

Center, Beer Ya'akov, Israel <sup>2</sup> Tel-Aviv University, Medical School, Tel-Aviv, Israel

Beds in Israel's private psychiatric hospitals, where the standard of care is markedly lower than in state-run facilities, are being closed down. Their patients - many hospitalized for years - are being re-assessed and those still needing inpatient care transferred to state hospitals. The aim is to give a better quality of life, conduct a thorough psychiatric reappraisal and offer the latest therapeutic options.

The merged Be'er Ya'akov-Ness Ziona- Israel Prisons Service Mental Health Center set up a multidisciplinary team to conduct a coordinated process of reappraisal, preparation, reorganization and admission for these patients and their families. We found in the patients complex self-management problems, a high level of dependency, severe neglect, a range of tendencies to violence, and mistrust of the staff. The family members revealed high levels of anxiety and fear. Given this situation, a nursing staffer was appointed to liaise with the families, be freely available for consultation and act as patient advocate.

In this presentation we describe the core principles for this multidisciplinary reassessment and re-placement process, which began by assessing the patients in their setting of origin. We report on the planning of new interventions incorporating the latest therapeutic advances, exceptional incidents, changing the profile of the psychogeriatric ward, etc. We offer the conclusions and recommendations drawn from this change process, undergone equally by patients, family members and staff, and report on its results, which for many of the patients led to a more open care-setting in the community and for some a return home.

### P0353

Compression of Nortriptyline and Bupropion in major depression disorder among elderly patients

N. Mokhber, M. Modares Gharavi. *Psychiatry Department of Mashad University, Avicenna Hospital, Mashad, Iran*

**Background:** The number of the elderly is rapidly growing and depression is known to affect this group of people aged 60 years and above quite seriously. Pharmacotherapy in this age presents many challenges. Both bupropion, and Nortriptyline, a TCA with mild anticholinergic effect have been prescribed for the old patients suffering from depressive symptoms.

**Method:** In a randomized double-blind study with 8 weeks of follow-up we selected 52 elderly outpatients who had non psychotic major depressive disorder according to DSMIV criteria and they were allocated into two groups who received nortriptyline (at a dose of up to 150 mg per day) and bupropion (at a dose of up to 225mg per day). Cognitive state was assessed using the Mini-Mental State Examination.

**Setting:** The out patient clinics at the Ghaem and Avicenna Hospital, Faculty of Medicine of the University of Mashad.

**Results:** Both treatments were efficacious, and there were no statistically significant differences between the two antidepressant classes with regard to efficacy (pvalue<0.05).

**Conclusions:** For elderly depressed patients who completed a 8 week treatment trial, both nortriptyline and bupropion exhibited good efficacy and few side effects. There was no significant difference between the two groups in their response rate or the severity of side effects resulting from medication.

### P0354

Prevalence of depression in an elderly population in Iran

N. Mokhber <sup>1</sup>, M.R. Majdi <sup>2</sup>, M. Salek Haghghatpoor <sup>2</sup>. <sup>1</sup> *Psychiatry Department, Mashad University, Avicenna Hospital, Mashad, Iran* <sup>2</sup> *Health System Department, Mashad University, Mashad, Iran*

Depression among elderly in Iran, has not been well studied. This research is part of a series examining health status of older people using the Geriatric Depression Scale (GDS-15).

**Method:** 1975older people living in Razavi Khorasan province were studied using the cluster sampling method. The Persian version of GDS was completed based on filling in questionnaires and after recognition of sample size of each city. Admission and data analyzing was followed by examining the relationship between depression and place of living (rural and urban), education, gender, type of living (alone or with family), occupation, source of income, supporting system (such as charities)

**Result:** The subjects' mean ( $\pm$ SD) age was 71.14 $\pm$ 7.78 years (range: 60-98) and 52.9 of the subjects were women. According GDS score, 23.5% of the subjects were at risk of depression. The GDS score was significantly related to type of living (alone or with family) and source of income, and supporting system (such as charities). The percentage of depression was higher in subjects living alone than those living with others (P<0.01, respectively). There are significant differences between depression scores in elderly with family support, others, personal wealth and retirement salary (p<0.01).

