Conclusions: Our data identify the considerable extent to which the prison population (restricted to the much larger male prison population in our study) represent a particularly high risk group with extensive lifetime exposure to injecting drug abuse, promiscuous sexual behaviour and tattooing. Furthermore, the study also identifies the extremely poor level of knowledge regarding HIV and AIDS in a high risk population. This has important implications for future AIDS control programmes in India.

GRAPHIC REPRESENTATION OF ILLNESS: A NOVEL METHOD OF ASSESSING PATIENTS' PERCEPTIONS OF THE IMPACT OF ILLNESS

Stefan Büchi, Natalie Timberlake, Tom Sensky. Department of Psychiatry, Charing Cross & Westminster Medical School, West Middlesex University Hospital, Isleworth, Middlesex TW7 6AF, United Kingdom

Background: In people with chronic illnesses, a measure of the overall importance of the illness to the person's life would be valuable to better understand individual responses to illness and develop focused psychosocial interventions. Existing instruments measuring cognitive, behavioural or emotional responses to illness are unsatisfactory as direct measures of the importance of illness because, with very few exceptions, they focus on factors contributing to morbidity rather than to well-being, and measure specific pathology (such as depression, or the presence or absence of functional impairment). In an attempt to devise a summary measure of the importance of illness to the individual, a simple graphic task has been devised, and used in a pilot study of 24 people with rheumatoid arthritis attending a rheumatology outpatient clinic.

Methods: Subjects were shown an A4-size sheet of paper, with a coloured disk, 4 cm in diameter, at one corner. Each subject was asked to imagine that the paper represented his/her life, and the disk represented the subject's core self. The subject was then given another disk, the same size as the fixed one. Subjects were asked to imagine that the second disk represented the illness, and instructed to place the disk where they considered most appropriate on the sheet of paper. The main outcome measure of task was the distance between the two disks representing 'self' and 'illness'.

Results: With only 2 exceptions, subjects had no difficulty understanding the task. The distance between 'self' and 'illness' showed no correlation with a measure of disease activity, but was significantly correlated with depression (r = -0.64), the General Health scale of the SF36 (r = 0.42), Antonowsky's Sense of Coherence scale (r = 0.59), and measures of pain.

Conclusions: This simple task appears to provide a summary measure of the importance of illness to the sufferer. Because it is non-verbal, its results do not rely on the subject's knowledge of spoken English. However, it can also be used as a projective assessment, by encouraging the subject to describe aloud how he/she chooses where to place the illness in relation to self. Used thus, it can contribute to the individual assessment of patients prior to a psychosocial intervention. Work is currently underway to further characterize responses to the task.

RECOGNITION AND TREATMENT OF PSYCHOPATHOLOGICAL DISORDERS IN PAEDIATRIC CLINIC

Anatoly A. Severny, Irina P. Kireeva, Victor I. Brutman, Yury M. Belosiorov, Maria A. Shkolnikova. Independent Association of Child Psychiatrists and Psychologists, 23, 18/15, Grusinsky val, Moscow, Russia

The long observation of 166 children with functional paroxysmal

tachycardia and extrasystolia shows that mental disorders revealed in more than 80% of cases (mainly mono- and bipolar affestive syndrome including panic attacks, and also chronic hypomanias, neurotic, neurosislike, psychopathialike, epyleptiform states, borderline personal disorders. We noted a distinct relation between functional cardiac and psychopathological disorders connected inseparably in the integral psychovegetative syndrome. Nootropes antiarrhythmic effect is strengthened if peculiarities of their psychotropic action are taking into account: nootropyl as a stimulator is more prescribed in conditions of asthenic range, encephabol possessing mild antidepressive properties is effective in subdepressive states, phenibutum and pantohamum as sedative drugs are preferable in anxiety-disthymic, phobic, hypomaniac disorders. The use of psychotropic drugs according to the peculiarities of mental disorders in given patients leads on the one hand quite often towards considerable improvement manifesting in cessation or obvious relief and frequency reduction of the attacks of paroxysmal tachycardia with simultaneous normalisation of mental condition. The most effective here are normothymics, such as finlepsin, lithii carbonas, sonapax and also antidepressants. The principle of minimal sufficiency used by us during psychotropic therapy of psychovegetative disorders helps to avoid to a certain extent negative consequences of treatment, when the intrinsic vegetotropic effect of psychotropic drugs can level the psychotropic action and hinder the recovery.

HARM REDUCTION BY METHADONE MAINTENANCE TREATMENT OF GERIATRIC HEROIN ADDICTS

Chandresh Shah, David Highfill, Lena Simitian. U.S. Department of Veterans Affairs, 315 E. Temple Street, Los Angeles, CA 90012, U.S.A.

The exacerbation of asthma, recurrence of eczyema or reemergence of angina inspite of treatment are often regarded as the natural course of disease, rather than simply a treatment failure. Patients are not penalized, nor are physicians criticized for such not-so-perfect outcome. But continued heroin use by addicts on Methadone Maintenance Treatment (MMT) is often considered as an intolerable social behavior and an unacceptable medical practice. We studied all patients who were older than 65 years of age and were receiving MMT for their heroin addiction. Urine samples were randomly collected and screened for heroin for 12 months. The data was analyzed using Student t-test. There were 20 male patients who were 67.35 ± 2.87 years old and had been on MMT for 95.36 \pm 69.79 months. They first used heroin at the age of 25.05 ± 9.61 years and then continued for the next 36.80 ± 15.06 years. After failing the detoxification for at least 1.55 times, they started the MMT. During the study period 15 patients had used heroin at some time, at the rate of $11.10 \pm 11.19\%$. These patients used to use heroin 23.25 ± 8.63 days per month before starting the MMT, but now has used heroin only 0.25 ± 0.72 days per month. Even though the MMT failed to produce absolute abstinence, it did significantly (p < 0.0001) decrease the frequency of heroin use among geriatric addicts. Since the intravenous drug abuse is associated with acquiring and/or spread of numerous diseases, like HIV infection; even a small decrease in frequency of heroin use provides a significant impact in curtailing the morbidity and mortality among geriatric population. Thus harm reduction is a significant outcome of Methadone Maintenance Treatment.