

P43. Rehabilitation

P42.01

A specialized group- treatment programme for depressive inpatients. Catamnestic results

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Introduction: Behavioral therapy has shown to be effective in the treatment of depressive patients – in combination with antidepressants or without. But most of the studies are based on outpatients. Actually, we know little about the efficacy of psychotherapy in depressive inpatients, although already 25 years ago specialised services in psychiatric hospitals were established in Germany.

Objective: We report on the implementation of a specialised group- treatment programme for depressive inpatients. It is characterized by a combination of behavioral activation, cognitive psychotherapy and psychopharmacotherapy or other biological interventions like ECT.

Method: The first 86 patients treated consecutively in the first year in this service were reviewed for clinical features and rate of rehospitalisation.

Results: 84% of our inpatients suffered from a depressive disorder, 33 from a recurrent, 20% from a single major depression episode. 15% of all patients, but 31% of those with recurrent depression were rehospitalised.

Conclusion: We found a high acceptance for the treatment programme even in severe depressive inpatients. Unsatisfactory, the rate of rehospitalisation of the patients with recurrent depression rested high. Further research must go on strategies combining cognitive therapy and biological approaches for relapse prevention.

P42.02

Artistic activity as a way of overcoming splitting in a borderline female homosexual patient

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We present a 24 year-old borderline homosexual woman, who asked for psychotherapy because of her feeling that everything in her life was slack. She mentioned vivid experiences of contact with the spirit of a famous dead actress, who represented a split-off part of the patient's Ego. The patient projected onto the actress an idealized interlocutor without, however, achieving sufficient social functioning.

The projective onto the actress split-off Ego part assumed a supportive and protective role towards the patient. The patient resorted to a dialogue with this split-off Ego part when the frustration of her every day life activities made her feel worthless.

In the course of the psychotherapy the patient developed an idealized mirror-transference towards the therapist, assigning to her the role of a powerful omniscient parent who could help her overcome the misery of her life. We shall present some aspects of the transference-countertransference constellation, which helped the patient overcome the detrimental effects of her Ego's impoverishment. As a consequent the patient did not resort any more to splitting operations but developed an artistic activity (theatre), which incorporated both aspects of her previously fragmented Ego.

P42.03

Family therapy in the group setting

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Objectives: The aim is to present the application of family therapy in the group setting (so-called multiple family group therapy, MFGT). The authors – who are dealing with group, family and individual psychotherapy – decided to implement MFGT with: regressive-symbiotic, longtime dysfunctional, rigid families, those with more than one symptomatic member, and with incomplete families.

Methods: In the therapeutic process 2 to 4 families are included, selected according to carefully developed criteria for treatment. We are applying the transgenerational family therapy, in which psychodynamic and systemic theoretical concepts are integrated. As the therapy with a few families is going on in the group setting, therapeutic factors are associated also with group therapeutic phenomena. Such families with related problems and psychopathology are like a closed homogeneous group.

Results: By combining family therapy with group therapeutic factors during MFGT certain therapeutic results are achieved even in those families that otherwise would break off family therapy, or even would not start it at all.

Conclusion: Based on our clinical experience from group, family and individual psychotherapy, we regard it justified to apply family therapy in a group setting (the so-called MFGT, with 2 to 4 families contemporaneously) to the following groups of families having related problems: regressive-symbiotic families, longtime dysfunctional, rigid families, families with more than one symptomatic member, and incomplete families. Under such conditions effects of family therapy are complemented by group therapeutic phenomena in a co-therapeutically conducted group.

P42.04

Bibliotherapy – cognitive-behavioral self help strategies in patients with major depression

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Introduction: Cognitive-behavioral psychotherapy in combination with pharmacotherapy was shown to be superior over each treatment strategy alone. Above that, recent investigation indicate that Bibliotherapy – a guided self help book using cognitive-behavioral intervention strategies – significantly reduces both the scores of Hamilton Rating Scale for Depression (HAMD) and of Beck Depression Inventory (BDI) in patients with Major Depressive Disorders.

Methods: Patients with “Major Depression” or “Dysthymia” using the “Mini International Neuropsychiatric Interview” (DSM-IV) and HAMD-Scores higher than 10 were included. In six weeks time participants read the German version of the self help book “Feeling Good” by D. Burns. Blinded raters evaluated depressive symptoms by using HAMD and BDI before and after Bibliotherapy (Time 1, Time 2). Hypothesis was tested if patients with Major Depression or Dysthymia who received Bibliotherapy show improvements in scores of HAMD and BDI compared to controls (waiting group).

Results: Preliminary results (N = 18; n_m = 7, n_f = 11; mean age = 50,3 yrs) indicate a tendency of reduction of HAMD (Time 1: