clinical profile, sociodemographic data, work status, severity of the disease by using the Clinical Impression of Severity Scale disease-specific (CGI-SCH) was collected. Aggression and hostility were recorded at admission by using the PANSS-EC subscore, and aggressive behaviors during the hospitalization period by the Overt Aggression Scale (OAS). Therapeutical management was also recorded at three time points, at admission during hospitalization and at discharge.

Results: 800 patients were recruited by 200 clinicians from 120 specialized psychiatric units across the country. Prevalence data for agitation-hostility in Spain is provided. For those patients showing aggressive behaviors during the hospitalization period, information concerning intensity and type of aggression is also described. Its associated management strategies are provided.

Conclusion: Prevalence data of agitation-hostility in patients in acute settings is valuable as well as understanding the routine practice applied to its management. This comprehensive work could represent a basis for the development of a consensus guideline for clinical practice at specialized acute units.

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Bullying in Serbia elementary schools - facts and future ideas

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Little is known about the levels of bully/victim behaviors in schools in Serbia and the aim of the present study was to overview of the extent of bullying in Serbia primary school. Data were collected as part of the school without violence project created by UNICEF. The ultimate goal of the project is to support development of the enabling and stimulative school environment and safe conditions for children learning and development. This study examined the prevalence of being bullied and bullying others among 26947 elementary school children through out Serbia. As part of the larger survey, five questions were asked relating to experience of bullying behaviors and being a victim of such behaviors. The findings suggests that the incidence of school bullying in Serbia is quite high − 67% of children experienced in last three months some form of bulling and 24% of children experienced repeated form of bulling. The most common forms of bulling in schools were name calling (33%), hitting (31%), threatening (21%). Our date point on the need for Increase the awareness of everyone at school toward bullying problems. After identification of a problem next steps should be on the intervention in a timely manner with clear and consistent consequences for the child who is bullying and with support and protection for the child who is being bullied.

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Netherlands study of depression and anxiety (NESDA): examining the long-term course of affective disorders

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Background and aims: The Netherlands Study of Depression and Anxiety (NESDA, www.nesda.nl) is an ongoing study to: 1) describe the long-term course and consequences of depressive and anxiety disorders, and 2) to examine the demographic, psychosocial, somatic, biological and genetic determinants of this course. This presentation describes NESDA's rationale, sampling frame and methods.

Methods: The design is an 8-year longitudinal cohort study following 2,850 participants aged 18 through 65 years. The sample consists of 1600 persons with a current (6 month recency) diagnosis of depression or anxiety disorder, 850 persons at risk (because of high symptomatology, family or life-time history), and 400 healthy controls. Recruitment takes place in the community, through 65 general practitioners (using a three-stage screening procedure), and through 17 mental health care institutions in order to include patients reflecting various settings and stages of psychopathology. The 4-hour baseline assessment includes questionnaires, interviews, a medical exam, a computer task and blood (including DNA and RNA) and saliva collections. Follow-up assessments are repeated after 1, 2, 4 and 8 years.

Results: Over 2500 respondents with more than 2100 current diagnoses of depression or anxiety disorders, were recruited in November 2006 (mean age = 41 years, 67% female). Expected end date of recruitment is in February 2007.

Discussion: NESDA is expected to provide more insight into (predictors of) the course of affective disorders. NESDA is open for collaboration (including data utilization) with other European research groups, which we hope to stimulate by a presentation of its design and methods.

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Suicide and fatal alcohol poisoning in Belarus between 1970 and 2005

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Background: Alcohol abuse has long been considered an important factor of suicidal behavior. The solid body of research and empirical evidence suggests that hazardous pattern of alcohol consumption (binge drinking) lead to quicker and deeper intoxication, increasing the propensity for alcohol-related suicide. Purpose: To estimate the aggregate level effect of binge drinking on suicide rate.

Method: Trends in age-adjusted, total and sex-specific suicide and fatal alcohol poisoning rate in Belarus from 1970 to 2005 were analyzed employing ARIMA analysis in order to asses bivariate relationship between time series.

Results: According to official statistics, the suicide rate increased 1.8 fold (from 17.6 to 30.8 per 100.000 of population) and fatal alcohol poisoning rate increased 6.8 fold (from 4.9 to 33.5 per 100.000 of population) in Belarus from 1970 to 2005. The results of time series analysis indicate the presence of statistically significant association between two time series at zero lag for total population ($r = 0.48$; S.E. $= 0.17$), for males ($r = 0.48$; S.E. $= 0.17$), and females ($r = 0.48$; S.E. $= 0.17$).

