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appraisals did not predict internalizing symptoms. Findings confirm the link between negative cognitions concerning traumatic events and persistent PTSS in adolescents.

**Conclusions:** Maladaptive cognitive appraisal is a strong predictor of posttraumatic symptoms in trauma-exposed adolescents.

#### OP05: Attitudes of medical students of a Sri Lankan University towards psychiatry and psychiatric illnesses

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**Background:** Attitudes of medical students towards psychiatry as a specialty, mentally ill patients, mental illnesses and psychiatric treatment have been shown to be mostly negative. In keeping with the emerging evidence, the Faculty of Medicine, University of Kelaniya, Sri Lanka has increased its exposure of medical students to psychiatry during the last few years.

**Aims:** We conducted this study to determine the overall attitudes of medical students towards psychiatry, mentally ill patients and their treatment as well as to see variations of these attitudes at different levels of training.

**Methods:** A descriptive cross-sectional study was conducted among medical students of University of Kelaniya, Sri Lanka, using the validated Attitudes towards Psychiatry (ATP-30) questionnaire and Attitudes towards Mental Illness questionnaire (AMIQ). Collected data was analyzed using SPSS 16.0.

**Results:** Of the 451 medical students who were given the questionnaires, 379 returned them duly filled (84% response rate). The overall attitude of students towards psychiatry as a specialty and mentally ill patients was mainly positive or neutral. More students appeared to develop favourable attitudes towards the fourth and final years of their training. However, students still seem to possess more stigmatizing attitudes towards mental illnesses particularly schizophrenia and substance dependence when compared with physical illnesses. Female students had more favourable attitudes towards treatment of mentally ill patients, psychiatry as a specialty and psychiatry as a future career choice than their male counterparts.

**Conclusions:** Medical students tend to develop a more favorable attitude towards psychiatry, patients with mental illnesses and psychiatric illnesses and their treatment with maturity in their training, probably due to enhanced exposure.

#### OP06: Pattern of behavioral and psychological symptoms in patients with dementia presenting to National Institute of Mental Health, Sri Lanka

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**Background:** Behavioural and psychological symptoms are a major contributor to the high levels of carer burden in patients with dementia. Optimal management of these symptoms is yet to be determined. Establishing the prevalence of behavioural and psychological symptoms would be important in effective management of individual patients and setting up geriatric services.

**Aims:** The aim of the study was to describe behavioral and psychological symptoms of dementia among patients admitted to National Institute of Mental Health, Sri Lanka.

**Methods:** A cross-sectional descriptive design was used. Every other patient diagnosed as having dementia who was admitted to the National Institute of Mental Health from 01.12.2013 were included until the sample size of 73 was reached. An interviewer administered checklist and the Neuropsychiatric Inventory (NPI) were used for data collection. SPSS 22nd version was used in data analysis. Ethical clearance was obtained from the Ethical Review Committee at NIMH.

**Results:** Fifty six percent were males and the mean age was 70.3 years. Severity of dementia was mild in 26%, moderate in 56.2% and severe in 17.8% according to MMSE scores. Mean duration following diagnosis of dementia was 2.8 years. Fifty seven percent had comorbid illnesses, namely diabetes mellitus and/or hypertension. All were on pharmacological treatment in the form of antipsychotics and/or acetylcholinesterase inhibitors. All patients had behavioural and psychological symptoms. The commoner symptoms were delusions (53.4%), irritability (50.7%), agitation (41.1%) and depression (37%). Of these symptoms, delusions and depression were not found in those with severe dementia, while agitation and irritability were significantly associated with the severity of dementia ( $p=0.003$  and  $0.028$  respectively).

**Conclusions:** All patients in our study had behavioural and psychological symptoms, despite being on pharmacological treatment. Delusions and irritability were the most common symptoms. This highlights the need for developing strategies for effective management.

#### OP07: Prevalence and correlates of antenatal and postnatal depression in Gampaha District, Sri Lanka

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**Background:** Depression related to child bearing may occur during pregnancy (antenatal depression), after childbirth (postnatal depression) or both. Antenatal and postnatal depression share similar prevalence rates to that of depression in the general population, with estimates ranging from 10 to 20%. As maternal depressive symptoms have far-reaching and devastating impacts not only on the mother but also on her infant and family, continued exploration of prevalence and correlations is important. However such data in Sri Lanka is lacking.

**Aims:** To determine the prevalence of antenatal and postnatal depression among women attending clinics in a district in Sri Lanka and to determine correlates of depression occurring during pregnancy and/or after childbirth.

**Methods:** A cross sectional analytical study was conducted. Data was collected from consecutive patients attending antenatal and postnatal clinics of Gampaha district, using an interview schedule. Screening and diagnosis were based on the validated Sinhala version of the Edinburgh Postnatal Depression Scale (EPDS) and ICD 10 criteria respectively. The data was analyzed using the SPSS software program, utilizing the chi squared test.

**Results:** Among a sample of 302 women, the prevalence of depression was highest during the second trimester (32.6%) while it was 22.4% and 20.6% in the first and third trimesters respectively. The prevalence of postnatal depression was 20.8%. Women who were unemployed, who had lost their mothers early in their life, with a history of miscarriages, previous complicated pregnancies and complications during the current pregnancy or delivery were found to have statistically significant associations with fulfilling ICD 10 criteria for depression and having an EPDS score of nine or more.

**Conclusions:** A high prevalence of antenatal and postnatal depression was found in the study population highlighting the need for island wide studies as well as service development in order to detect and treat these women.

#### OP08: Epidemiological survey on sexually abused children and adolescents who presented to a tertiary care unit in Central Province, Sri Lanka

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**Background:** Child sex abuse gives rise to acute and chronic psychiatric sequelae. Research is scanty in Sri Lanka; a few studies have been carried out in selected groups. This epidemiological study analyses 53 victims of sexual abuse who presented to a tertiary care hospital clinic in the Central Province of Sri Lanka. It is an extension of a preliminary study on 35 subjects in the same center. It is important to identify demographics of victims and perpetrators and also the characteristics of abusive incidents, to form guidelines to educate the medical fraternity as well as the public to prevent this grave yet neglected area.

**Aims:** To identify the characteristics of sexually abused children/adolescents, alleged perpetrators and the incidences of abuse.

**Methods:** All sexually abused children who presented to the child psychiatry clinic, Teaching Hospital, Peradeniya from the inception of the clinic in 1995 to 31st of December 2014 were included. Data was extracted from clinic records. Informed written consent was given by the parent.

**Results:** The study included 53 participants, of whom 71% were female, and 15% were aged less than 6 years. Of the participants, 19% were aged 6 to 10 years and 66% were above 10 years. The highest number of participants (30%) had presented in 2014. The alleged perpetrator was a known person to the child in 94% of the cases. Nearly one fourth (26%) were abused more than once. Out of available data, family structure was disturbed in 32%; victims were unsupervised in 83% and 26% (all females) had consensual sex.

**Conclusions:** An increasing trend of presentation of the sexually abused was shown over the years probably indicating an increased awareness. The finding that the alleged perpetrators were mostly known persons, that most adolescent minors had consensual sex and that a considerable number of victims were unsupervised, carry important implications in relation to prevention of child sex abuse.

**Discussion:** This case demonstrates that a vascular injury to deep periventricular areas can present as amnesic syndrome. The resulting memory impairment is stable over time and patients need psychological support and changes in their lifestyles. Rehabilitation is mainly aimed at using external aids to enhance the individual's functional level rather than improvement of memory itself.

#### PP 17: Descriptive study of quality of life in follow-up patients with treatment resistant schizophrenia on clozapine

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**Background:** In the last decades several studies have measured the quality of life in patients with schizophrenia on different treatment regimes. Clozapine, with possibly superior efficacy for treatment resistant schizophrenia, was expected to provide a better quality of life. But research findings are inconsistent.

**Aims:** The objective of this study is to measure the quality of life in follow-up patients with treatment resistant schizophrenia, who were prescribed clozapine with adequate dose for an adequate duration.

**Methods:** A descriptive cross sectional study was conducted at the outpatient clozapine clinic, university psychiatry unit at National Hospital of Sri Lanka during the month of December 2014. Patients who gave consent and who fulfilled the inclusion criteria were selected and data was collected by medical officers, using the Health of Nation Outcome Scale (HoNOS).

**Results:** A total of 50 patients were interviewed along with their caregivers. Doses of clozapine ranged from 150mg to 600mg daily.

Each of the twelve clinical outcome measure items in the HoNOS was analysed. A significant number of patients found to have problems of more than moderate severity in five aspects of mental and social health addressed by the instrument, namely problems associated with hallucinations and delusions, problems with depressed mood, other mental and behavioral problems, problems with relationships, problems with occupation and activities. Minor problem requiring no formal action reported by significant number of patients was only with regard to non-accidental self injury and cognitive problems.

**Conclusions:** A significant number of patients with treatment resistant schizophrenia had adverse impact in overall quality of life even when treated with clozapine. Clinicians should focus on the possible causes and make necessary interventions in order to improve the health and social functioning of these patients.

#### PP 19: Views on forms of attire of doctors by patients, relatives and staff in a Teaching Hospital in Sri Lanka

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**Background:** The attire of a physician is considered a part of his professional conduct. It is important to ascertain the viewpoint of service users and non-medical colleagues to determine if improvement is to be thought of.

**Aims:** To describe the views of patients, relatives and hospital staff towards doctors' attire.

**Methods:** A descriptive cross-sectional study was conducted in a teaching hospital setting in Sri Lanka. Convenient samples of patients, carers and non-medical staff were chosen from psychiatry, gynaecology and obstetrics, pediatrics, medicine and surgery settings (both inpatients and outpatients) were given a questionnaire with pictorial simulations of commonly worn male and female attires (both formal and casual) in the Sri Lankan setting.

**Results:** Data was collected from 2695 persons (1495 patients, 800 carers and 400 hospital staff). A majority of staff preferred formal to casual attire for both male (97.5%) and female (96.5%) doctors. There were no significant differences in the responses with regards to age, civil status, level of education or type of occupation. Carers/parents of paediatric inpatients preferred formal attire in male (94.5%) and female (93.0%) doctors. Other carers also preferred formal attire (males 93.5% and females 92.1%). Majority of inpatients in medical (male: female, 94.69% and 94.39%), surgical (95.01%, 93.95%), psychiatric (93.10%, 92.24%) and obstetrics and gynaecology (96.28%, 95.86%) preferred formal attire as well. There was no significant difference among the patients/carers when the preferred attire of doctors in different disciplines were considered.

**Conclusions:** Formal attire is the preferred attire for male doctors and females doctors irrespective of the specialty or setting.

#### PP 20: Features of alleged child abuse and its associated factors in a group of children presenting to a University Psychological Medicine Unit, Lady Ridgeway Hospital for Children (LRH)

Goonawardena KDDR<sup>1</sup>, Herath ADMA<sup>1</sup>, Kotalawala SW<sup>1</sup>, Seneviratne S<sup>2</sup>

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**Background:** The term child abuse incorporates physical abuse, emotional abuse, sexual abuse, and neglect. It is associated with a wide range of psychological consequences manifesting at various times, to varying extents in different individuals. Child abuse is under reported all over the world. In recent years increasing numbers of children are referred for psychiatric assessment following alleged child abuse.

**Aims:** To describe demographic factors of victims and characteristics of referrals, abuse incident, and psychological sequelae of children referred for psychiatric assessment.

**Methods:** A retrospective study was carried out at the University Psychological Medicine Unit, LRH. All referrals following alleged child abuse, court reports and clinical notes of children referred for assessment in year 2013 and 2014 were analyzed.

**Results:** A total of 40 samples were assessed. Twenty-six (65%) were females, ranging from 1 to 17 years (median 10 years). Twenty-four (60%) were referred through the Judicial Medical Office. The incident had been revealed spontaneously by 17 (42.5%). The time taken for referring for assessment ranged from 2 days to 3 years (median 3 months). The types of abuse were 27 (67.5%) sexual and 1 neglect. Thirty-nine (97.5%) were abused by known people and in 37 incidents the perpetrator was a male. Twenty-four (60%) had features of psychological sequelae at the time of assessment. Recommendations were offered for 29 (72.5%). Eight warranted medication, 14 were offered psychotherapy, and for 17 (42.5%) recommendations were made regarding primary carers.

