

FC07.05**ATTITUDES OF MEDICAL STUDENTS TOWARDS SUICIDE**

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The suicide phenomenon is introduced to medical students in the preclinical part of their studies. It is being discussed in relation to a physician himself since physicians belong to a high risk group endangered by the burn-out syndrome. Moreover, the psychological approach to suicidal patients and the physicians' nonreflected emotional reaction towards their patients are also very important aspects. The future physicians' reflection of their own attitudes to suicidal behaviour raises their competence as they meet suicidal patients in a number of medical branches.

The SUIATT questionnaire (Diekstra and Kerkhof) covers various attitudinal facets towards suicide. It is based on a three-component attitudinal model extended by an instrumental part. 84 items are related to an interlocutor himself, to a close person (a loved one/dearest and nearest) and to any person (someone). The SUIATT was used in the Czech Republic for the first time. It serves not only as an empirical research tool but its authors designed it for teaching purposes as well.

The Czech version of the SUIATT questionnaire was administered to 200 medical students at Masaryk University, Brno; out of 200 there were 95 males and 105 females aged between 19 and 26.

The results were analysed by means of correlation and factor analysis and χ^2 test. Respondents' attitudes get near the "theoretical", "rational" suicide model, which emphasizes the cognitive factors and minimizes the influence of mental illness.

Two approaches to suicide were found: suicide as a deliberate act versus suicide as an impulsive act. Other components of attitudes towards suicide arise from these two approaches. The questionnaire summary shows that a considerably high percentage of respondents (29%) admit having suicidal thoughts.

The results imply the need to extend in depth discussions on suicidal behaviour both in undergraduate and postgraduate medical education, as it was a taboo topic before 1989. The results also give suggestions for further research in this area.

FC07.06**A CASE CONTROL STUDY OF SUICIDE AMONGST PERSONS NOT INVOLVED WITH MENTAL HEALTH SERVICES**

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Background: Recent studies of suicide have concentrated on persons in touch with mental health services. Yet three quarters of people who commit suicide were not involved with mental health services prior to their death.

Aims: To identify characteristics of suicides who were not involved with mental health services prior to their death.

Design: Case control study & psychological autopsy.

Setting: Devon UK.

Cases: Suicides and open verdicts not in contact with mental health services recorded by Devon coroners between 1995–1998.

Controls: Age sex matched residents of Devon not in contact with mental health services.

Data collection: Semi-structured interviews with next of kin.

Data analysis: Odds ratios and logistic regression.

Results: There were 474 suicides and open verdicts over the time frame of the study of whom 300 were not in contact with services.

188 were contacted .100 agreed to take part (response rate 53%). Cases were more likely than controls to have been socially isolated; have had a disrupted social network; in rented accommodation; had an unhappy childhood and were unemployed prior to death. Cases were significantly more likely than controls to have a mental disorder; to have consulted their GP in the week prior to death; to have been receiving GP treatment for a current mental health problem and to have mentioned their psychological problem at the last GP consultation.

Conclusions: Social and health service implications of these findings will be discussed.

S28. Alzheimer's disease at the 3rd millennium – progress towards early diagnosis

Chairs: C.S. Peretti (F), P.J. Rogue (F)

S28.01**CHANGES IN ABETA4 PLASMA LEVELS AND OTHER MARKERS: RESULTS FROM A COMPREHENSIVE MULTICENTER STUDY OF PERIPHERAL BIOLOGICAL AND NEUROPSYCHOLOGICAL VARIABLES IN EARLY ALZHEIMER'S DISEASE**

P.J. Rogue

No abstract was available at the time of printing.

S28.02**CLINICOPATHOLOGICAL CORRELATIONS AND THE DIFFERENTIAL DIAGNOSIS OF DEMENTIAS**

C. Derouesne

No abstract was available at the time of printing.

S28.03**NEUROIMAGING IN ALZHEIMER'S DISEASE**

J. de Groot

No abstract was available at the time of printing.

S28.04**BIOCHEMICAL MARKERS AND THE DIAGNOSIS OF ALZHEIMER'S DISEASE – OVERVIEW**

M. Novak

No abstract was available at the time of printing.

S28.05**INCREASED CSF LEVELS OF A PRESENILIN 1 LOOP FRAGMENT IN SPORADIC ALZHEIMER'S DISEASE: POSSIBLE BIOLOGICAL MARKER**

R. Nitsch

No abstract was available at the time of printing.