Conclusion: This study supports the hypothesis that suicide and alcohol closely connected in culture with prevailing intoxication-oriented drinking patterns and adds to the growing body of evidence that a substantial proportion of suicide in Belarus is due to acute effect of binge drinking. The outcome of this study also suggests that alcohol-related suicide is mainly a male phenomenon.

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What happens to patients seen only once by psychiatric services? Findings from a follow-up study

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Background and aims: The aims of this study was to identify patient characteristics associated with once-only contact with a community-based mental health service (CMHS), and to re-evaluate these patients 3 months after the contact.

Methods: A 33-month cohort of new episodes of care was followed-up to identify and interview once-only contact patients.

Results: Of the 1,101 patients who met the study criteria, 165 (15%) were discharged after the first contact, 87 (8%) dropped out after the first contact, 440 (40%) were low users and 409 (37%) were high users of the CMHS in the 90 days after the first contact. A higher GAF score, less severe psychiatric diagnoses and lower socioeconomic status were the factors most associated with once-only contact at baseline. At follow-up clinical conditions of patients who had only one contact (both discharged and drop-out) had improved and, in most cases, they were in contact with other services. Drop-out patients, however, were more unwell and less satisfied with the initial contact.

Conclusions: Although there is no way of knowing the status of patients who could not be located, information from the people interviewed suggest that, for a group of patients predominantly without psychoses, dropping out of contact after the first visit is associated with being less satisfied with the services received at the initial contact. This dissatisfaction may had lead these patients seeking help elsewhere. Perhaps, some of these extremely low users are in need of a different or more specialized clinical treatment approach.

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Mental disorder and women

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Introduction: The epidemiology of mental disorders plays a significant role in the identification of the current status of mental health in society. As women play important role in protecting the mental health of the members of family and society. Therefore the mental health of the married women in Semnan has been studied.

Material and Methods: In this study mental condition of the married women has been studied. To do this a questionnaire (Scle-90-R) counting questions about anxiety, depression and etc., via interview was completed by questionnaires. Sampling was done in the form of stratification in which population affiliated each health center considered as a stratification and appropriate with volume, a share from total sampling was allocated to it. At the end of 970 cases contributed with US data were analyzed by using spss10 frequency tables and statistical graphs.

Finding: In this research 91.8% (890 cases) were urban and 8.2%(80 cases) were rural. With the age mean 25.6±5.1 years were studied. In this study the common mental disorders which needed treatment were psychosis 9.1%, paranoid 7.3%, depression 6.8%. Meanwhile the common disorders needed the consultation were paranoid 21.3%, somatic complains 20%, depression 16.6%, sensitivity 16.5% and aggression 15.3%

Conclusion: Considering the high prevalence of the above disorders needing consultation and treatment, setting up the psychiatric and psychological sections for women is necessary in the health centers.

Keywords: Prevalence, mental disorders, epidemiology, Scle-90-R.

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The epidemiology of common mental disorders in adolescents: The Epirus school project

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Background and aims: Adolescence is a high risk period for the development of anxiety and depressive disorders. Very few studies have investigated the epidemiology of common mental disorders in adolescents attending school and using structured psychiatric interviews. The aim of the presentation is to report on the methodology used to assess the common mental disorders in schools of the region of Epirus in Greece, using a computerized version of the revised clinical interview schedule (CIS-R).

Methods: A two stage design will be used: Adolescents will first complete the 12- item general health questionnaire (GHQ-12) and then a stratified random sampling will be selected for the psychiatric interview. The latter will be delivered using a computer network version of the CIS-R

Results: We used an open source program (phpsurveyor) to develop the computerized version of the CIS-R. We modified the program accordingly to include the full algorithm of the interview. Use of this interview to assess the common mental disorders was acceptable for adolescents and comparable with face to face interviews.

Conclusions: It is possible to use an internet-based structured interview to assess the common mental disorders in adolescents. Delivering this interview using the school-based computer laboratories may facilitate school-based epidemiological research.

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Characteristics of no shows in the netherland study of depression and anxiety (Nesda)

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The present study investigates characteristics of those who appeared versus those who did not appear for a baseline assessment in the Netherland Study of Depression and Anxiety. In NESDA 2850 persons are included in a 8 year follow up study on the course of anxiety and depression disorders. Within the NESDA screening data are collected on demographics, physical and mental conditions of potential participants. At the end of the screening it is registered whether the person meets the inclusion criteria and is willing to participate in NESDA. Within the inclusion procedures for the Nesda study about 30% of the persons who passed the screening and initially agreed to participate in the baseline assessment did not show up for the interview. Because of the large numbers of persons screened the NESDA study has enough statistical power to investigate differences between characteristics of shows and no shows.

We will use data from the inclusion phase basic demographics as sex, age, current employment status, and education and data on physical and mental functioning collected with questions from the CIDI