**Conclusions:** The highest presentation was due to sexual abuse. In all cases other than one the perpetrator was a known person. A majority were detected to have psychological sequelae. Recommendations were made for a majority for treatment or to ensure their safety.

#### PP 21: Description of Forensic Child Psychiatry Services provided by a Child Psychiatry Unit

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**Background:** Sub specialties in the psychiatry field have been a recent addition in our country. Child and adolescent Psychiatry services provide specialist assessment and management for children with psychological needs. The subspecialty of child forensic psychiatry has come into existence relatively recently in the world. In the absence of a specialized unit this service is provided by the already existing services in our country. Common forensic psychiatric evaluations include determination of child custody, evaluation of parenting capacity, and termination of parental rights. Child custody evaluations focus on the "best interests of the child." Interviews with the parents, children, and collateral contacts play an integral role in forming recommendations for the court. The absence of data and training in this specialty has a potential to limit the service delivery in the Sri Lankan context.

**Aims:** To analyze the demography, sources of referrals, objectives for referring, assessments made and outcome of the forensic child psychiatry referrals received by the University Child Psychiatry Unit.

**Methods:** A retrospective study was carried out at the University Psychological Medicine Unit, Lady Ridgeway Hospital for children. All forensic referrals, court reports and clinical notes of children referred for forensic psychiatric assessment in year 2014 were analyzed.

**Results:** Fifty-four children were referred. The mean age was 9.1 years (ranging from 2 years 9 month to 17 years). Thirty were males and 24 were females. Twenty-four children (44.4%) were referred from juvenile courts and judicial medical officers. Twenty-five children (46.3%) were referred for assessment of mental state after alleged sexual abuse. Twelve children (22.2%) received a new diagnosis. Five children were diagnosed to be having learning disability. Recommendations were made for 87% (n=47) of cases. Pharmacotherapy was commenced for 4 (7.4%) children.

**Conclusions:** Major sources of referrals were from juvenile courts and judicial medical officers. The most frequent reason for referral was to assess mental state after sexual abuse. Recommendations were made for a majority of cases.

## PP 22: Audit on waiting time of the outpatients at the Psychiatry Unit, Colombo South Teaching Hospital

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**Background:** Prolonged waiting time at outpatient services is an important factor in many disciplines of medicine. It results in patient frustration, impairment of doctor-patient relationship, poor compliance and loss of productive time. At Colombo South Teaching Hospital, there are several outpatient services provided by the Department of Psychiatry. These include several clinics (General adult, Child, clozapine, Elderly) and liaison care provided to other units of the hospital. These services are provided both to new patients and follow up patients. It has been observed that some patients wait for a considerable time to obtain outpatient care.

**Aims:** To audit the waiting time of outpatients at the Psychiatry Unit, Colombo South Teaching Hospital.

**Methods:** A prospective data collection was done using a questionnaire. The time of arrival was recorded at the registration desk and the time of consulting a doctor was recorded for all outpatients over 2 weeks duration. The waiting time was calculated using the difference of the two time recordings.

**Results:** There were total of 224 outpatients during the study period and out of that 48 (21.43%) were new patients and 176 (78.57%) were follow up patients. The mean waiting time was 39.61 min (SD 34.72) for new patients and 25.14 (SD 22.51) for follow-ups. There were 34 liaison care patients, of which 11 (32.35%) referrals were from the outpatient department (OPD) and 23 (67.65%) were ward referrals. The mean waiting time was 43.63 min (SD 36.06) for OPD referrals and 47 min (SD 36.28) for ward referrals. The mean waiting time for all outpatients was 28.27 min (SD=26.21).

**Conclusions:** There is a considerable waiting time at outpatient services of the Psychiatry Unit, Colombo South Teaching Hospital. Strategies will be implemented to reduce this waiting time and a re-audit is planned to be done in six months' time.

## PP23: A rare case of chronic mania of 5 years' duration

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**Introduction:** In recent times, there have been a few reports of chronic mania, which is characterized by the presence of manic symptoms without remission for more than 2 years, with an incidence of 6-15% for chronic mania among the patients with bipolar disorders.

**Case report:** Mr. J is a 49 year old patient, presented claiming that he was given alcohol mixed with poison by a group of people. He further said that he had special powers bestowed in his right hand by gods. He could do many things such as healing people with his abilities. He said he had created new toys and a machine which produces petrol from garbage. He had written about these things even to the president and claimed that he is to be awarded for his inventions. His functional level was suboptimal and unproductive due to excessive expenditure. He has been behaving aggressively towards his family and he had used alcohol excessively. He had been having these features for the past five years with hardly any day of appropriate behavior in between. He had maintained his self care. His speech was increased in amount, rate and volume. His mood was elated and angry. He had delusions of grandiosity and persecution. He was on psychiatric treatment since 1999. At that time he had described himself as having divine powers. He had improved with treatment and got functionally better with regards to social and occupational aspects. In 2009 he had another relapse and since then his compliance has been poor. However he became better with a combination of lithium carbonate 750 mg, sodium valproate 600 mg and olanzapine 20 mg daily.

**Discussion:** Due to the associated functional deterioration and presence of persistent symptoms it might be difficult to differentiate chronic mania from schizophrenia, schizoaffective disorder and cyclothymic or hyperthymic temperament. It is worthwhile to study this entity as the response to treatment has been poor.

## PP 24: Clinical presentations and provision of services to patients attending community child psychiatry clinics

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**Background:** Studies have repeatedly shown that a substantial number of children and adolescents suffer from emotional or behavioural problems. Although these problems can hamper everyday functioning and well-being, only a minority of disordered children and adolescents receive help from mental health services.

The University Psychiatry Unit of Lady Ridgeway Hospital initiated two community child psychiatry clinics as a pilot project in February 2013. They are located at Narahenpita and Kotta Road. These are considered as the first community child psychiatry clinics in Sri Lanka. Services are provided by a multidisciplinary team at these clinics, which includes psychiatrists, clinical psychologists and a social worker.

**Aims:** To analyze the sources of referrals, common presentations and services provided by community child psychiatry clinics.

**Methods:** A descriptive cross sectional study was carried out at community child psychiatry clinics. Clinical records of the first 50 service users were analyzed.

**Results:** Thirty-four (64%) were males. The age range was 5-17 years (mean=9.3). Forty children (80%) were referred by school medical inspectors. Twenty (40%) presented with poor academic performance and seven (14%) with a sudden change in behavior. Twenty four (48%) parents expected only guidance and eighteen (36%) expected guidance and medication. Pharmacological treatment was initiated in 38% (n=19) of cases and non-pharmacological interventions in 90%.

**Conclusions:** The main source of referrals were from school medical inspectors. The main presentation was learning difficulty.

## PP 25: A descriptive study on factors affecting age at presentation of autism spectrum disorders to a child mental health clinic at Lady Ridgeway Hospital

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**Background:** Early diagnosis of autism is important as Early Intensive Behavioural Interventions have shown to improve outcome. The age at presentation to child psychiatry services in Sri Lanka and the factors determining it have not been established. These would be useful in planning service provision.

**Aims:** This study aimed to assess the patterns and factors affecting age at presentation of autism to a child mental health clinic at Lady Ridgeway Hospital.

**Methods:** A cross-sectional descriptive design was used. All patients diagnosed as having autism registered at a child mental health clinic at Lady Ridgeway Hospital from January to December 2013 were included in the study. Data was collected retrospectively from clinic records, using an interviewer-administered check-list. SPSS 19th version was used to analyze the data. Ethical clearance was obtained from the Ethical Review Committee at LRH.

**Results:** Fifty per cent of patients with autism presented at age 3 years or less, with the ages ranging from two to twelve. Majority of fathers (54.8%) and 45.2% of mothers had received formal education up to or less than grade 10. The monthly family income was less than Rs.50,000 in 72.2%. Fifty eight point nine per cent resided with their nuclear families, whereas 39.3% lived with extended families. Speech delay was the commonest presenting complaint (58.5%). Age at presentation had a significant association with presenting symptoms, with children having speech delay presenting at an earlier age (p=0.02). A significant association was not found between age at presentation and gender of the child, parental education level, income and whether the child was living with extended family or not.

**Conclusions:** Speech delay is the commonest reason for children to be brought to health services and it may prompt early presentation. Public education about other symptoms of autism would further help to ensure early presentation.

## PP 26: Audit on the prescribing pattern and monitoring of children with neurodevelopmental disorders treated with risperidone

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**Background:** Behavioural disturbances are common in neurodevelopmental disorders and challenging to treat. Treatment with pharmacological methods becomes necessary when the behaviours interfere with general wellbeing, daily activities

and with therapeutic programs. Atypical antipsychotics have been found to be useful in managing the behaviours and improving social skills. There is a high evidence base for the use of risperidone in these conditions. The use of this medication is limited with the side effect profile and the need to monitor for side effects. Data is lacking on the usage patterns and the side effect profile in children in our country.

**Aims:** To analyze the prescribing patterns, indications and monitoring before and after commencement of risperidone in children diagnosed with neurodevelopmental disorders during the years 2013 and 2014, presenting to the University Psychological Medicine Unit at Lady Ridgeway Hospital for Children.

**Methods:** A retrospective study was carried out at the University Psychological Medicine Unit. All children diagnosed with neurodevelopmental disorders who were commenced on risperidone were included.

**Results:** Twenty-seven children were commenced on risperidone. Of the total number of referrals 2.1% in 2013 and 2.6% in 2014 were commenced on risperidone. Of these, 77.8% (n=21) were males. The age ranged from 4 years and 3 months to 13 years (Mean age=6 years and one month). The main diagnosis was ADHD and learning disability (18%). Aggression was the commonest indication (55.55%). Initial weight of the patient was not done in 59.3% (n=16) and weight gain was monitored only in two patients. Other common side effects were not monitored. Tardive dyskinesia was reported in one child. Pretreatment investigations were not done in a majority (92.59%). Post treatment monitoring was not done in 44.4%.

**Conclusions:** Treatment with risperidone for neurodevelopmental disorders are used very sparingly in the clinic setting. There was very poor monitoring for side effects and pre and post treatment.

### PP 27: Characteristics of patients admitted following attempted suicides to General Hospital, Hambantota

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**Background:** The suicide rate in Sri Lanka is higher than the global figure and is around 20 per 100,000 population. Ten to twenty times more people attempt suicides adding an immense burden to the health care system. Knowledge on characteristics of subjects who attempt suicide will help to strengthen prevention programs. This is a part of study which was conducted to elicit characteristics and risk factors of attempted suicides.

**Aims:** To describe characteristics of patients who were admitted following attempted suicides to General Hospital, Hambantota.

**Methods:** A descriptive cross sectional study was performed using an interviewer administered questionnaire at General Hospital, Hambantota. A person presenting with a non-fatal act of self harm undertaken with conscious self destructive intent was taken as a case of suicide attempt.

**Results:** The total sample consisted of 105 subjects. The mean age was 25.5 (SD 11.93) and 56.2% were females. Except for 4 subjects the rest were Sinhala Buddhists. A majority had only secondary education (71.4%), were not employed (55.2%) and belonged to nuclear families (79.0%).

Though a majority admitted an access to help (65.7%), had good relationship with parents (73.3%) and were socially connected, there were 15.3% with past history of suicidal attempts and 64.7% had been exposed to suicidal acts via the media. There were 6.7% with depression (all females) and 5.7% with alcohol dependence (all males). Though 56.1% reported recent stressful life events, only 27.6% mentioned recent relationship disputes.

**Conclusion:** A majority were females, in the 16-25 year age group, had only secondary education, were not employed and belonged to nuclear families. A large proportion had access to help and were socially connected, but a majority also reported recent stressful life events. There were 6.7% with depression who were all females and 5.7% with alcohol dependence who were all males.

