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CONSULTATION NOUVEAUX CAS: PRELIMINARY RESULTS

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Introduction: The "Consultation des Nouveaux Cas" started its activity in October 1996. This outpatient service has three purposes 1) diagnosis assessment and therapeutic counselling, 2) study of the consulting population, 3) prevention of mental disorders. It is designed for adults requiring a psychiatric consultation or follow-up who have not been treated at our clinic for at least six months. We work on the basis of a maximum of 5 interviews to complete the assessment.

Method: We assessed 13 patients for DSM-III-R diagnosis, referral procedures and sociodemographic data such as age, sex, marital status, nationality and occupation. 60% of patients were assessed within two interviews, 19% within three and 11% within five interviews.

Results: 43 patients made an appointment on their own initiative. 33 were referred by their GP and 37 by a psychiatrist. The majority are foreigners (67 vs 46 Swiss citizens). 40 are less than 30 years old, 58 are between 30 and 50 and 15 are older than 50. 55 of them have a professional activity, 25 do not, 12 are students and 19 are unemployed. 55 patients live on their own, and 58 with their spouse or family. The main diagnosis is an axis I diagnosis for 85 patients (11 psychotic disorders, 41 affective disorders, 6 substance abuse disorders, 5 adjustment disorders, 2 conversion disorders and 20 with other conditions that may be a focus of clinical attention).

Personality disorder is the main diagnosis for 28 patients. Treatment was completed at the "Consultation des Nouveaux Cas" for 31 patients, mainly those with personality disorder and other conditions than a mental disorder. 62 were referred elsewhere (psychiatric hospital, brief therapy centre "CTB", outpatient clinic, private practice) according to the severity of the symptoms.

Conclusion: The preliminary results indicate that this outpatient service fulfils the purposes it was designed for. The assessment, counselling and referral of patients took place with a low drop-out rate (less than 5%)

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TREATMENT MOTIVATION AMONG DUAL DIAGNOSIS PATIENTS

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A special ward for dual diagnosis patients (with both psychiatric disorder and substance abuse/dependence problem) was opened in April 1993 in the Universitäre Dienste Berne, Switzerland. An integrated treatment programme for four to nine months was developed for these patients who are difficult to treat and which proved to be effective with regard to rehabilitation criteria.

A crucial problem concerns patients who begin the treatment but terminate participation or drop out relatively early. In a post hoc analysis of data, correlates and potential predictors of premature termination and continuation of treatment were investigated. Special focus was on motivational aspects and the leading question was what factors influence differences and changes of motivational state, operationalised as treatment participation and adherence? Pretreatment assessment (e.g., socio-demographic characteristics, psychopathology etc.) as well as ratings and staff evaluations during treatment (e.g., aspects of therapeutic bond, self-efficacy, commitment) were used.

The results are presented in detail and implications for facilitating treatment motivation among dual diagnosis patients and considerations for further research are discussed.

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COMPLIANCE WITH CLINICAL ATTENDANCE IN PSYCHIATRIC PRACTICE

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Non-compliance with clinical attendance is a significant problem in psychiatric practice, as it undermines effective treatment potential, interferes with the demonstration of treatment efficacy and reduces benefits accrued from resource deployment.

Objective: To determine rates of compliance with clinical attendance in a community mental health setting and the sociodemographic and clinical variables that could influence it as well as to explore the reasons for missed appointments.

Method: A prospective study of compliance with clinical attendance over a six month period by 256 first time outpatients was carried out in two centres in the Canary Islands. **Results and conclusions:** The rate of non-compliance with the first appointment was 21%; second and third appointments registered non-compliance of 37.8% and 41.9% respectively. 35% of sample patients abandoned treatment early and men showed better compliance than women. Reasons given for missing appointments were forgetting and consideration that they were not necessary. The results suggest that clinical or sociodemographic variables have little impact on compliance which may be increased by letter or telephone prompting.

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DEPRESSIVE DISORDERS IN ADOLESCENTS: AN EPIDEMIOLOGICAL STUDY OF 465 SCHOOL CHILDREN

H. Fahn

This study proves a significant (37%) prevalence of depressive disorders in adolescents in secondary school (between 12 and 20 years of age), and especially depressive disorders and other EDM (30% versus 7%).

EDM appears more frequently and belatedly among girls. The separation of parents is not correlated with EDM but moroseness. The poor health of parents is a factor in depressive disorders in adolescents. Suicidal ideas and tense relationships with parents are frequent and can lead to serious disturbance. Somatic problems are significant in EDM especially with boys.