

was proved that psychopathological disorders may occur both in the presence of postburn cosmetic defects and without them. The cause of these disorders is multifactorial. However these disorders are mainly stress-provoked but not solely psychogenic.

The disorders manifest with neurotic, psychovegetative and personality symptoms as well as encephalopathy. They correlate with victim age, pubertal crisis, pre-morbid residual organic cerebral dysfunction, severity of thermal injury, postburn cosmetic defects of visible body parts.

A deprivation type of psychogenic pathologic formation which includes complex of a physical defect – Quasimodo Complex was singled out in the most maimed children of pubertal age. These teenagers submit with their defects and refuse from cosmetic surgery.

Developed combined treatment with obligatory use of psychotherapy provides individual approach to the victim personality, improves his or her social adaptation.

### P237

Psychopathology of hospital endocrinological patients - Two -year retrospective study

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Comorbidity of endocrinological illness and psychiatric disorder is associated with a higher rate of functional disability and worsening of quality of life in comparison with each of conditions.

The objective of the study was: to identify the most frequent psychiatric disorders of hospital endocrinological patients in consultative psychiatric practice.

**Material and method:** Two-year retrospective study included a total of 112 hospital endocrinological patients of both sexes, F-68(60%), M-44(40%), who were referred to psychiatric consultation.

**Results:** 1. The most frequent causes for psychiatric consultation in hospital endocrinological patients were as follows: in diabetic patients (62/112-55%)-depression (34/62-54%), psychoorganic syndrome (24/62-38%), other diagnoses (4/62-16%); in patients with arterial hypertension (26/112-23%)-depression (18/26-69%), psychoorganic syndrome (6/26-31%); in patients with other diagnoses (obesity, menopause, Cushing disease) (16/112-14%)-depression(12/16-75%), psychoorganic syndrome (3/16-18%), schizophrenia (1/16-6%); in patients with thyroid gland diseases (8/112-7%)- depression (6/8-75%), psychoorganic syndrome (2/8-25%).

**Conclusion:** Depression and psychoorganic syndrome were the most frequent psychiatric disorders in hospital endocrinological patients with various endocrinological diagnoses, referred to psychiatric consultation.

It is necessary for consultative-liaison (CL) psychiatry to include long-term follow up of somatic patients with psychiatric disorders because of define of course and outcome of psychiatric symptoms and disorders in this patient's population, the interactive relation of somatic and psychiatric disorders as well as the evaluation of the effects of psychopharmacological therapy.

### P238

The postponed mourning in Bosnian refugees: "I'll cry tomorrow"

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Objective of this article is to describe Mihatovici as a Paradigm of Exile. Mihatovici is the biggest settlement of refugees in Bosnia and Herzegovina. Thus, it is the paradigm of a refugee life. Number of "the missing" from Podrinje, after the genocide in Srebrenica is about 7,500. For a few years a team of forensics working in Tuzla has been digging out mass graves and collecting remains in order to make a database for the identification. The first impression when a person gets to Mihatovici is that it is a quite merry place. Loud folk music can be heard from the houses, there are many people on the street, many of them are young and all are laughing. Refugees postpone the beginning of mourning and instead they live one more day of their lives, as it was the last... It is showed how is to be married again to a killed or missing Husband... how goes with New Loves... Healing and Legal Significance of talking about a traumatizing event. The Beginning of Mourning is the Same as Death, Madness, or Loss of Control. Autor observed and described on this setting Myth about Odysseus, Fantasies of a Revenge and Mourning, Time Context and Fantasies of Oblivion. There are evidences about Cellular Level or "When a Body Speaks About a Trauma".

### P239

Subjective sleep quality and aggression in antisocial personality disorder

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**Background:** As a symptom, aggression is closely related to antisocial personality disorder (ASP). Prefrontal cortex plays a key role in the regulation of anger and violence and in sleep-wake transitions. The aim of this study is to evaluate the quality of the subjective sleep and to determine its relation to the degree of aggression for the subjects with APD.

**Methods:** Among 155 males who were sent to a pretrial forensic psychiatric examination by the court, 60 were suitable and admitted to the study. All of them were being charged with violent offences (murder or assault). 64 subjects were not involved in crimes involving violence were taken as the control group. All of the subjects met the DSM-IV criteria for ASP. Subjects were interviewed with an assessment battery including a semistructured interview form concerning the sociodemographic factors, SCID-I, SCID-II, Aggression Questionnaire (AQ) and Pittsburgh Sleep Quality Index (PSQI).

**Results:** AQ total point and physical aggression, verbal aggression and anger subscales were found to be significantly higher in the study group. Between the groups significant differences were found in PSQI total points, sleep latency, sleep disorder, use of sleeping pills and in the points of subscales of loss of functionality during day. There has been found a positive correlation between PSQI global point and AQ total point.

**Conclusions:** This study can contribute to further support to evidence of brain dysfunction predisposing to severe aggression and sleep disturbances of individuals with APD.

### P240

Traumatic stress in delinquent adolescent girls

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The investigation centered on clinical features and risk factors of posttraumatic stress disorder.

**Methods:** clinical, experimental. PTSD symptoms were assessed according PTSD diagnostic criteria (ICD-10). Statistical calculations