### PP 28: Prevalence of co-morbid obsessive compulsive symptoms among patients with schizophrenia attending a psychiatry unit at a Teaching Hospital

Siriwardena GR<sup>1</sup>, Paliawadana VP<sup>1</sup>, Athurugiriya TR<sup>1</sup>, Ranaweera UPNP<sup>1</sup>, Gunarathne NP<sup>1</sup>, Wijesiri HGVW<sup>2</sup>, Seneviratne RMAVL<sup>2</sup>, Padmakumara NBN<sup>2</sup>, Kathriarachchi ST<sup>3</sup>

<sup>1</sup>Registrar in Psychiatry, <sup>2</sup>Senior Registrar in Psychiatry, <sup>3</sup>Consultant Psychiatrist, University Psychiatry Unit, Colombo South Teaching Hospital

**Background:** Patients with co-morbid schizophrenia and obsessive-compulsive symptoms (OCS) may represent a special subgroup termed as "schizo-obsessive" with greater neuropsychological impairment and poorer outcomes.

**Aims:** To determine the prevalence of obsessive-compulsive symptoms (OCS), common themes and types of obsessions/compulsions and negative impact of the OCS in patients with schizophrenia.

**Method:** This was a descriptive study. A semi structured clinical interview was done to assess OCS and their impact in patients with schizophrenia who attended the psychiatry clinic at Colombo South Teaching Hospital during the period from 1st December 2014 to 7th January 2015.

**Results:** The sample size was 60, out of which 51.6% (n=31) were males. The mean age was 42.9 years (SD = 14.35). Out of the patients 35% (n=21) had significant OCS with a female preponderance (57.14%, n=12). Obsessional thoughts were the commonest (76%, n=16) followed by doubts (33.33%, n=7), ruminations (9.5%, n=2) and images (4.7%, n=1). Multiple obsessions were seen in 23.8% (n=5). Commonest theme was dirt and contamination (66.6%, n=14), followed by order and symmetry (23.8%, n=5), sex (4.76%, n=1) and religion (4.76%, n=1). Compulsive rituals were seen in 33.3% (n=20). Cleaning rituals were the commonest (65%, n=13) followed by checking (35%, n=7), keeping things in order (20%, n=4) and mental acts (5%, n=1). Twenty patients (95.2%) considered OCS to cause negative consequences including emotional distress (65%, n=13), wasting time (65%, n=13), social dysfunction (35%, n=7) and physical ailments (15%, n=3).

**Conclusions:** A significant proportion of patients with schizophrenia had OCS. Prevalence of OCS was similar to other international studies. Obsessional thoughts regarding contamination and compulsive cleaning rituals were the most common. Majority considered OCS to be distressful which emphasizes the importance of effectively addressing them.

### PP 29: A case of post concussional syndrome following blunt force trauma to the head

Paliawadana VP<sup>1</sup>, Seneviratne RMAVL<sup>2</sup>, Kulatunga M<sup>3</sup>

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**Background:** Post concussional syndrome is an ill-defined condition consisting of a constellation of symptoms which cause a disproportionately severe disability following a mild head injury. It is thought to occur due to an interaction between physical effects of mild head injury and associated psychological factors.

**Case Report:** A 19-year old male with no previous history of mental illness presented with poor sleep, headache, irritability, inability to concentrate and fatigability lasting for two months, following a road traffic accident causing a non-penetrative head injury. The accident resulted in loss of consciousness and there was associated anterograde and retrograde amnesia. However the non-contrast Computed Tomography (CT) brain did not reveal any abnormality. The symptoms occurred after a one-month period of latency. There were no symptoms suggestive of a depressive episode, post-traumatic stress disorder or any persistent change in personality. Cognitive assessment did not reveal any abnormality. His self-care had been maintained adequately but attending to other role specific duties were impaired. A diagnosis of post concussional syndrome was made and the patient was treated symptomatically. Both patient and family were reassured and educated regarding the condition. Patient recovered fully after three months and discharged from follow-up.

**Discussion:** This case demonstrates that post concussional syndrome can follow a mild head injury and sometimes be preceded by a latent period. Several studies have shown that there is no specific treatment needed, and explanation of symptoms together with supportive care may decrease severity and duration of symptoms.

### PP 30: Patterns of attendance and associated factors of children with autism attending a tertiary clinic for Early Intensive Behavioural Intervention

Samanmalee THR<sup>1</sup>, Kotalawala SW<sup>2</sup>, Dasanayake DGBMS<sup>3</sup>, Jayasekara TS<sup>4</sup>, Dasanayaka L<sup>5</sup>, Seneviratne S<sup>6</sup>,

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**Background:** Effective early intervention programs are an important first step for children with an autism spectrum disorder (ASD). Early diagnosis followed by individualised early intervention can provide the best opportunities for achieving their potential. There are very limited specialized autism services in our country and most are in the private sector. The clinic at LRH provides mothers with strategies for home based Early Intensive Behavioural Intervention. Parents are required to attend the clinic at monthly intervals. The follow up rates are dependent on many factors and the progress of the child is monitored and feedback is given to parents. There is no data to determine factors which promote clinic attendance in our context.

**Aims:** To analyse the pattern of attendance, presenting symptoms and associated features in a group of children diagnosed with autism.

OP 11	Undiagnosed depression among older adults living in a semi urban community in southern Sri Lanka	Jayasekara KMSAK, Senadheera C, Pathirana KD, de Silva MLK, Dharmapriya SKCL
OP 12	Management of patients admitted following deliberate self harm in the Teaching Hospital, Karapitiya: current practice and deficiencies	Chandrasiri PAA, Gunethunga WG, Rajapaksha H
OP 13	Female offenders in a Sri Lankan forensic psychiatry setting	Chandradasa WMML, Champika RML, Mendis TSS, Fernando NFJ
OP 15	Season of birth and subsequent development of schizophrenia in Sri Lanka	Peramuna PDOSD, Fernando LH, Kulasiri WGMML, Pathirage CL, Wanigatunga PS
OP 16	Prevalence and associated factors of depression among postpartum mothers in Bope-Poddala Medical Officer of Health (MOH) area	Punchihewa GD, Chandanie GH, Jayasekara KMSAK, Rajapakse IH, Wijesinghe CJ
OP 17	Non-Fatal self-harm in Anuradhapura: recent life events and methods	Dharmawardene V, Perera EMSS
OP 18	Substance use disorders and their correlates among inmates in a Sri Lankan Prison	Hapangama A, Niriella M, Pathmeswaran A, Dasanayake DGBMS, Kuruppuarachchi KALA, de Silva HJ

### Poster presentations

	Title	Authors
PP 01	An audit of safety monitoring of bipolar disorder treatments according to the International Society for Bipolar Disorders (ISBD) consensus guidelines	Mannapperuma U, Galappathy P, de Silva V, Annalingam A, Hanwella R, Mendis J, Jayakody RL
PP 02	Long-term outcome of children with autism followed up at a specialized clinic at Lady Ridgeway Hospital for Children	Goonawardena KDDR, Herath ADMA, Kotalawala SW, Jayasekara TS, Dasanayaka L, Seneviratne S
PP 03	Complex partial seizure with automatism associated with violence	Godawita SP, Hettiarachchi LV, Fernando N

PP 04	Rapid cycling bipolar affective disorder in adolescents	Dahanayake DMA, Rohanachandra YM, Wijetunge GS, Kuruppuarachchi KALA
PP 05	A descriptive study on patterns of presentations to a child mental health clinic at Lady Ridgeway Hospital	Rohanachandra YM, Dahanayake DMA, Wijetunge GS
PP 06	Private sector pharmacy dispensing patterns for generic prescriptions of fluoxetine and risperidone: a survey from 5 locations in Sri Lanka	Ellepola A, Dharmawardene V, Ellepola A, Perera M
PP 07	Prevalence of co-morbid alcohol and other substances of abuse among patients with schizophrenia attending a psychiatry unit at a Teaching Hospital	Siriwardena GR, Palihawadana VP, Athurugiriya TR, Ranaweera UPNP, Gunarathne NP, Wijesiri HGVM, Seneviratne RMAVL, Padmakumara NBN, Kathriarachchi ST
PP 08	Diabetes mellitus, BMI and waist circumference in patients treated with clozapine	Ratnatunga SS, Wijayanayaka PAI, Karunanayake SPMM, Narangoda RASS, Gunatilake K, Karunaarachchi M, Hanwella R, de Silva V
PP 09	A case report on neuropsychiatric consequences of barotrauma in a navy sailor	Ranasinghe K, Rupasinghe D
PP 11	Satisfaction of parents and children on treatment for attention-deficit hyperactivity disorder with methylphenidate	Somadasa SH, Goonawardena KDDR, Herath ADMA, Kotalawala SW, Jabeer SF, Seneviratne S
PP 12	Prevalence of depressive disorder among patients attending the out patients department (OPD) of National Hospital of Sri Lanka	Anandakumar D, Dayabandara M, Hanwella R, de Silva V
PP 13	A case of acute psychosis following dengue haemorrhagic fever	Ranaweera UPNP, Wijesiri HGVM, Padmakumara N, Seneviratne L, Athurugiriya TR, Siriwardhana GR, Palihawadana VP, Wass D
PP 14	Relationship of the onset of Obsessive Compulsive Symptoms (OCS) to initiation of antipsychotics in patients with schizophrenia	Siriwardena GR, Palihawadana VP, Athurugiriya TR, Ranaweera UPNP, Gunarathne NP, Wijesiri HGVM, Seneviratne RMAVL, Padmakumara NBN, Kathriarachchi ST
PP 15	Descriptive study on administration of Electro Convulsive Therapy (ECT) in a University Psychiatry Unit, National Hospital of Sri Lanka	Arachchi MK, Narangoda RASS, Rajasuriya M
PP 16	A case of amnesic syndrome in a patient with a past history of transient ischaemic attacks	Palihawadana VP, Seneviratne RMAVL, Kulatunga M

PP 17	Descriptive study of quality of life in follow-up patients with treatment resistant schizophrenia on clozapine	Hanwella R, de Silva V, <u>Karunanayake MSN</u> , Wijenayake PAI, Rathnathunga SS, Narangoda S, Karunarachchi M, Gunatilake K
PP 19	Views on forms of attire of doctors by patients, relatives and staff in a Teaching Hospital in Sri Lanka	<u>Ruwanpriya BVS</u> , Kapugama KGCL, Kurupparachchi KALA, Hapangama A
PP 20	Features of alleged child abuse and its associated factors in a group of children presenting to a University Psychological Medicine Unit, Lady Ridgeway Hospital for Children (LRH)	<u>Goonawardena KDDR</u> , Herath ADMA, Kotalawala SW, Seneviratne S
PP 21	Description of Forensic Child Psychiatry Services provided by a Child Psychiatry Unit.	Goonawardena KDDR, <u>Herath ADMA</u> , Kotalawala SW, Jayasekara TS, Seneviratne S
PP 22	Audit on waiting time of the outpatients at the Psychiatry Unit, Colombo South Teaching Hospital	<u>Athurugiriya TR</u> , Ranaweera UPNP, Palihawadana V, Siriwardana G, Hettiarachchi DB, Marcellin RD, Senevirathna RMAVL, Wijesiri HGVW, De Silva J
PP 23	A rare case of chronic mania of 5 years' duration	<u>Batuwana VK</u> , Godawita SP, Fernando PLN
PP 24	Clinical presentations and provision of services to patients attending community child psychiatry clinics	Samanmalee THR, Kotalawala SW, <u>Somadasa SH</u> , Wickramarachchi S, Seneviratne S
PP 25	A descriptive study on factors affecting age at presentation of autism spectrum disorders to a child mental health clinic at Lady Ridgeway Hospital	<u>Dahanayake DMA</u> , Rohanachandra YM, Wijetunge GS
PP 26	Audit on the prescribing pattern and monitoring of children with neurodevelopmental disorders treated with risperidone	Goonawardena KDDR, <u>Herath ADMA</u> , Kotalawala SW, Fazmin KBF, Seneviratne S
PP 27	Characteristics of patients admitted following attempted suicides to General Hospital, Hambantota	<u>Chandrasiri PAA</u> , Lokubalasooriya A
PP 28	Prevalence of co-morbid obsessive compulsive symptoms among patients with schizophrenia attending a psychiatry unit at a Teaching Hospital	<u>Siriwardana GR</u> , Palihawadana VP, Athurugiriya TR, Ranaweera UPNP, Gunarathne NP, Wijesiri HGVW, Seneviratne RMAVL, Padmakumara NBN, Kathriarachchi ST

