

P150 Psychopathology and psychotherapies**DOES PSYCHOEDUCATIONAL TREATMENT CHANGE SUBJECTIVE PERCEPTIONS OF THE ORIGIN OF A PSYCHIC DISEASE?**

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AIMS. One of the tasks in attending to patients with psychic diseases is to provide a concept of illness in order to supply personal strategies to cope with the illness. A major part of such a concept is the patient's idea of etiology.

METHOD. In a day-hospital 14 patients with schizophrenic disorder were asked to their perceptions of the cause of their psychosis. Starting with the results of Angermeyer et al, the patients were asked at admission and 10 weeks later after psychoeducational treatment to their beliefs about the origin of their psychic illness. All patients were questioned in a semistructured interview and with Angermeyer's assessment tool „The Etiology of Psychic Diseases“.

RESULTS. At admission 7 patients stated that psychosocial factors were the origin of their psychic illness, 2 persons indicated family factors, 3 personality factors and only 2 mentioned biological reasons. 10 weeks later only 4 of the 14 patients changed their meanings about the etiology of their disease. Still only 2 patients believed in biological reasons and half of the patients indicated psychosocial factors.

CONCLUSIONS. Subjective perceptions of the origin of a psychic disease change hardly by psychoeducational treatment. Biological factors are very seldom indicated as a reason for a psychic disease. It is important, however, to understand the patient's concept of origin of disease, as it is often a basis for cooperation with treatment.

P153 Psychopathology and psychotherapies**THE POLISH VERSION OF CONNERS RATING SCALES - PRELIMINARY REPORT**

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The Revised Conners Teacher Rating Scale (CTRS) and the Abbreviated Conners Parent-Teacher Questionnaire (CAPTQ) are perhaps the most frequently used rating instruments for ADHD. They are short and simple to administer and interpret. Polish versions of CTRS and CAPTQ were prepared after careful translation and back-translation. Parents of 996 first and second year pupils from elementary schools in one Warsaw district were asked to complete the CAPTQ. It was made clear to the parents that completing the questionnaire constituted permission for a teacher to conduct CTRS. The number of positive responses was 312, but only 295 questionnaires were completely correctly. Of the 312 rating scales completed by teachers, 250 were correct. The reliability of the Polish versions of CAPTQ and CTRS is satisfactory. Cronbach's alpha for CTRS is 0,9364, and for CAPTQ is 0,8784. The investigated group should include sex and age differences, and there should be some correlation between parents' and teachers' estimations. The Polish versions of CTRS and APTQ are reliable rating instruments for use in research and clinical practice.

P152 Psychopathology and psychotherapies**THE DIAGNOSIS OF THE RISK OF MALE MARITAL DISADAPTATION**

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This study analyses 130 married couples under the age of 50 living together from 3 to 15 years and facing sexual problems and they were researched from 2 to 10 years. Besides clinical examination made according to the methods of the Federal Scientific Centre for Sexology and Sexopathology a computer version of MMPI was used, the Lusher Test on the structure of the sexual scenario, and our own test on marital adaptation (6 marital factors). Schizoid (personality disorder), hysteria, psychoasthenia and depression were most frequent symptoms. Colour testing suggested infantilism with indefinite sexual orientation and decrease in work capacity. The sexual scenario was dominated by such personal radicals as narcissism and exhibitionism. The above instruments can be used to determine the risk of marital disadaptation not only for married couples but also for unmarried persons. The introduction of alternative values (other than family relations) forms a greater tolerance and broad-mindedness in society regarding the uniqueness and individuality of each person.

P154 Psychopathology and psychotherapies**LONG TERM OUTCOME OF ADOLESCENTS WITH ANOREXIA NERVOSA**

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The outcome of 123 patients hospitalised because of anorexia nervosa was analysed. They were followed up 4/21 years (mean 7 years) after hospitalisation. Their average age when hospitalised was 13 years. Mean duration time of illness was 14 months. Information was obtained on 89 patients. Two died - one through suicide, the other because of complications from anorexia nervosa. All the patients were categorised into three groups, according to Morgan and Russell (1975). A good outcome was found in 72 percent, intermediate in 13 percent and bad in 15 percent. Ten patients (11 percent) are still ill.