**Conclusion:** Depressive symptoms are common among community-dwelling elders in Iran, and with its identical demographic characteristics, we suggest depression may be related to some factors including living alone and to source of income, and supporting system.

### P0355

Associated factors with psychiatric symptoms in a Spanish community-residing elderly

F.J. Olivera Pueyo <sup>1,3</sup>, S. Benabarre Ciria <sup>2,3</sup>, T. Lorente Aznar <sup>2,3</sup>, M. Rodriguez Torrente <sup>2,3</sup>, C. Pelegrín Valero <sup>1</sup>, A. Castellón Fantova <sup>4</sup>, S. Lausín Marín <sup>5</sup>. <sup>1</sup> *Mental Health Unit, Huesca, Spain* <sup>2</sup> *Educational Center of Family Medicine, Huesca, Spain* <sup>3</sup> *Instituto Aragonés Ciencias de la Salud (I+CS), Huesca, Spain* <sup>4</sup> *Health Care Center Pirineos, Huesca, Spain* <sup>5</sup> *Health Care Center From Tamarite, Huesca, Spain*

**Background:** There are various physical, functional, psychological and social factors associated with the appearance of mental symptoms in the elderly. Our objective was to determine the relationship and influence of these different variables in the psychiatric symptomatology of the elderly who reside in the community.

**Methods:** Cross-sectional study of a sample of 324 patients over 65 years, representative of the elderly who reside in the community in the province of Huesca (Spain). Symptoms of depression (Yesavage GDS), cognitive impairment (MMSE), anxiety (GADS), psychotic symptoms, obsessive symptoms and hypochondriacal ideas (GMS) were measured. Social-demographic, physical and somatic, functional and social data were evaluated. Analysis was carried out in 3 phases: univariate, bivariate and multivariate with logistic regression.

**Results:** At the time of the study, 46.1% of the elderly studied suffered from some psychiatric symptom. 16.4% had cognitive

impairment, 15.7% anxiety, 14.3% depression, 6.1% hallucinations and delusions, 7.2% hypochondriacal ideas and 4.4% obsessive symptoms. Female gender was significantly associated with depression (PR: 3.3) and anxiety (PR: 3.9). Age was a factor associated with cognitive impairment (PR: 4.4). Depression was significantly related to severity of the physical illness (PR: 61.7 in extremely severe impairment). Solitude (PR: 16.3) and being single (PR: 13.4) were factors which were strongly associated with anxiety; living in residences was associated with psychotic symptoms (PR: 7.6).

**Conclusions:** Severity of physical illness, solitude, living in residences and female gender, among others, are related with psychiatric symptoms in community-residing elderly persons.

### P0356

Depressive symptoms in the elderly inpatients in a Brazilian university hospital: Prevalence and associated factors

C.M. Chiloff, A.T. Ramos-Cerqueira, M.C. Lima, A.R. Torres. *Department of Neurology and Psychiatry, FMB-UNESP, Botucatu, Brazil*

**Introduction:** Mental disorders are among the most prevalent chronic diseases in the elderly worldwide and depression is the most common. Often not properly identified or treated, depression contributes to impairment in functional capacity and to considerable burden for family members and health services.

**Objective:** Study the prevalence of depressive symptoms and associated factors in the elderly interned in a Brazilian university hospital.

**Method:** A cross-sectional study evaluated 189 participants using the Geriatric Depression Scale, the Mini-Mental State Examination and the Katz and Lawton Index, to assess dependence regarding activities of daily living (ADL).