PP 29	A case of post concussional syndrome following blunt force trauma to the head	Palihawadana VP, Seneviratne RMAVL, Kulatunga M
PP 30	Patterns of attendance and associated factors of children with autism attending a tertiary clinic for Early Intensive Behavioural Intervention	Samanmalee THR, Kotalawala SW, <u>Dasanayake DGBMS</u> , Jayasekara TS, Dasanayaka L, Seneviratne S
PP 31	Expectations of carers attending an adolescent long term follow up clinic at National Hospital of Sri Lanka (NHSL)	Samanmalee THR, Kotalawala SW, <u>Dasanayake DGBMS</u> , Wickramarachchi S, Seneviratne S
PP 32	Patients with medically unexplained physical symptoms referred to a Sri Lankan tertiary hospital psychiatry unit: a descriptive study	<u>Gunathillaka KDK</u> , de Silva VA
PP 33	Prevalence and stigma towards depression and factors associated with stigma towards depression among final year medical students at University of Sri Jayewardenepura	<u>Palihawadana VP</u> , Siriwardane GR, Ranaweera UPNP, Athurugiriya TR, Wijesiri HGVW, Seneviratne RMAVL, Kulatunga M
PP 34	Adherence to current treatment recommendations in initiation of clozapine: an observational descriptive study at Colombo South Teaching Hospital	<u>Athurugiriya TR</u> , Ranaweera UPNP, Palihawadana V, Siriwardana G, De Silva SS, Senevirathna RMAVL, H Wijesiri HGVW, De Silva J
PP 35	Cross-cultural validation of the Sinhalese version of the Liebowitz Social Anxiety Scale (LSAS-SR): study of the items and internal consistency	<u>Hapangama A</u> , da Silva T, Williams SS, Kurupparachchi KALA, Wickremasinghe R, Ravindran A
PP 36	Characteristics of substance abusers seeking medical care from a substance clinic, psychiatry unit of National Hospital of Sri Lanka	<u>Narangoda RASS</u> , Rathnathunga S, Wijenayaka A, Karunarathna S, Arachchi MK, Narangoda KD, Rajasuriya M

## ABSTRACTS OF ORAL PRESENTATIONS

### OP01: Prevalence and correlates of betel chewing and its effects on symptoms of schizophrenia among patients attending a general hospital in Sri Lanka

Isuru LLA<sup>1</sup>, Kurupparachchi KALA<sup>2</sup>, Pathmeswaran A<sup>3</sup>, Hapangama A<sup>4</sup>  
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**Background:** Betel and areca has been associated with Sri Lankan culture for centuries and rates of betel/areca chewing have been shown to be high in our population. Research in an Asia-pacific country shows that ingredients of betel quid may have an effect on symptoms of schizophrenia.

**Aims:** To determine the prevalence of betel chewing among patients attending a general hospital, its demographic correlates, and to determine effects of betel chewing on positive and negative symptoms of schizophrenia and extrapyramidal side effects.

**Methods:** A cross sectional descriptive study using an interviewer administered questionnaire containing demographic details, ICD 10 criteria for dependence were administered on a randomly selected patient population at a general hospital. In addition, the positive and negative symptoms of schizophrenia scale (PANSS) and the Liverpool University Neuroleptic Side Effect Rating Scale (LUNCERS) were administered to patients with schizophrenia.

**Results:** The sample size was 1001. Of patients attending the general hospital 21% were found to chew betel. There was no statistically significant difference in the prevalence rates of betel chewing among patients in psychiatric units and non-psychiatry units ( $P>0.05$ ). Prevalence of betel chewing was more among males ( $P<0.001$ ). Betel users had a significantly higher mean age than non-chewers ( $p<0.05$ ). Prevalence of betel chewing was significantly higher among patients with schizophrenia (47%) when compared to patients with other illness categories ( $p<0.05$ ). No statistically significant difference was found in positive and negative symptoms between those who chew betel and those who do not. Extrapyramidal and anticholinergic side effects were significantly less among patients who chew betel before being corrected for confounders.

**Conclusions:** Considerably higher prevalence of betel chewing was found among older male patients and those with schizophrenia. Prospective studies are needed to determine effects of betel/areca on symptoms of schizophrenia and extrapyramidal side effects.

### OP02: Metformin for treatment of antipsychotic induced weight gain in patients with schizophrenia or schizoaffective disorder: a double blind, randomized, placebo controlled study

Hanwella R<sup>1</sup>, Dayabandara M<sup>2</sup>, Wijesundara H<sup>3</sup>, Henegama T<sup>3</sup>, Gunewardena H<sup>3</sup>, Suraweera C<sup>3</sup>, de Silva V<sup>1</sup>  
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**Background:** Second generation antipsychotics cause significant weight gain resulting in metabolic complications. Several randomized trials in Hispanics and East Asians have shown that metformin is effective in treating antipsychotic induced weight gain.

**Aims:** To test the efficacy of metformin in attenuating antipsychotic induced weight gain in patients with schizophrenia or schizoaffective disorder.

**Methods:** A double-blind, placebo-controlled, randomized study was conducted at the University Psychiatry Unit, NHSL. Patients aged  $\geq 18$  years, diagnosed with schizophrenia or schizoaffective disorder according to ICD-10 research criteria, treated with atypical antipsychotics and who had gained more than 10% of the pre-treatment body weight were included in the study. Sixty-six patients were randomized using computer generated random numbers in block size of 4. Participants were randomly assigned to receive metformin 250 mg twice a day or placebo for 6 months. To ensure allocation concealment, identical looking tablets of metformin or placebo was provided in coded plastic containers by the manufacturer. The primary outcome measure was change in body weight. Secondary outcome measures were change in BMI, waist/hip ratio and fasting blood sugar. Linear mixed models were used to analyse the data.

**Results:** There were no significant differences between groups in demographic or clinical characteristics. At the end of

24 weeks estimated marginal mean change was -1.05 kg (95% Confidence Interval=-1.78 to -0.32) in the metformin group and + 0.94 (95% Confidence Interval=0.16 to 1.72) in the placebo group. Between groups difference demonstrated a significant time-by-treatment interaction for weight ( $F=3.23$ ,  $p=0.004$ ). There was significant differences between group in waist and BMI but not waist/hip ratio or fasting blood sugar.

**Conclusion:** Metformin is effective, caused significant weight loss compared to placebo in patients treated with antipsychotics.

### OP03: Effectiveness of an intervention to reduce stigma related to mental illnesses among health workers

Rajasuriya M<sup>1</sup>, Chandraratne N<sup>2</sup>, Weeratunga RP<sup>3</sup>, Kumara SS<sup>3</sup>, Darshana P<sup>3</sup>, Weeraratne E<sup>3</sup>, Rajapaksha UNK<sup>3</sup>  
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**Background:** Stigma adversely affects many aspects of the quality of life of people with mental illness and it continues to reduce the well being of the person even after recovery.

**Aims:** To test the effectiveness of an anti-stigma intervention to reduce the conviction of attitudes/ beliefs likely to increase stigma towards mental illnesses.

**Methods:** Fifty-seven health workers from a primary health care set-up were selected. A self-administered instrument comprising 21 statements on beliefs /attitudes regarding mental illness was applied followed by the intervention. The instrument was re-applied 30 minutes after the intervention.

The intervention comprised few posters and a short talk based on themes of: Having a mental illness is not equal to being stupid; Stupidity is not a characteristic feature of mental illnesses, The word 'crazy' should be used to denote 'irrational stupidity' alone but not to indicate 'having a mental illness', and mental illnesses have complex aetiologies and multi-disciplinary treatment methods similar to other non-communicable diseases.

The effectiveness of the intervention was determined by calculating the mean scores before and after the intervention using paired t test.

**Results:** Out of the 21 items assessed 19 items showed an improvement following the intervention. Among them 2 items which were related to stigma associated with places of care for people with mental illnesses and aetiology of mental illnesses showed a very significant ( $p < 0.0001$ ) improvement while 6 other items showed a statistically significant improvement ( $p < 0.05$ ). The observed overall improvement following the intervention was statistically significant ( $p=0.001$ ).

**Conclusions:** The intervention was effective in reducing attitudes/ beliefs likely to increase stigma towards mental illnesses effectively and it was most effective in changing attitudes/ beliefs related to places of care, aetiology of mental illnesses, ability of people with mental illnesses to lead normal lives and their perceived stereotyped behaviour.

### OP04: Negative cognitive appraisals and PTSD symptoms in Sri Lankan adolescents

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**Background:** The cognitive model postulates that PTSD symptoms arise and are maintained when an individual processes the traumatic event in a way that leads to sense of current threat and subsequent anxiety. Many studies have been carried out to investigate this relationship but little appears to be known about individual characteristics of traumatic experiences that increase the negative cognitive appraisal of trauma. Therefore, this study examined correlates of negative appraisals in relation to trauma exposure and their relationship to posttraumatic stress symptoms.

**Aims:** To describe the predictors of negative appraisals and the specific relationship between negative appraisals and PTSS.

**Methods:** The sample included 414 Sri Lankan adolescents, aged 12 to 16, living in areas impacted in varying degrees by the 2004 tsunami. In 2008, participants completed measures of negative appraisals, lifetime traumatic events, posttraumatic stress symptoms, internalizing symptoms, ongoing adversity, and social support.

**Results:** Among the adolescents, 70% were exposed to multiple traumatic events and 25% met DSM-IV criteria for full or partial PTSD. Adolescents who had experienced more severe events, abusive events, greater cumulative trauma, or greater current adversity reported more negative appraisals. In regression analyses controlling for known risk factors such as female gender, cumulative trauma, ongoing adversity, and low social support, negative appraisals were the best predictor of PTSS, explaining 22% of the variance. This relationship appeared specific to PTSS, as negative



### OP09: Beliefs, attitudes and practices pertaining to psychotherapy among traditional healers in Sri Lanka

Rodrigo A<sup>1</sup>, Minas H<sup>2</sup>, Kakuma R<sup>3</sup>, Newton R<sup>2</sup>, de Zoysa P<sup>4</sup>

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**Background:** Depression is an important public health issue in Sri Lanka that is treatable. However there are significant deficits in available treatment interventions for depression in this country. Psychotherapy is an essential component of treatment of depression. However, psychotherapy is practiced rarely in Sri Lanka for various reasons, not least of which is the absence of culturally appropriate psychotherapies. Traditional healing practices have been identified as an important resource for developing culturally appropriate psychotherapies. This study investigated beliefs, attitudes and practices pertaining to psychotherapy for depression among Sri Lankan traditional healers and lay counsellors.

**Aims and methods:** Detailed semi-structured individual interviews were conducted with traditional healers and lay counsellors to gather their experiences in providing treatment to patients with psychiatric symptoms, depressive symptoms in particular, helpful and unhelpful techniques of healing and counselling, and factors that influence outcome of therapy. The participants were selected to represent different practices and beliefs both in urban and rural settings. All individual interviews were audio-recorded, and transcribed. Translated transcripts were coded and anonymised.

**Results:** Interviews were conducted with 8 traditional healers including astrologers, sharmans, soothsayers and 7 lay counsellors both with and without religious affiliations. All of them regularly saw individuals with psychological symptoms and depression. A majority (75%) had favourable views about Western mental health treatment and 66% had requested individuals to seek Western treatment. All but one participant used instructional method rather than collaborative style. Using folk and religious stories as metaphors, active listening, instilling hope, empowerment, demonstrating impermanence of bad times, highlighting the importance of equanimity, loving kindness, involvement of family and mobilization of social support were identified as indicators of better outcome.

**Conclusions:** The above factors are likely to be useful in formulating culturally appropriate CBT for depression in Sri Lanka.

### OP10: Pharmacological management of bipolar disorder, adverse effects, therapeutic monitoring and medication adherence in NHSL psychiatry clinics: Preliminary results of an ongoing study

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**Background and aims:** To study medications used, mood control, adverse effects, medication adherence, lithium concentrations and their correlations in patients with bipolar disorder.

