatoform disorders 0,5%, Anxiety-Depression disorder 2%, Suicide attempts 6%, Behavioral disorders (not elsewhere classified) 3%.

Conclusion: Study results suggest that in order to evaluate the state and the quality of Mental Health Services in Greece, we need further more estimation, including demographic and diagnostic variables, from all regions. This kind of retrospective analysis is not only important but also necessary for every prospective European Community Government Policy planning for Mental Health.

P0295

Religious and spiritual beliefs, anxiety and depression among nursing students in Greece

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Background and Aims: Religious and spiritual beliefs are widely recognized as important components of human wellness, of health care outcomes and of holistic medical and nursing care. There are also studies supporting the theory that anxiety is lower in highly religious and spiritual persons.

The aim of this study was to explore the relationship between religious and spiritual beliefs and psychological wellness among nursing students in Greece.

Material and Methods: A total of 72 students agreed to participate in the study. Students completed the Greek versions of three instruments: I) The Royal Free Interview for Religious and Spiritual Beliefs, a scale which focuses on the strength and the consequences of faith, rather than on the specific nature of each belief. II) Beck Depression Inventory (BDI-II) and III) The State-Trait Anxiety Inventory (STAI).

Results: The vast majority of the students (55.6%) reported both a religious and a spiritual belief, most of them where females. 16.7% reported a religious belief and 15.3% a spiritual belief. 12.5% stated that they had no religious or spiritual understanding of their life. The majority of the students (86.4%) perceived stress, most of them in mild levels (50.9%). About 3.5% reported very high levels of stress. Depressive symptoms were reported only by 22.5% of the sample. A positive correlation existed among anxiety and depression. On the

other hand a consistent negative correlation was found between intense religiosity, state-trait anxiety and depression.

Conclusion: These results are suggesting that religious and spiritual variables may influence psychological well-being of students.

P0296

The prevalence of mental health disorders in Parkinsons disease

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Background and Aims: The focus of Parkinson's disease management has shifted towards the non-motor aspects of the disease. Mental health issues are becoming increasingly recognised in Parkinson's disease but there is a dearth of information regarding prevalence rates of mental health disorders in a large population of Parkinson's disease patients.

Method: We aimed to investigate the prevalence of mental disorders in Parkinson's disease patients by developing a database with 254,702 patients from all our hospital admissions since the year 2000.

Results: Out of 254,702 patients over the 7 years there were 1126 cases of Parkinson's disease, mean age 76.2 years \pm 12.0. The mean duration of stay was 8.4 days. Of the mental disorders, Dementia was the commonest with 82 cases (7.3%) followed by Depression 2.6%, Schizophrenia 1%, Eating disorders 0.7%, Anxiety 0.4% and Personality disorders 0.3%.

Conclusion: The prevalence of dementia and depression was significantly higher amongst patients with Parkinson's disease compared to the general population (p < 0.01). Interestingly, eating disorders were four-fold more prevalent in Parkinson's disease patients than in the general population (p < 0.01). Therefore, holistic care-pathways in Parkinson's disease must appreciate and address the prevalence of these disorders to improve patient care and well-being.

P0297

Prevalence of cataract in adult Down's syndrome patients

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Background and Aims: Age-related cataract is the major cause of blindness in humans throughout the world. The majority of previous studies of cataract in Down's syndrome have reported a prevalence that is higher for a given age range than in the general population. The aim was to study the prevalence of cataract in a well-defined population of adults with Down's syndrome.

Methods: An in-patient population of 68 adults (35 males and 33 females) with Down's syndrome, aged between 28.9 and 83.3 years, underwent ophthalmological examination for the presence of cataracts.

Results: Overall, the prevalence of cataract was 16.2%, with no significant difference between males (17.1%) and females (15.2%). In those aged between 45 and 64 years, the prevalence was 16.7%, rising in those aged between 65 and 75 years to 28.6%.

Conclusion: Compared with the general population, the prevalence of cataract in Down's syndrome was raised in those aged 45