

a lower regional specificity of action on EEG cortical generators than risperidone.

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Preliminary results of the Belgian lifestyle program ENERGIE on weight in patients with psychiatric disorders

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Introduction: Life style intervention has shown in the general population to influence weight gain and delay metabolic complications.

Methods: ENERGIE is a lifestyle program adapted for psychiatric patients. Interactive open group sessions of 1h/week provide information about healthy food and physical activities. Additionally healthy activities are organized. Patients can give their consent for anonymous data collection.

Results: 194 patients (56% male) of all age categories have sent their follow up sheet for data entry. The median duration of the program was 80 days (0-223). The majority of patients were treated for psychosis (55%), 23% for mood disorder and 22% for other psychiatric conditions. Most patients were taking an antipsychotic drug (90%), 57% an antidepressant and 29% a mood stabilizer. BMI at baseline was normal in 25%. 33% of the patients showed overweight and 42% obesity. More females than males were obese. 66% of the patients did complete the program and only in 2% interruption was due to dissatisfaction.

Mean weight was 84.4 kg at start of the program and 83.3 kg at the end. 7% had changed BMI category from obese to overweight (from 42% to 35%). Patients (74%) and nurses (50%) judged that it helped in controlling weight.

Conclusion: Lifestyle programs can be adapted for patients with psychiatric disorders and contribute in the short term to control weight.

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Migration and schizophrenia spectrum disorders: Evidence from Romania

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Background: After the year 2000, external legal and illegal circulatory migration from Romania reached huge proportions. Germany and Austria, France, then Italy and Spain became major destination countries for emigration.

Aims of the study: The present study will describe the socio-demographic profile of the migrants who have developed mental illness, discuss the possible implications of migration on the mental health status.

Methods: 50 patients were assessed by a semi-structured interview investigating the immigration conditions, BPRS.

Results: Most of the patients were young, single, had no previous experience abroad, with few social ties in the host country. Their level of education entitled them for better jobs, but due to the fact that most

of them were illegal immigrants with poor language skills, they had to accept lower paid, unqualified and insecure jobs. The most frequent diagnosis indicated the schizophrenia spectrum.

Conclusion: The vulnerability of migrants for mental health problems, especially for schizophrenia is still debated. The patients included in the present study fit the general profile of the emigrant. Discrimination, social isolation, insecurity may increase the risk for mental illness.

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Akathisia: Old challenge for new antipsychotic agents

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Akathisia is well known extrapyramidal side-effect of conventional antipsychotic agents, which has been almost forgotten when new antipsychotics was developed. However, the uses of new antipsychotics have shown that it was anticipatory optimism, because new antipsychotics can cause akathisia as well as conventional. Since clinical presentation of akathisia may include psychiatry symptoms such as anxiety, mental unease, disforia etc. it can easily be misinterpreted as worsening of primary psychiatric illness especially schizophrenia or bipolar disorder which can cause wrong therapeutic intervention. It is very important to recognize akathisia in timely manner because its consequences especially high suicidal risk, can be fatal. Purpose of this work is to remind us on this, for patient very unpleasant and potentially dangerous side-effect, which was almost forgotten after beginning of therapeutic use of new antipsychotics. In this article we presented patient with schizophrenia who developed risperidone induced akathisia with suicidal pulsions. After reducing the dose of risperidone and implementation of clozapine patient's clinical condition was much improved.

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2nd generation antipsychotics for refractory generalized anxiety disorder

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Benzodiazepines and antidepressants are frequently used for the treatment of anxiety disorders, nevertheless low rates of remission and high rates of nonresponse are reported with their use. Fourty to 70% of patients with anxiety disorders fail to respond and more remain partly symptomatic after treatment, therefore there is a need for novel therapeutic strategies for refractory patients.

A small number of studies have been conducted in order to investigate the efficacy of 2nd generation antipsychotics for generalized anxiety disorder (GAD). Risperidone, olanzapine, aripiprazole, quetiapine and ziprasidone have proven to be effective and safe for the treatment of generalized anxiety disorder, either as augmentors of selective serotonin reuptake inhibitors (SSRI's) or as monotherapy.

However, definite conclusions cannot be drawn based on the small number of studies, the fact that they were mostly open-label and had small sample sizes. The efficacy and safety of 2nd generation