**Methods:** Consecutive consenting patients diagnosed with bipolar disorder were recruited from all NHSL psychiatry clinics to include 40 patients per clinic. Treatment received, mood control and adverse effects according a Likert scale were obtained from clinic records and patient interviews. Medication adherence was measured using a validated medication adherence scale (MAS). Correlations among variables were determined using Spearman correlation in SPSS.

**Results:** Of the 228 patients, the mean age was 46 years (range 18-73 years) and 50.9% were males. Mood stabilizers were used in 220 (96.5%) – namely lithium in 174 (76.3%), sodium valproate in 76 (33.3%) and carbamazepine in 8(3.5%). Antipsychotics were used in 104 (45.6%), of which olanzapine was used in 63 (27.6%), risperidone in 46 (20.2%), haloperidol in 38 (16.7%) and chlorpromazine in 5 (2.2%). Antidepressants were used in 68 (29.8%) – venlafaxine in 9 (3.9%), imipramine in 9 (3.9%) and fluoxetine in 23 (10.1%). Benzhexol was used in 77 (33.8%) and 27 (11.8%) were on clonazepam. The median number of drugs used per patient was three and 133 (58.3%) had good medication adherence (MAS>7/8). Altogether 37.7% had poor mood control. The majority 162 (71%) knew their medication regimen but 75 (32.9%) didn't know drug names and 51 (22.4%) had no insight. The mean lithium concentration was 0.67 mmol/L (range 0.8-1.15; n=105) and 10 (9.5%) had sub-therapeutic concentrations (<0.4mmol/L) but none had toxic levels (>1.2mmol/L).

Adverse effects were seen in 217 (95.2%) and included somnolence (44.3%), tremor (36%), decreased memory (34.6%), polydipsia/polyuria (31.1%), arthralgia (29.8%), constipation (23.2%), asthenia (22.4%), weight gain (21.5%), headache (19.3%), muscle weakness (18.9%), drowsiness (17.1%), agitation (15.4%), insomnia (15.4%), alopecia (15.8%), anxiety (14%), confusion (13.6%), dizziness (14.5%), rhinitis (11.8%), blurred vision (11.4%), palpitations (11.4%), ataxia (11%) and extra-pyramidal effects (9.6%).

The lithium daily dose significantly correlated with lithium concentrations ( $p<0.001$ ,  $r=0.388$ ). Side effects correlated positively with the number of drugs taken ( $p<0.001$ ,  $r=0.267$ ) and negatively with the adherence score ( $p<0.001$ ,  $r=-0.295$ ).

**Conclusions:** The most commonly used mood stabilizer was lithium followed by valproate. Antipsychotics were used more than antidepressants. Over 90% had therapeutic lithium levels and experienced adverse effects, which affected adherence. Mood control, insight and medication adherence were satisfactory.

### OP11: Undiagnosed depression among older adults living in a semi urban community in southern Sri Lanka

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**Background:** Depression is common in elderly but data related to Sri Lankan community is lacking.

**Aims:** To describe the presence of undiagnosed depression in older adults in the community.

**Methods:** We screened 300 randomly selected people aged above 50 years from Bope-Poddala MOH area who were not diagnosed with neurological illness, major psychiatric illness and who did not have severe visual or hearing impairment, using the Geriatric Depression Scale (GDS). Medical records were examined and diagnoses of diabetes, hypertension and hypercholesterolemia were recorded.

**Results:** A majority were females ( $n=176$ , 61%). The mean age was 63 (SD=8) years. Twenty nine percent of the sample was still working. A majority (83%) was living with their spouse and 37 were widowed. A large majority (94%) reported that they handled money and 97% reported that they were actively involved in household activities. Thirty four percent (males-34% and females-33%) had sought medical treatment for diabetes, hypertension and hypercholesterolemia.

Thirteen percent of males and 10% of females ( $N=31$ ) met criteria for depression (scored 5 or above in the GDS). The same rate of depression (11%) was found in both age groups, i.e., in those who were up to 65 years of age and those who were older.

**Conclusions:** The presence of depressive symptoms in this community sample of older adults is much less than rates reported from a hospital based non-psychiatric sample (over 60%). The finding that one in every 10 older adult showed depressive symptoms signals the need of professional attention to the mental health wellbeing of older adults. As one in every 3 of these people are already in contact with health care services for their medical problems, these services could provide assessment of depression to make appropriate referrals/ interventions to improve the mental health wellbeing of older adults.

### OP12: Management of patients admitted following deliberate self-harm to Teaching Hospital, Karapitiya: Current practice and deficiencies

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**Background:** Deliberate self-harm (DSH) has emerged as an important public health issue in Sri Lanka. Nearly 40000 people commit DSH in each year. Delivering an appropriate psychiatric management is important to reduce further morbidity and mortality.

**Aims:** To audit the management of patients admitted with DSH to Teaching Hospital Karapitiya (THK).

**Methods:** A retrospective audit was conducted of all patients with DSH admitted to THK over a period of one month. Since DSH is not a diagnostic category, all poison cases were screened during the period, as known epidemiology confirms that a significant majority of DSH admissions present with self poisoning. Information was extracted from the bed head tickets (BHT) to a data sheet. Relevant descriptive statistics were calculated and comparisons were made to elicit significant associations.

**Results:** A total number of 58 BHT's were retrieved. The mean age was 25.7 (SD=10.97) with a range of 13-58. The number of females was slightly higher ( $n=30$ , 51.7%) and they tended to commit DSH at a younger age (less than 25 years) compared to males ( $p$  value 0.032). The commonest mode of poisoning was paracetamol overdose ( $n=17$ , 29.3%) followed by ingestion of yellow oleander ( $n=10$ , 17.2%).

Psychiatric referral was not done for 35 cases (60.3%). Among them 23 had not had suicidal risk assessments. There was a gender disparity with regards to psychiatric referrals, and males were significantly less likely to be referred ( $p = 0.096$ ). Eight patients left against medical advice and 4 went missing (total of 20.6%).

**Conclusions:** DSH was commoner among young females and drug overdose was the commonest mode of self-poisoning. A majority, especially males, did not receive adequate psychiatric care. Reasons for lapses should be investigated and remedied.

### OP13: Female offenders in a Sri Lankan forensic psychiatry setting

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**Background:** Female offenders are characterized by higher rates of psychiatric morbidity. Studies in developed countries show a rise of female prisoners over the recent years. According to our knowledge there are no studies published primarily on female offenders in Sri Lankan psychiatry units.

**Aims:** To ascertain characteristics of female offenders in comparison to non-offending female patients.

**Methods:** Cases were 71 alleged female offenders admitted during an 18 months period to the only forensic inpatient unit of the country at National Institute of Mental Health (NIMH). Controls were 96 female patients attending an outpatient psychiatry clinic with no prior offending. Data was collected from court reports and bed head tickets. Analysis was done using SPSS. Ethical approval was obtained from Ethical Review committee, NIMH.

**Results:** The mean age of cases was 35yrs (SD-12) and controls 37yrs (SD-11). Among cases 63% of alleged offences were stated as "Mental" and 11% as "Murder". Victims were family members in 63% of alleged physical violence. Most victims were females (56%). Recidivists comprised 47% of cases. Mothers with dependent children amounted to 19% of cases.

Among cases a majority of alleged murderers were diagnosed with schizophrenia compared to other offenders ( $p < 0.01$  at CI 95%).

No significant difference was found between cases and controls regarding the proportion of diagnostic categories. Childhood sexual abuse reported by 22% of cases and 12% of controls ( $p = 0.08$ ). Only 22% had a married partner compared to 41% among controls ( $p = 0.01$ ). Employed cases were 3% and controls 45% ( $p < 0.01$ ). Recent alcohol use was seen among 4% of cases compared to none in controls ( $p = 0.04$ ).

**Conclusions:** Among participants of our study, being single, unemployed and use of alcohol were associated with offending. A diagnosis of schizophrenia was significantly associated with alleged murder. Further research is required to explore these findings.

### OP15: Season of birth and subsequent development of schizophrenia in Sri Lanka

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**Background:** Associations between the season of birth and the development of schizophrenia has been reported by many studies in different countries. Any seasonality effect in Sri Lanka however, has not been studied.

**Aims:** To study any association between the development of schizophrenia and the season in which the birth took place.

**Methods:** A descriptive cross sectional study was carried out on a sample of 684 discharged patients from the National Institute of Mental Health who were treated for schizophrenia. Socio-demographic factors and other details were extracted from records. Each patient was contacted over the telephone to obtain his/her date and place of birth. This resulted in a sub population of 393 whose date and place of birth were available to study the weather patterns. The data was analysed by routine statistical methods and compared with that of the general population and the weather parameters, obtained from the Department of Meteorology.

**Results:** The distribution of births showed two peaks in March and August, whereas no such pattern was present in the general population. When the monthly rainfall is taken into consideration, March and August are comparatively dry, and the highest rainfall is observed in May and October. The rainfall peaks are exactly two months following the birth peaks. The distribution of socio-demographic factors was a reflection of that of the general population, except for sex ratio showing male: female ratio of 3:2, compared to the general population ratio of 1:1. Of the patients in the study, 46.6% had abused substances, and a positive family history of mental illness was present in 42.3%.

**Conclusions:** When compared to general population, the study sample showed a variation in the monthly birth pattern, with peaks in March and August, suggesting an association between the season of birth and later development of schizophrenia in Sri Lanka.

### OP16: Prevalence and associated factors of depression among postpartum mothers in Bope-Poddala Medical Officer of Health (MOH) area

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**Background:** Postpartum depression (PPD) is a leading cause of maternal morbidity. Varying figures for prevalence of PPD have been reported from different countries, ranging from as low as 11% to as high as 42%. However a majority goes undetected and remains untreated. The consequences of untreated PPD are multifaceted, the worst being maternal suicide.

The knowledge of prevalence and associated factors of PPD would be of great importance in developing maternal mental health services and carrying out effective screening programs and early interventions.

**Aims:** The main objective of the study was to find out the prevalence of postpartum depression in the Bope-Poddala MOH area.

**Methodology:** Screening of 141 postpartum mothers in the period of 4-12 month postpartum in the Bope-Poddala MOH area was done using the Edinburgh Postnatal Depression Scale (EPDS). Those with positive results (score of  $> 9$ ), were assessed by a consultant psychiatrist in order to make a clinical diagnosis. Socio-demographic data were collected using an interviewer-administered questionnaire.

**Results:** A majority of the sample belonged to the age group 26-30 years (28.8%), had educational qualifications below O/L (62.2%), were unemployed (81.3%) and were primi mothers (51.8%). Exposure to antenatal stress was found in 5% and pregnancy complications were reported in 7.5% of the sample. The screening test was positive in 16.3%. Psychiatric morbidity was 6.4% and the prevalence of postpartum depression was 5%. Significant associations were found between PPD and positive past psychiatric morbidity, antenatal stress and domestic violence.

**Conclusions:** The prevalence of PPD was below the expected values and significant associations were found with past psychiatric morbidity, antenatal stress and domestic violence. Further studies using larger samples are needed to ascertain prevalence.

### OP17: Non-fatal self-harm in Anuradhapura: recent life events and methods

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**Background:** Self-harm is often be precipitated by life events and the methods people use vary. Reports indicate that methods of self-harm may have changed over years in Sri Lanka with a decline in pesticide poisoning and more people resorting to prescription drugs as their preferred method.

**Methods:** A descriptive study was conducted, using the hospital records of all the inpatients referred to Liaison Service of the Psychiatric Unit, Teaching Hospital, Anuradhapura, over a 2-year period from April 2012 to March 2014.

**Results:** Gender representation in the sample of 288 was equal, with a slight male excess (52%). 49% of the sample was young (24 years or less). Ingestion of oleander seeds was the commonest method (36%) followed up by pesticide poisoning (29%) and prescription drugs overdose (13%). Older patients (40 years or more) were more likely to use pesticide poisoning as their preferred method. Self-inflicted cut injuries and hanging were methods mostly used by males (90%). Interpersonal conflict involving marital/intimate partner was the main stated life event (44%) followed by other conflicts in the family (25%). 8% reported a financial reason for the attempt. In 9% of the cases a life event could not be elicited.