**Results:** The majority of the participants were women, aged between 60 and 92 years-old, with low educational level and personal income and nonqualified occupations. The prevalence of depressive symptoms was 56.1%, but only 3% had a psychiatric diagnosis registered in their medical records. Univariate analysis showed significant associations between depressive symptoms and low educational level and income, marital status, number of hospitalizations in the previous year, cognitive decline, dependence regarding basic and instrumental ADL and death. After logistic regression, the only variables that remained significantly associated with depression were low educational level, dependence regarding basic ADL and death.

**Conclusions:** Depressive symptoms were independently associated with low educational level and dependence regarding basic ADL. More importantly, hospitalized elderly with depressive symptoms were more likely to die. It is essential to properly diagnose and treat depression in this population, to minimize its negative impact on patients, family members and health services.

### P0357

Concept of power in Iranian elderly

M. Ravanipour<sup>1</sup>, S.H. Salehi<sup>2</sup>, F. Taleghani<sup>2</sup>, H.A. Abedi<sup>3</sup>, M.J. Schuurmans<sup>4</sup>. <sup>1</sup>Faculty of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran <sup>2</sup>Isfahan University of Medical Sciences, Isfahan, Iran <sup>3</sup>Faculty of Nursing & Midwifery, Islamic Azad University, Isfahan, Iran <sup>4</sup>Faculty of Health Care, University of Applied Sciences, Utrecht, The Netherlands

**Aim:** this paper reports a study exploring the structure of power in Iranian elderly and provides a foundation for cultural based care.

**Background:** The older adult population is increasing in the world. It is estimated that the number of people age 60 and older to be about 600 millions in the world. Power is a source for living that is present in all individuals. Although some researches have been exploring the meaning of power among elderly, there is no information about the concept of power in Iranian elders.

**Method:** In this qualitative study, 22 participants were interviewed about the concept of power; purposive sampling was used to understand the nature of the phenomenon under study. The interviews were analyzed using a content analysis method.

**Findings:** The main categories that emerged from this qualitative study, included: independence; being aware of personal changes; coping; perceived self ability; role playing; and mastery.

**Conclusion:** This is the first qualitative study that describes how Iranian elderly perceive their power. The main structures of power were perceived self ability and mastery, which according to the participants' stand points is formed and takes meaning in their families. Findings are important to health care professionals especially nurses involved in the care of elderly.

**Key words:** power, empowering, Iranian elderly, ageing, content analysis.

### P0358

Bases of preventive psychogeriatry

V.Y. Semke. *Mental Health Research Institute, Tomsk, Russia*

Problem of age and ageing is considered currently from various positions – biological, physiologic, psychological and social ones. With improvement of conditions of life and further medical progress mankind is confronted by perspective of fruitful and long life. With formation of ageing alterations of special significance is interaction of constitutional (characterological) and environmental (microsocial) factors. Great role is played by relations of ageing person with the nearest: negative influence of environmental impacts generates in them a number of neurotic disturbances. They include states of “social isolation” (during adult children leave the family), “pensionary bankruptcy” or panic fear “not to reach the pension”, “neuroses of resume” caused by subjective assessment of adverse balance of life achievements. There is also another viewpoint based on that with onset of ageing neuro-mental reactivity of the personality is lowering thereby pathogenic action of traumatizing relations loses its significance (results in reduction of neurotic diseases in later life).

The ageing person is confronted by questions: how to behave in new setting, how not to be complicating for the nearest and her/himself? How to avoid decrepit state, prolong her/his productivity, feel till last days of natural end of life being healthy and robust? The decision making in this situation depends on mind and volition of the person, on selected by her/him general strategy of “overcoming” the ageing, conscious strive for productive and full longevity. In this regard we surely may say that prevention of untimely old age fully depends on healthy way of life at young age.

### P0359

A mental health assessment and support team for community elders in a Scottish health region

G.S. Stevenson<sup>1</sup>, J. Keith<sup>1</sup>, H. Ewing<sup>2</sup>. <sup>1</sup>Department of Psychiatry, Stratheden Hospital Nhs Fife, Cupar, UK <sup>2</sup>Department of Social Work, Fife Council, St. Andrews, UK