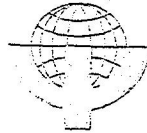


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ABSTRACTS

MASSON

and medicine units. The distribution for disorders appears similar to previous years, with a predominance of alcoholism and substance abuse in males, depression, anxiety disorders and eating disorders in females. Data show that the focus of urgent intervention is first screening diagnosis and psychopharmacological intervention rather than integrated treatment.

PO3.127.
**A GROUP APPROACH IN PATIENTS HOSPITALIZED
IN AN ACUTE PSYCHIATRIC WARD**

A. Bastiani

S. Filippo Neri Hospital, Rome, Italy

We describe the group approach applied in our acute psychiatric ward. The group with patients takes place in the ward three times a week. During this activity, patients must be free from any other engagement. They are stimulated to participate by the conductor and by the professionals. A conductor, a nurse and a trainee take part in the group at every meeting. The professionals give the continuity and the space-time stability to the group. The patients stay in the group for a short period, linked to the hospitalization, with a wide emotional-relational space useful for the reciprocal enrichment. Everytime the professionals report to each of the new patients the previous experience. At the end of each session, the professionals meet for a discussion of the outcome of the session. An emotional and educational support is offered to the professionals both by a structured supervision and by meetings among peers.

PO3.128.
**APPLICATION OF THE DRUG ATTITUDE
INVENTORY IN A PSYCHIATRIC DAY HOSPITAL**

A. Sbardella, D. Accorà

S. Filippo Neri Hospital, Rome, Italy

The purpose of the study was to explore, through the Drug Attitude Inventory (DAI), the attitude toward the use of drugs, especially antipsychotics, and the possible relationships between this variable and recurrences of the disease. The questionnaire has been administered to all patients admitted to a day hospital in 2003. More than half of the patients had a diagnosis of schizophrenia. Among these patients, the sensitivity of the instrument was found to be higher in those with mood or personality disorders.

PO3.129.
**AN OUTPATIENT SERVICE WITHOUT WAITING
LIST FOR PSYCHIATRIC EMERGENCIES**

C. Bressi, M. Bonfiglio, C. Cattaneo, M. Porcellana, I. Iandoli,
P. Frongia, G. Piccinini, G. Invernizzi

Psychiatric Clinic, State University, Milan, Italy

An outpatient service without waiting list was set up in 1998 at the Psychiatric Clinic of Milan State University, with the purpose of quickly providing a diagnostic picture and suitable indications for treatment. Users have free access to the service, which allows the patient to be immediately accepted for treatment. From 1998 to 2003, 865 patients used the service. During their consultation, the requests made by users were evaluated by specialists who collected their case history and, following a diagnostic assessment, fixed an appointment with one of the outpatients' departments of our clinic or one of the centres in the area best equipped to offer suitable treatment. Most of the 865 users were women (59.4%) and were young to middle-aged (45.1 years). Most of the subjects had been referred by their general

physicians (39.7%) or by other specialists (24.5%). The most frequent diagnoses were mood disorders (30.3%) and panic disorder (10.5%). 37.3% of subjects were sent to the psychosocial centres in the area, 21% to the psychotherapy service, and the remainder to other out-patient facilities or specialized services.

PO3.130.
**A PSYCHOTHERAPY SERVICE IN A PUBLIC
INSTITUTION: ANALYSIS OF DROP-OUTS**

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G. Piccinini, C. Manoussakis, G. Invernizzi

Psychiatric Clinic of Milan State University, Milan, Italy

The aim of this study was to analyze any underlying dynamics leading to drop-out at the Psychotherapy Service of the Psychiatric Clinic, Milan State University. In this service, patients undergo a clinical assessment and test phase (level I). A team discussion of the case follows, ending in the formulation of a diagnosis and indications as to the treatment required (level II) and, subsequently, possible acceptance for brief analytic psychotherapy (PBA) or brief crisis psychotherapy (PBC) (level III). Among 86 patients attending the service, a total of 23 (26.7%) dropped out: 4 (17.4%) at level I, 13 (56.5%) at level II, and 6 (26.1%) at level III. The level I drop-outs had relational problems with a significantly higher frequency ($p=0.04$) than drop-outs of the other levels. Analysis of the drop-out phenomenon may provide a useful tool in order to improve the running and efficacy of a mental health service and to investigate the dynamics occurring within the therapeutic process.

PO3.131.
**JAPANESE BRAZILIAN PSYCHIATRIC OUTPATIENTS
IN JAPAN AND IN BRAZIL: PROFILE OF THOSE
REMAINING AND THOSE RETURNING**

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The Japanese immigration to Brazil started in 1908. Almost a century later their descendants in Brazil become the largest community of Japanese descendants outside of Japan. But the economic situation changed. The growth of the industries demanded the opening of the country for the immigrants to work in the factories and in 1990 the Government of Japan allowed the Japanese descendants to return and work in Japan. We compared the sociodemographic data and diagnosis of all consecutive Japanese Brazilian psychiatric outpatients in Japan (remaining group) and in Brazil (returning group) from 1997 to 2000. The group in Brazil were mostly male, not married, lived alone in Japan, had a short stay period there and were classified in the schizophrenia group. In Japan they were mostly female, married, living in family or with friends, had a long stay period and were classified in the anxiety group. In the logistic regression analysis the most significant factor associated with the returning group (in Brazil) were living alone and the short stay period.