At the time of assessment, only 8% of the sample was found to have a diagnosable psychiatric illness by ICD-10. The ones with mental illness tend to be older.

**Conclusion:** A majority of the non-fatal self-harm events are preceded by interpersonal life events. The subjects are often not mentally ill. Oleander poisoning is the commonest method used, followed by pesticide poisoning.

## OP18: Substance use disorders and their correlates among inmates in a Sri Lankan prison

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**Background:** Studies done in other countries show that substance use disorders are common among prison populations and substance users engage in higher levels of criminal activities than those who do not use substances. Only a very few studies have been done among the Sri Lankan prison population regarding this issue despite its wide psychosocial and economic implications.

**Aims:** To determine the extent of life time and recent substance use disorders and their correlates among minimum and medium security setting inmates in a Sri Lankan prison.

**Method:** In this cross sectional analytical study a semi-structured interviewer administered questionnaire and ICD 10 clinical diagnostic criteria were applied to randomly selected male and female prison inmates who were willing to give written informed consent.

**Results:** Among a sample of 410 inmates 80% were male and 53% were from an urban area. Of the prisoners 75.6% had a lifetime substance use dependence or harmful use while 35% met criteria for current substance use dependence or harmful use. Of the sample, 61% and 67% met criteria for a lifetime alcohol and tobacco dependence or harmful use respectively, and 42.0% and 25.6% had a lifetime cannabis and opioid dependence or harmful use respectively. 71.3% of inmates serving a sentence for murder or attempted murder fulfilled diagnostic criteria for alcohol dependence. Factors significantly associated with lifetime substance use, dependence or harmful use were, male gender, urban residence, younger age and being unemployed or having only a temporary employment. 23% of the drug users were intravenous drug users.

**Conclusions:** High rates of substance use dependence or harmful use found among prisoners, indicating the need for improvement of current health systems both in the community and in the prison setting.

## ABSTRACTS OF POSTER PRESENTATIONS

### PP 01: An audit of safety monitoring of bipolar disorder treatments according to the International Society for Bipolar Disorders (ISBD) consensus guidelines

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**Background and Aims:** To determine the adherence to safety monitoring recommendations for patients with bipolar disorder according to the ISBD guidelines, in the NHSL psychiatry clinics.

**Methods:** A clinical audit was conducted against the ISBD safety monitoring guidelines for medications used in bipolar disorders. Performing the recommended laboratory tests at suggested time intervals for monitoring of each drug and their percentages was used as audit criteria. Data were obtained from patients with confirmed bipolar disease diagnosis, on maintenance treatment for >1year, using clinic and patient kept records.

**Results:** We analyzed 187 patient records. Serum lithium was recorded in 104 out of 135 (77%) patients. Only 16 patients met audit criteria of measuring concentrations 3-6 monthly but 95 (70%) had concentrations recorded in the past year.

Renal function (urea or creatinine) was recorded only in 57 (42%) and only 4 complied with audit criteria of 6 monthly measurements. Electrolytes were measured in 39 (29%) and 29 (21%) met annual measurement criteria. TSH was available in 50 (37%) and 26 (19%) met audit criteria of 6 monthly measurements but 32 (24%) had TSH done in the past year. None had serum calcium concentrations measured.

Valproate was used in 69 and 5 were on carbamazepine but only one had a valproate level. None on these two drugs complied with audit criteria requiring two blood levels to establish therapeutic levels. Liver functions were recorded in 20 (29%) and 13 (19%) complied audit criteria of annual measurements.

Atypical antipsychotics were used in 96 and 16 (17%) had lipid profiles with 10 (10%) meeting annual measurement requirement. FBS was measured in 37 (39%) patients 24 (25%) met audit criteria of annual testing.

**Conclusions:** The safety monitoring of patients with bipolar disease is suboptimal according to ISBD guidelines. Some tests may have been done although not recorded in clinical records, which is a limitation common to any audit using recorded data.

### PP 02: Long-term outcome of children with autism followed up at a specialized clinic at Lady Ridgeway Hospital for Children

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**Background:** Children who are diagnosed with autism face a range of outcomes. Some are reported to have learned speech and/or writing, self-care, and social skills on their own. Others experience an apparently miraculous "recovery" and begin behaving in a way that is generally indistinguishable from the way neurotypical children behave. Some children with autism become mainstreamed after years of hard work and intensive training. Early diagnosis and intervention are consistently seen as the keys to improving a child's long-term future.

**Aims:** To analyse the current state of social, educational, and behavioural outcome of children diagnosed with autism in association to the characteristics of follow up patterns.

**Methods:** Descriptive cross sectional study carried out in University Psychiatry Unit, LRH. Past clinical details were extracted from the clinical records. The current details were gathered through telephone contact. Diagnosed children with autism who have completed at least one year of school were included. An interviewer administered questionnaire was used to collect data.

**Results:** Thirty-five children included in the study. Ages ranged from 6-10 years (mean age 7.88 years). 27 (77.1%) were

males. Of the participants, 45.9% had six follow up visits. 33 (94.3%) were in school; 62.9% were in main stream and only one (2.9%) was not attending school. 42.9% were in their respective grade. Speech development was at an average level with poor mathematical and writing skills. Social skills development remained at a lower level.

**Conclusions:** Most children with autism were well integrated in to school. The school attenders showed average performance in speech and poor performance in math, writing and social skills. Most common long-term side effects were hyper-salivation and constipation. A majority of patients with hyper-salivation were not receiving medical intervention. A majority of patients did not report that the side effects affect their activities of daily living or that they caused personal distress.

### PP 03: Complex partial seizure with automatism associated with violence

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**Background:** Epilepsy has long been an important clinical entity for the forensic psychiatrist because of its effects on consciousness which may be associated with offending such as automatism. Lack of recent studies reporting data on violent or aggressive automatisms suggests a decline in interest in this interesting clinical phenomenon, perhaps due to the rarity of the cases.

**Case:** Mr. B.D.N, was a 38 year old male who had been taking medication continuously for complex partial seizures for the past two years. He was admitted to the forensic unit through the Magistrate's Court Kurunegala, with an alleged offence of an assault. About one week prior to the admission he has been in the village temple playing with a rubber snake where he had an argument with a monk of his same age. At that time the argument went far and then he could only remember the way he left the temple. There was a memory gap where he could not remember what had happened to him or how the argument ended. Later he came to know that he had assaulted the monk which led him to be arrested by the police. He has a past history of aimless running and aggressive behavior and attempts of self-harm for which he had no awareness. His mental state examination and cognitive functions did not reveal any abnormality. His physical examination and investigations were normal.

**Discussion:** Automatism in seizure disorders is a clinical diagnosis. Determining whether a behavior is truly is an automatism is subject to interpretation. Routine workup for all patients should be done though most of the time, the results would be normal. Understanding this clinical entity would be very important to avoid diagnostic confusion, which eventually has legal implications.

### PP 04: Rapid cycling bipolar affective disorder in adolescents

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**Background:** Bipolar affective disorder has a more severe course in adolescents, with mixed episodes, rapid cycling and ambiguous presentations.

**Case reports:** A 14 year old girl presented with two weeks' history of poor sleep, pacing about and muttering to self. Acute polymorphic psychotic disorder was diagnosed and risperidone 2 mg nocte prescribed. Two weeks later she was admitted with aggressive behaviour, trying to run off and attempting to jump from upstairs in anger. Symptoms settled with risperidone 2 mg bd. Full blood count, ESR, urine full report and MRI brain were normal. Three weeks after discharge she developed dancing, disinhibited behaviour, laughing aloud and easy distractibility. A diagnosis of bipolar affective disorder was made and risperidone was adjusted to 2mg mane and 4mg nocte. She was well for a further 4 weeks when symptoms recurred. Sodium valproate was added and she was stable at follow up.

A 13-year old girl was transferred with a severe depressive episode with suicidal ideation for two weeks, poorly responding to fluoxetine and risperidone. She had a history of a similar episode two months ago when she revealed repeated molestation by a neighbour. Two weeks later she developed singing, irritability and overspending. She had three further episodes within the next month, prior to presentation to our unit. She was diagnosed as rapid cycling bipolar affective disorder. Her basic investigations were normal. Her symptoms responded in two weeks after which she became overtalkative, overfamiliar and aggressive. Fluoxetine was withdrawn and sodium valproate added to risperidone. As symptoms persisted, lithium carbonate was introduced. She was stable one month later.

**Discussion:** These cases illustrate the ambiguous nature of initial symptoms in adolescents with bipolar disorder and the propensity for rapid cycling. Early recognition, caution in using antidepressants and addition of mood stabilizers is important to ensure satisfactory control.

### PP 05: A descriptive study on patterns of presentations to a child mental health clinic at Lady Ridgeway Hospital

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**Background:** Globally, epidemiological studies suggest that the most common child psychiatric disorders are conduct/oppositional disorders, emotional disorders, attention deficit hyperactivity disorders and affective disorders. However, epidemiological prevalence does not translate to service utilization. Thus, study of the patterns of presentation to child psychiatric services is useful in developing child psychiatric services that are sensitive to the mental health needs of the Sri Lankan population.

**Aims:** To describe the socio-demographic background, patterns of diagnosis, modes of referral and pharmacological and non pharmacological interventions in patients presenting to a child mental health clinic at Lady Ridgeway Hospital.

**Methods:** A cross sectional descriptive study was done on all patients attending the child mental health clinic at Lady Ridgeway Hospital from January to December 2012.

Data was collected retrospectively by reviewing clinic records, using an interviewer-administered checklist. SPSS version 19 was used for data analysis.

Ethical clearance was obtained from the ethical clearance committee at Lady Ridgeway Hospital.

**Results:** A total of 1106 patients had attended the child mental health clinic during the year 2012. The most common age group was between 8 to 10 years (24.7%). A majority (69.3%) were males. Children from 24 districts presented to the clinic, of whom less than half (48.2%) were from the Colombo district. A majority (44.2%) were referred from the outpatient department. The commonest diagnosis was Attention Deficit Hyperactivity Disorder (25.2%), followed by Mental Retardation (17.3%) and Autism Spectrum Disorders (14.0%). Comorbidity was seen in 18.9%. Only 38.1% were prescribed medication while 44.6% required the services of the speech therapist, occupational therapist and/or the psychiatric social worker.

**Conclusions:** There is a need for service development in centers other than Colombo as a majority (52.8%) was not from the Colombo district. A multi-disciplinary approach has to be adopted, as a significant proportion (44.6%) required these services.

### PP 06: Private sector pharmacy dispensing patterns for generic prescriptions of fluoxetine and risperidone: a survey from 5 locations in Sri Lanka

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**Background:** The crucial element that restricts access to medicines is pricing. Generic drugs provide the opportunity for major savings in healthcare expenditure since they may be substantially lower in price. However when a generic drug is prescribed patients can receive the same drug under different brand names.

**Aims:** To compare the brands and costs for fluoxetine and risperidone dispensed when a generic prescription is presented to the pharmacy.

**Methods:** Pharmacies within the city limits (1km radius) of 5 urban locations were evaluated. A generic prescription for fluoxetine 20 mg mane and risperidone 2 mg nocte for 5 days was presented and the dispensed medications were purchased and analyzed for the brands and costs incurred.

**Results:** Sixty five pharmacies were visited (Kandy-26, Kurunegala-16, Anuradhapura-12, Mahiyangana-6, Puttlam-5). Five brands of fluoxetine and four brands of risperidone were dispensed.

Price of a Fluoxetine 20mg capsule ranged from Rs. 1.72 to Rs. 30.00 whereas that of Risperidone was from Rs 1.15 to Rs. 23.00.

For both the medications a majority received branded products. Generic of risperidone was dispensed only in 12% of instances. Generic fluoxetine was dispensed in 27% of instances. Combined monthly cost for the medications ranged from Rs 86.10 to Rs 1202.40.

A majority received one brand of risperidone which was dispensed in 71% of instances. Except on 2 occasions in Anuradhapura, each brand was sold at or around a fixed price. The least number of generics was dispensed in pharmacies in Kandy.

