

It was revealed that among parasuicides prevailed women (53% of all parasuicides in 2006, 58,4% in 2005), aged 20-39 (64,6% of all parasuicides in 2006, 63% in 2005); main type of parasuicide is medicines poisoning (30% of all in 2006, 33,8% in 2005). It was established that 5 people of those who committed a parasuicide later committed suicide.

Among suicides prevailed men, aged 40-59 year. Main type of suicide was hanging, 85% of all cases.

The monitoring allowed to develop a strategy for prevention of suicidal behavior. The following activities were implemented:

- Implemented control of psychoactive drugs use
- Organized collaboration with mass media

Seminars for general practitioners were conducted with the aim of revelation of psychopathological disorders.

P0273

Do mental health services meet users' needs?

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Objective: Clients' satisfaction with mental health service is one of necessary conditions of good treatment outcomes. The aim of the study was to investigate satisfaction with treatment and its dependency of users' needs and their subjective quality of life.

Methods: The sample of 174 out-patients with schizophrenic, affective, anxiety, eating and personality disorders were assessed with the Brief Psychiatric Rating Scale (BPRS), the Camberwell Assessment of Need Short Appraisal Schedule (CANSAS), Manchester Short Assessment of Quality of Life (MANSA) and the Client's Scale for Assessment of Treatment (CAT).

Results:

1. The mean result of CAT was 8,2 [SD=1,5] and the half of patients assessed their satisfaction with treatment between 7,2 and 9,2 (on 1-10 scale). Persons with eating and personality disorders were the least satisfied with services.
2. The highest numbers of met/ total needs were connected with health and unmet needs with social area. Total unmet needs of persons with schizophrenic, eating, personality and affective disorders were significantly higher than among patients with anxiety disorders.
3. Persons with personality, affective and eating disorders had significantly lowest subjective quality of life.
4. Satisfaction with treatment had negative correlation with unmet needs (mostly health and service needs), intensity of depressive/anxiety symptoms and positive correlation with subjective quality of life.

Conclusions:

1. Social needs were the most often unmet from patients' point of view.
2. The higher unmet needs and more intensive symptoms of depressive/anxiety were, the less patients were satisfied with treatment and the lower they assessed their quality of life.

P0274

The prevalence of posttraumatic stress disorder and its symptoms eight months after the earthquake among Bam survivors: An epidemiological study

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Bam earthquake in December, 2004 was one of the most devastating disasters in the world. It affected a total population of 970000 and decimated over 35000 people. This study aimed to determine the prevalence of full or partial posttraumatic stress disorder (PTSD) and its symptoms in a sample of survivors of Bam earthquake.

This cross-sectional study included 786 people in randomly selected households through cluster sampling eight months after the earthquake. Subjects were assessed by the Composite International Diagnostic Interview (CIDI).

About 98 percent of the respondents were exposed to one or more traumatic life experiences. The most severe traumatic experience in 87.2 percent of the subject was witnessing others injuries or corpses. The lifetime prevalence of PTSD was 59.1 percent. Partial PTSD (having some PTSD symptoms without fulfilling the minimum criteria) and current PTSD had prevalence rates equal to 20.2 and 51.9 percent, respectively. There was not a significant difference between men and women with regard to prevalence of PTSD and its symptoms. "Numbness and avoidance" was the least prevalent and "reexperience" the most prevalent symptom groups.

PTSD is highly prevalent in Bam earthquake survivors that warrant implementing community-based interventions for the disturbed population.

P0275

Associations between individual mental health and the local social environment: A multilevel analysis

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Background/Aims: To derive small-area, or contextual, measures of the local social environment using benefits data from the UK Department of Work and Pensions and to investigate whether (1) the mental health status of individuals is associated with contextual measures of low income, economic inactivity, and disability, after adjusting for personal risk factors for poor mental health, (2) the associations between mental health and context vary significantly between different population sub-groups.

Methods: Data from the Welsh Health Survey 1998 were analysed in multilevel Normal response regression models of 24,975 adults aged under 75 years living in 833 wards in Wales (mean population 3,500). The mental health outcome measure was the Mental Health Inventory (MHI-5). The age-standardised ward-level benefits data available were the means tested Income Support and Income-based Job Seekers Allowance, and the non-means tested Incapacity Benefit, Severe Disablement Allowance, Disability Living Allowance and Attendance Allowance.