#### S49.03

ATYPICAL ANTIPSYCHOTICS IN RESISTANT DEPRESSION, DELUSION DEPRESSION

S. Kasper

No abstract was available at the time of printing.

### S49.04

IMPACT OF NEUROTIC SYMPTOMS ON THE RESPONSE TO 4 YEARS TREATMENT WITH CLOZAPINE IN DRUG RESISTANT PSYCHOTIC PATIENTS

G.B. Cassano, A. Ciapparelli

No abstract was available at the time of printing.

#### S49.05

ATYPICAL ANTIPSYCHOTICS IN NEUROLOGY (PARKINSON, TOURETTE, DEMENTIA, ETC)

Poewe

No abstract was available at the time of printing.

## S50. Assessment of disablement

Chairs: C.B. Pull (LUX), T.B. Ustun (CH)

### S50.01

ASSESSMENT OF DISABLEMENT IN SCHIZOPHRENIA

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To evaluate the health condition and needs of patients with chronic disorders like schizophrenia the assessment of disablement might be more informative than the classification of their symptoms according to DSM-IV or ICD-10.

In 1995, the World Health Organization started the revision of the International Classification of Impairments, Disabilities and Handicaps (ICIDH, WHO 1980). In accordance with this revision, the WHO-Disability Assessment Schedule II (WHO-DAS II) is developed to increase implementation and utility of the ICIDH. The WHO-DAS II covers six domains: 'Understanding and communicating'; 'Getting around'; 'Self care'; 'Getting along with people'; 'Life activities'; and 'Participation in society'. Currently we are testing the psychometric properties of the WHO-DAS II as part of multicenter WHO and EU trials.

About 2400 chronically mentally ill persons are living in the city of The Hague. All persons will change from traditional care programs or sometimes no care into a continuous care program from one of four transmural teams for persons with schizophrenia. The WHO-DAS II and other instruments (e.g. PANSS, SF-36, WHO-QoL) are administered to a random sample of schizophrenic patients to assess the concurrent validation of the WHO-DAS II as part of the WHO/EU field trials, and to evaluate factors in the success of the new program.

### S50.02

THE INFLUENCE OF PERSONALITY ON THE ASSESSMENT OF DISABLEMENT

N. Glozier

No abstract was available at the time of printing.

#### S50.03

DISABILITY IN MENTAL AND PHYSICAL PATIENTS

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In 1980 the World Health Organisation published the first version of the International Classification of Impairments Disabilities and Handicaps (ICIDH). Since them this classification has been extensively used for clinical and research purposes. However, after two decades of use, the WHO is revising this classification system to produce the "International Classification of Functioning and Disability". In parallel with this new classification an instrument for evaluating disability, the World Health Organisation Disability Assessment Schedule (WHO-DAS-II), is also been developed.

The present paper present the disability levels detected in an Spanish sample of mental and physical patients, as measured by different instruments like the London Handicap Scale (LHS), the WHOqol, and the WHO-DAS-II. The sample is composed of 154 persons (68 female 86 males). Of this, 25 are health individuals from the general population, and the rest are patients afflicted by: mental illness (41 persons), physically illness (58 patients) and drug addition (30 patients). Significant differences are detected for the different sample categories in the level of disability. The paper also explores the nature of this differences in the level of disability.

# S50.04

DISABILITY AND DISABILITY ASSESSMENT IN ANXIETY DISORDERS

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It is suspected that anxiety disorders are accompanied by various degrees of disablement, ranging from only mild discomfort to extreme distress.

The suitability of several instruments to access this disablement has been described in the past.

This presentation is part of a multinational project involving the national CRP-Santé ("Centre de Recherche Public"), the BIOMED programme and the World Health Organization (WHO). The aim of this project is to elaborate an instrument for assessing disablement in patients with disorders associated with alcohol and drugs, physical or mental disorders.

The authors will report on the subpopulation of patients with anxiety disorders. Clinical diagnoses were made using the CIDI (Composite International Diagnostic Interview) and the IPDE (International Personality Disorder Examination). Disablement was assessment with the DAS-II (Disability Assessment Schedule). Additionnal instruments used were the SF-12 and the WHO-QOL.