**Conclusions:** The possibility of receiving a branded risperidone or fluoxetine for a generic prescription is high.

#### PP 07: Prevalence of co-morbid alcohol and other substances of abuse among patients with schizophrenia attending a psychiatry unit at a Teaching Hospital

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**Background:** It is established that patients with schizophrenia have a high prevalence of substance abuse. However there is a scarcity of published data for Sri Lanka.

**Aim:** To describe the demographic details of patients with schizophrenia, to determine the prevalence of dependence of alcohol and other substances, and to identify the harmful consequences of substance abuse.

**Method:** This was a descriptive study. Patients diagnosed with schizophrenia who attended the psychiatry clinic at Colombo South Teaching Hospital during a period of one month were included. An interviewer-administered questionnaire was used.

**Result:** The sample consisted of 57 patients out of which 50.9% (n=29) were males. At present 29.8% (n=17) were abusing at least one substance out of which 88.23% (n=15) were males. Alcohol consumption was 19.29% (n=11), tobacco 17.54% (n=10), beetle 12.28% (n=7), cannabis 3.5% (n=2) and other substances 1.75% (n=1). Heroin was abused in the past by 1.75% (n=1). Dependence for at least one substance was 10.52% (n=6) with tobacco dependence being 7% (n=4), beetle 5.26% (n=3) and alcohol 1.7% (n=1). All dependent patients were males. Of the dependent patients 50% (n=3) were married. A majority (83.33%, n=5) were employed. Dependence was significantly associated with living away from family (p< 0.001). Harmful consequences were reported by 70.6% (n=12) including emotional distress 29% (n=5), family issues 17.4% (n=3), problems at work 11.76% (n=2), physical harm 5.8% (n=1) and sexual difficulties 5.8% (n=1).

**Conclusions:** There was a significant prevalence of substances abuse, most commonly alcohol and tobacco. Dependence was higher for tobacco and beetle. But prevalence rates were lower than in international literature. A majority reported harmful consequences. This highlights the importance of addressing the issue of substance abuse in these patients.

#### PP 08: Diabetes mellitus, BMI and waist circumference in patients treated with clozapine

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**Background:** An independent link between schizophrenia and diabetes has been observed. Treatment with clozapine is an established risk factor for the development of diabetes. Although Sri Lanka has a high prevalence of diabetes in the general population, data regarding the prevalence in patients' taking clozapine is scarce.

**Aims:** To determine the prevalence of diabetes mellitus in patients taking clozapine and to identify the correlation between BMI, waist circumference, clozapine dose and duration between diabetics and non-diabetics.

**Method:** Patients attending the specialized outpatient clinic of ward 59, NHSL currently on clozapine as the sole antipsychotic were recruited. A fasting plasma glucose was done on all patients. Diabetes was diagnosed according to American Diabetes Association criteria when fasting plasma glucose was >7.0mmol/L. Waist circumference and BMI were calculated using standardized tools. An interviewer-administered questionnaire was used to ascertain socio-demographic data. Informed consent was obtained from all patients.

**Results:** The total study population consisted of 73 patients of whom 58.9% were males. Mean age was 37.81 years (SD = 8.85). The mean duration of clozapine treatment and dose of clozapine were 73.45 months and 321.51 mg/day respectively. Mean fasting blood glucose level was 5.31 mmol/L. The mean BMI and waist circumference were 20.48 kg/m<sup>2</sup> and 69.29 cm respectively. 18 patients were being treated for diabetes at the time of recruitment. 8 patients were newly diagnosed. The prevalence of diabetes was 35.6%. A significant difference was seen between the diabetic and non-diabetic group with regards to clozapine dose (p=0.001) and duration (p=0.0001) however no significant difference with regards to waist circumference (p=0.246) and BMI (p=0.742) was seen.

**Conclusions:** The prevalence of diabetes was 35.6% compared to 10.3% in the general population. In this cohort of patients on clozapine, the expected waist circumference and BMI disparity among diabetics and non-diabetics were not evident.

#### PP 09: A case report on neuropsychiatric consequences of barotrauma in a navy sailor

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**Background:** It is known that the increased hyperbaric pressure influences the nervous system during deep dives. Decompression syndrome, type 2, is associated with systemic dysfunction, presenting with cardiovascular involvement, neurological features like paraplegia, vestibule cochlear dysfunction and bladder dysfunction or psychiatric sequelae.

**Case report:** This 21 year old navy sailor presented with neuropsychiatric consequences following type 2 decompression illness. He was not exposed to recompression chambers immediately.

**Conclusion:** People who experienced decompression syndrome should be exposed to immediate recompression and administration of oxygen. Although Sri Lanka has many occupational fields that involves deep diving, up to now this type of presentation was not reported. The clinicians and relevant authorities must be aware of these consequences of diving.

#### PP 11: Satisfaction of parents and children on treatment for attention-deficit hyperactivity disorder with methylphenidate

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**Background:** Attention Deficit Hyperactive Disorder (ADHD) is a neurodevelopmental disorder that can continue throughout life. Stimulants are recommended as the first line of treatment. Stimulants have proven more effective in reducing the symptoms of ADHD in comparison to placebo.

Due to the core symptoms of the illness and the associated social and academic impairment, significant decrement in health related quality of life is documented in both the patients and carers. Methylphenidate with its ability to control the symptoms of ADHD has shown benefit in improving behavioural, academic and social spheres of life. Data regarding satisfaction with medication in parents and patients is not studied in Sri Lankan context.

**Aims:** To describe the satisfaction of parents and children with methylphenidate as a treatment method for attention-deficit hyperactive disorder.

**Methods:** This was a descriptive cross sectional study. The sample comprised of all consecutive children on methylphenidate for more than six months who were followed up at child and adolescent psychiatry clinics over a period of 3 months. An interviewer-administered questionnaire consisting of 12 items to assess satisfaction was used to collect data.

**Results:** The sample comprised of 100 children. Sixty-five were males. The mean current age was 10 years 3 months. The mean age of commencing methylphenidate was 7 years and 8 months (range 5-15 years). Twenty-eight (28%) parents were dissatisfied with the duration of the medication's effect. Sixteen children (16.8%) were dissatisfied about their ability to get along with family with the drug. Ninety-three (93%) parents expressed overall satisfaction. Seventy-nine (83.1%) of children expressed overall satisfaction with the drug.

**Conclusions:** The least satisfactory aspect of methylphenidate usage reported by parents was the duration of effect. The least satisfactory aspect reported by children was getting along with family after usage of the medication. Reported overall satisfaction was higher among parents than children.

#### PP 12: Prevalence of depressive disorder among patients attending the out patients department (OPD) of National Hospital of Sri Lanka

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**Background:** Studies have found that depression is commoner among patients presenting to primary care units. Depression is not detected in many such patients.

**Aims:** To identify the prevalence of depressive disorder among the patients who attend medical OPD, NHSL

**Methods:** A cross sectional study was carried out at Out Patients Department (OPD) of National Hospital of Sri Lanka. Every 5th patient aged 18-60 years who attended the OPD during the study period was recruited to the study. Repeated

visits were excluded. Sample size was calculated to detect a prevalence of 14%. Center for Epidemiologic Studies Depression scale (CES-D) validated for Sri Lanka, was used to assess symptoms of depressive disorder.

**Results:** The sample consisted of 205 patients. There were 114 (55.6%) females. The mean age was 50.02 (SD 13.68) years. 122 (59.2%) were resident in the Colombo district and 54 (26.3%) in the Gampaha district. Presenting complaints included bodily pain or headache 79 (38.5%), respiratory problems 24 (11.7%), fever 10 (4.87%), rash 15 (7.31%) and others 77 (37.56%). The prevalence of depressive disorder was 22.44% (95%CI 16.68-28.20). Of this 7.3% had mild-moderate depression and 15.1% had severe depression. The prevalence in females was 25.44% (95%CI 17.32-33.56) and males 18.68% (95%CI 10.52-33.56). Risk of depression in patients with pain complaints was higher compared to those with other complaints (OR 1.8; 95%CI 0.97-3.67).

**Conclusion:** Prevalence of depressive disorder was 22.4% and 15.1% had severe depression. Rates were higher in females and those presenting with complaints related to pain.

### PP 13: A case of acute psychosis following dengue haemorrhagic fever

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**Background:** Dengue is a common mosquito borne infection in the tropical world, and it is the most common arboviral disease globally. It is currently considered as one of the major health problems in Sri Lanka. In addition to classical hematological manifestations, atypical manifestations of dengue are occasionally encountered. Psychiatric manifestation is one of these and it is a relatively rare phenomenon. There are a limited number of case reports globally reporting mania and acute psychosis following dengue. Case reports on mania are relatively more common compared to acute psychosis. Interestingly, Thailand, the country with the highest prevalence of dengue, has no reports of either mania or psychosis among dengue patients. To our knowledge, no cases of psychosis following dengue have been reported in the Sri Lankan literature.

**Case report:** A 13 year old boy with no past history or family history of psychosis was referred to the psychiatry unit, with a history of altered behavior for two days. He was treated for dengue hemorrhagic fever in the medical ward for one week at CSTH and discharged 2 days prior to the onset psychiatric symptoms. Psychiatric symptoms appeared about two weeks after the onset of fever and after a 6-day fever free period. On the 3rd day following the discharge, his speech had become reduced, he became suspicious and fearful and had complained that people were planning to kill him. On examination, he showed hallucinatory behavior and he was suspicious and fearful. His speech was reduced, mood was blunted, he had persecutory delusions, delusion of reference and second person auditory hallucinations. He was oriented in time place and person, but his attention and concentration were reduced. CT, EEG and CSF studies were normal. He was commenced on risperidone and responded well to risperidone 2mg nocte within about 5 days of treatment. He continued to improve and was stabilized at a rispidone dose of 4mg nocte and was followed up in the clinic.

**Discussion:** Association between dengue and psychiatric manifestations is not well understood. It could be a comorbidity or a co-occurrence. There could be other psychiatric manifestations which are overlooked in many dengue patients. Further research is needed to assess these psychiatric manifestations, as dengue is a common health problem in Sri Lanka.

### PP 14: Relationship of the onset of Obsessive Compulsive Symptoms (OCS) to initiation of antipsychotics in patients with schizophrenia

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**Background:** Emergence of obsessive compulsive symptoms (OCS) has been recognized after treatment with atypical antipsychotics. Identifying the association of OCS with antipsychotics used, may help clinical decision making.

**Aims:** To determine the association between onset of OCS and types of antipsychotics used to treat schizophrenia.

**Method:** This was a descriptive study carried out at the psychiatry clinic at Colombo South Teaching Hospital, from 1st December 2014 to 7th January 2015 on all patients diagnosed with schizophrenia. A semi structured clinical interview and questionnaire was used to obtain data.

**Results:** The study sample consisted of a total of 60 patients diagnosed with schizophrenia, out of which 51.6% (n=31) were males. The mean age of patients was 42.9 years (SD = 14.35). Twenty-one (35%) of the patients were found to have clinically significant obsessions and compulsions. The mean duration of OCS was 74.23 months (SD=50.7). Nine patients (42.85%) had developed OCS before the onset of schizophrenia while the remainder 57.15% (n= 12) have developed OCS after the onset of schizophrenia. Out of the patients whose OCS had emerged after the onset of schizophrenia, 25% (n=3) have developed OCS before starting antipsychotics while 75% (n=9) developed OCS after starting antipsychotics. The types of antipsychotics given at the time of emergence of OCS were as follows: Clozapine 44.4% (n=4), other atypical antipsychotics 44.4% (n=4), and typical antipsychotics 11.2% (n=1).

**Conclusions:** A majority of patients have developed OCS after the onset of schizophrenia and most after the commencement of antipsychotics mainly clozapine and other atypicals. The result of this study was similar to other studies reported in international literature.

### PP 15: Descriptive study on administration of Electro Convulsive Therapy (ECT) in a University Psychiatry Unit, National Hospital of Sri Lanka

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**Background:** ECT is a treatment method used by psychiatrists for many decades. It is effective and the recovery is quick. Audits on practice of ECT have shown deficiencies in meeting expected standards.

**Aims:** This study aims to describe the ECT practice in the University Psychiatry Unit, NHSL in relation to demographic factors, clinical parameters such as indication, diagnosis, number of ECTs administered, and trends of ECT use.

