

were noted in terms of substance and alcohol abuse and the involuntarily admitted period.

P0138

Influence of personal features at fulfilment affective delicts

A. Oulyanenko. *Department of Psychogenia and Personality Disorders, Serbsky Research Centre for Social and Forensic Psychiatry, Moscow, Russia*

The research problem was the analysis of influence of personal features on behavior of affective offences surveyed during fulfilment. 80 men in the age of from 18 till 50 years which are accused of murder and passed forensic-psychiatric expertise have been surveyed. Into the first group has entered 45 people with prevalence passive features of the person. In an initial stage (1-4m) a disputed situation with the victims had as a rule family-household character, at patients the lowered background of mood, the tendency to avoiding the conflict, occurrence of isolation. At a following stage (1-3 m) at patients changes of a mental condition of a neurotic level that was shown in significant decrease in a background of mood with prevalence of depression, alarm, sensation of a hopelessness, feeling of own inferiority, fixing on the developed situation.

In the remote period after fulfilment of an offence at patients the given group various expressivenesses on a degree depressive frustration, with suicide ideas and tendencies were marked.

Into the second group has entered 35 people with prevalence active features of the person. The offence in the given group was not preceded with long disputed attitudes with victims, the behavior patients was not beyond a habitual stereotype of reaction of the person on the conflict and in a greater degree has been caused by refusal of a victim to concede to requirements, less often offensive actions from victims. In the remote period after fulfilment of an offence at small number patients depressions were marked.

P0139

Do the validation scales really measure the socially desirable responses?

I. Perunicic¹, D. Florikic¹, D. Lecici Tosevski^{1,2}, G. Knezevic³.
¹ *Institute of Mental Health, Belgrade, Serbia and Montenegro*
² *School of Medicine, University of Belgrade, Belgrade, Serbia and Montenegro*
³ *Department of Psychology, University of Belgrade, Belgrade, Serbia and Montenegro*

Background and Aims: The aim of our study was to investigate what are the real objectives of the validation scales.

Method: The sample consisted of 80 subjects (40 non-psychotic patients and 40 graduate high school students) to whom the Amoral-15 scale measuring antisocial tendencies was administered in two different situations - with the standard instruction (E1) and with the instruction to fake the responses (E2). The difference between E1 and E2 was taken as a measure of the ability to fake well. We correlated differential score (E1-E2) with the validation scales (the mix of Marlow-Crown and Eysenck's L scale from the EPQ). NEO-PI-R was administered under standard instruction to measure basic personality dimensions.

Results: Results indicated no significant correlation between the ability to fake good and the scores on validation scales. In some items we found negative correlation which means that subjects who better present themselves in social desirable way have lower scores on the validation scales. By Hierarchical regression analyses we found that

about 40% of variance on validity scales could be explained by Emotional Stability, Agreeableness and Conscientiousness and not by ability to fake food.

Conclusion: Socially desirable answers are serious problem in personality assessment and cannot be solved by giving the validation scales because these scales are measuring the basic personality dimensions and not the ability to fake good.

P0140

Brain cell membrane motion-restricted phospholipids in patients with schizophrenia who have seriously and dangerously violently offended

B.K. Puri¹, S.J. Counsell¹, G. Hamilton², M.G. Bustos³, I.H. Treasaden³.
¹ *MRI Unit, Imaging Sciences Department, MRC CSC, Imperial College London, Hammersmith Hospital, London, UK*
² *Department of Radiology, University of California, San Diego, School of Medicine, San Diego, CA, USA*
³ *Three Bridges Medium Secure Unit, Imperial College London, West London Mental Health NHS Trust, Middlesex, UK*

Background and Aims: This study directly assessed, for the first time, whether, as expected under the membrane phospholipid hypothesis of schizophrenia, there was a change in brain cell motion-restricted membrane phospholipids in vivo in male forensic patients with schizophrenia who had seriously and violently offended (homicide, attempted murder, or wounding with intent to cause grievous bodily harm) while psychotic, by quantification of the broadband resonance signal from 31-phosphorus neurospectroscopy scans.

Methods: Cerebral 31-phosphorus magnetic resonance spectroscopy was carried out in 15 male patients with schizophrenia who had seriously and violently offended (homicide, attempted murder, or wounding with intent to cause grievous bodily harm) while psychotic and in 12 age- and sex-matched normal control subjects. Data were obtained using a 1.5 T Marconi Eclipse system with a birdcage quadrature head coil dual-tuned to proton (64 MHz) and 31P (26 MHz). T1-weighted magnetic resonance images were acquired for spectral localization. Spectra were obtained using an image-selected in vivo spectroscopy sequence (TR = 10 s; 64 signal averages) localized on a 70 x 70 x 70 mm³ voxel.

Results: There was no significant difference in the broad resonances between the two groups, with the mean (standard error) percentage broadband signal for the patients being 57.8 (5.6) and that for the control subjects 57.7 (6.0). The phosphomonoesters and phosphodiester narrow signals also did not differ between the groups.

Conclusion: Our data suggest that the membrane phospholipid hypothesis of schizophrenia may not apply to the subgroup of schizophrenia patients who have seriously and violently offended.

P0141

Audit of prescribing of PRN (pro re nata) medications

H. Reddy. *Marlborough House, Milton Keynes, UK*

Aim: To ascertain the level of compliance of present documentation of PRN medication with national and local standards of good practice.

Objective: To inform changes to current practice where room for improvement is identified.