**Methods:** A cross sectional descriptive study design was used. Clinical records of all the patients treated with ECT were assessed from 1st August to 30th November 2014. Data collection was done using a specifically designed instrument. Data analysis was done using IPSS.

**Results:** A total of 51 new patients received ECT during the period. The total number of ECT sessions were 279. Of these patients, 45.09% fell within the age categories of 51-60 years or more than 61 years. Most of the patients were female (64.8%). The commonest diagnosis was depression (64.7%). The most common indication for ECT was non-response to other treatments in depression (35.2%). Out of the patients who improved (n=32), the mean number of ECT received was 6 (SD 2.4). Bilateral electrode placement was used in all the patients. Almost half (45.09%) received less than 50% threshold and 13.7% received more than 100%. In 62.7% the patient's ECT was stopped following clinical improvement.

**Conclusions:** The male:female ratio was 1:2. The commonest diagnosis was depression, while the commonest indication for ECT was inadequate response to other treatment. Many patients received ECT as day patients. The mean number of ECT received for a clinical response was 6 (SD 2.4). A significant number of patients needed high doses of ECT. Nearly 2/3 had a good response. Though the number of new patients did not increase over the months, the total sessions per month increased, indicating more maintenance ECT.

### PP 16: A case of amnesic syndrome in a patient with a past history of transient ischaemic attacks

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**Background:** The commonest cause of amnesic syndrome is Korsokoff syndrome. However there are other important causes of amnesic syndrome such as vascular disorders, severe hypoxia, head injury and herpes encephalitis.

**Case Report:** A 55 year old female account clerk with a past history of ischaemic heart disease and transient ischaemic attacks, presented with sudden onset memory impairment preceded by a severe headache. On examination she was found to have disorientation in time, retrograde and anterograde amnesia with intact long-term memory and other cognitive functions. There was associated confabulation and unawareness of the degree of impairment by the patient (anosognosia). Magnetic resonance imaging (MRI) revealed multiple lacunar infarctions involving deep periventricular areas. Echocardiogram was done to rule out any cardiac foci of emboli. She was started on antiplatelets and cognitive rehabilitation. She had to resign from her job since it involved handling cheques and other legally important documents. Follow up at three months revealed that her symptoms remained stable.

**Methods:** A retrospective study was carried out at the University Psychiatry Unit, National Hospital of Sri Lanka. All patients registered in the early intervention clinic during the year 2013 were included. Data was extracted from the clinic records. Data was analysed using SPSS.

**Results:** The sample size was 117. Of the participants, 111 (94.9%) children presented with speech problems, 57 (48.7%) had speech regression, 75.9% (n=88) had solitary play, and 54.7% scored a severe symptom level according to the CARS. (Childhood Autism Rating Scale, second edition). Food fads were present in 27.5% and sleep disturbances were present in 17.8% (n=21). 21.2% (n=25) attended the clinic only once. There was no clinical association between the CARS rating and the number of attendance.

**Conclusions:** The commonest presentation was speech abnormalities. Most attended the clinic only for one session and there was no significant association between the frequency of attendance and severity of illness. The majority presented with severe symptoms.

### PP 31: Expectations of carers attending an adolescent long term follow up clinic at National Hospital of Sri Lanka (NHSL)

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**Background:** The Adolescent Clinic at NHSL (Room 18) caters to the psychological needs of patients between the ages of 12-25 years. The clinic comprises of patients who register as new patients and also patients from Lady Ridgeway Hospital for Children who have completed 12 years. Some of the patients seen at this clinic have neurodevelopmental disorders which require psychological care for long durations. There are new issues which arise with the onset of adolescence and the aging of the carers. There are only few service providers who are able to cater to this group of patients and it is usually the family members who provide services daily.

**Aims:** To determine the demographic features, clinical diagnosis, provided treatment modalities and monitoring and the expectations of the carers attending a long term follow up adolescent clinic.

**Methods:** A descriptive cross sectional study was carried out at the University Psychological Medicine Unit, NHSL. All consecutive patients who have been treated for more than three years in the clinic during the period of August-December 2014 were included. An interviewer administered questionnaire was used to collect data.

**Results:** The sample size was 42. The mean age at registration was 10.9 years (range 3-17). The current age range was 13-27 years. 16.7% (n=7) was diagnosed with ADHD. Patients were followed up from 3-19 years with a mean of 8.05 years. 97.6% (n=41) were on medication and 88% were reviewed four weekly. Twenty-six (n=61.9) patients has not had relevant investigations done during the past one year. The parents' short term goal was for symptom reduction in 26.2% and the long term goal in 42% was for the development of independent living abilities.

**Conclusions:** The most common diagnosis was ADHD and treatment was continued for over 8 years. The commonest treatment modality was pharmacological treatment and the parents' expectation was for symptom reduction.

### PP 32: Patients with medically unexplained physical symptoms referred to a Sri Lankan tertiary hospital, psychiatry unit: a descriptive study

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**Background:** Medically unexplained physical symptoms (MUPS) are commonly seen in hospital practice, and can include anxiety disorders, chronic pain, and complaints of multiple symptoms. The epidemiological characteristics in MUPS can be diverse. It is necessary to have an understanding of the nature of this illness in the Sri Lankan setting.

**Aims:** We calculated the prevalence of MUPS among patients referred, and epidemiological data was obtained. The concordance with management offered from the psychiatry services among patients with MUPS was assessed.

**Method:** We reviewed records of in-ward patients referred to the University Psychological Medicine Unit, National Hospital of Sri Lanka, over a six-month period in 2014. Patients, whose primary presenting symptom was physical, with no diagnosis given in the treating medical unit, were considered for the study. Those whose symptoms were minor in nature and had appeared in direct and immediate response to psycho-social stressors, somatic symptoms which presented together with depressed mood, and patients on follow-up for psychiatric illness were excluded.

**Results:** A prevalence for MUPS of 7.5% (n=114) was found. 79 (69%) were females. The most frequently represented age range was 20-29. 78 (68%) were referred from medical wards. The most frequent complaint was "multiple somatic complaints" (24%), while headache and other pain complaints represented 16% and 18% respectively. The modal duration of symptoms was one month, while a majority (76%), were functional. The most frequently made diagnoses were anxiety and stress related disorders (50%), while 11% were found to have no psychiatric diagnosis. Although a higher percentage of those prescribed psychotherapy were concordant with management (76%), compared to pharmacotherapy (50%), this was not statistically significant (P=0.08).

**Conclusions:** The prevalence found in our study is similar to the prevalence of 11.8% found in a previous study in the same centre. However it is in marked contrast to a hospital out-patients study which gave a prevalence figure of 52%, and that in a general practice with a figure of 3%. A preponderance of young females, maintenance of functionality, and a preponderance of somatic symptoms have been found by other investigators. In our study patients were more compliant with psychotherapies.

### PP 33: Prevalence and stigma towards depression and factors associated with stigma towards depression among final year medical students at University of Sri Jayewardenepura

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**Background:** Depression among medical students is higher than in the general population, which is detrimental to their academic performance and quality of life. Despite easy access to healthcare, there is poor utilization. Numerous causative factors have been identified, of which stigma is a main factor.

**Aims:** To determine the prevalence of depression and level of stigma towards depression among final year medical students at the University of Sri Jayewardenepura.

**Methods:** This cross sectional descriptive study assessed 59 final year medical students selected by convenient sampling method, using a self-administered, pre-tested questionnaire. The presence of depression was assessed using Patient Health Questionnaire-9 (PHQ9). A score of above 10 was considered positive for major depressive disorder. Stigma was assessed using questions in areas of attitude, knowledge and behaviors towards people with depression. Associated factors were tested for statistical significance using independent t test. A p value less than 0.05 was considered as statistically significant.

**Results:** The mean age of the sample was 24.7 years. A family member had a mental illness in 4 (6.8%). Prevalence of depression was 28.8%. Unfavorable attitudes (n=59; 100%), lack of knowledge (n=43; 72.9%) and stigmatizing behaviors (n=51; 86.4%), which indicate the presence of stigma, were high among students. The presence of depression was significantly associated with high level of stigma towards depression (p=.0031). The presence of mental illness in a family member was not significantly associated with level of stigma.

**Conclusions:** The prevalence of depression was high among the study sample. Students overall had a high level of stigma. Further studies are required to determine the causes and associated factors. High prevalence of stigma towards depression needs to be addressed.

### PP 34: Adherence to current treatment recommendations in initiation of clozapine: an observational descriptive study at Colombo South Teaching Hospital

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**Background:** Clozapine is the only drug treatment currently licensed for patients with treatment-resistant schizophrenia. The National Institute for Health and Clinical Excellence (NICE) guidelines published in 2002 recommend that clozapine should be offered at the earliest opportunity for patients with treatment resistant schizophrenia. However a delay in commencement of clozapine has been noted due to perception of clozapine as a dangerous drug, despite clozapine having the least mortality compared to other antipsychotics. Thus delay in initiation of clozapine and the use of polypharmacy of antipsychotics is seen in clinical practice.

**Aims:** To audit the delay in initiation of clozapine treatment, the use of different antipsychotic medications and antipsychotic polypharmacy prior to commencement of clozapine against current recommendations in NICE guidelines.

**Methods:** A retrospective audit of clinic records was done in all patients registered in the clozapine clinic. Patients diagnosed prior to 2002 (the year NICE guidelines were published) and patients with incomplete records were excluded.

**Results:** Out of 75 patients registered at clozapine clinic, 20 patients were included in the study who fulfilled the inclusion criteria and with complete records. 45% of the sample was females and 55% was males. The mean age of the sample was 29.6 years. Antipsychotic polypharmacy was noted in 40% of the sample prior to clozapine initiation. It was observed that olanzapine, risperidone and haloperidol (90%, 70% and 25%) were the commonest drugs prescribed prior to clozapine initiation. The mean theoretical delay of clozapine initiation was 38.75 months (SD=22.72 months).

**Conclusions:** There is a considerable delay in commencing clozapine and a high level of polypharmacy in patients with treatment resistant schizophrenia. A protocol will be introduced to reduce this delay with the view of re-auditing in one year.

### PP 35: Cross-cultural validation of the Sinhalese version of the Liebowitz Social Anxiety Scale (LSAS-SR): study of the items and internal consistency

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**Background:** Social anxiety disorder is a highly prevalent mental illness. Lack of awareness of the illness and confusion with shyness often contributes to under-diagnosis and treatment. Recent developments of validated screening tools have enabled better diagnosis and care. While there are several validated screening instruments in English, there is a lack of such tools in Sinhalese. The Liebowitz Social Anxiety Scale (LSAS-SR) is the most widely used instrument to screen for social phobia, documents fear and avoidance symptoms, as well as evaluates the benefits of treatment.

**Aim:** To evaluate the test-retest reliability and internal consistency of LSAS-SR, which was translated into Sinhalese and culturally adapted for use in Sri Lankan population.

**Method:** The process of translation and cultural adaptation followed established process of involvement of bilingual professionals and back-translation by experts. A pilot evaluation with independent validation was conducted and standard psychometric procedures were used to evaluate test-retest reliability, and analysis of items for internal consistency. The subjects were 871 Sri Lankan university students who exhibited minimal or no change in Clinical Global Impression Scale (CGI) on two consecutive visits.

**Results:** Pearson's correlation coefficient was 0.998, 0.998 and 0.994 for fear subscale, avoidance subscale and total score respectively ( $p \leq 0.01$ ). Item 16, related to the fear and avoidance of speaking up at a meeting as the most frequently scored item on both subscales. Cronbach's alpha for each individual item of the fear and avoidance subscales with the total score for each subscale was 0.753 and 0.752 respectively. Cronbach's alpha of total score of each sub scale with the total score of LSAS-SR was 0.722.

**Conclusions:** These findings confirm that the Sinhalese version of LSAS-SR has similar reliability, validity and consistency as the original instrument and is likely to be an effective and useful tool for use in Sri Lanka.

### PP 36: Characteristics of substance abusers seeking medical care from a substance clinic, psychiatry unit of National Hospital of Sri Lanka

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**Background:** Substance dependency refers to a physiological state of neuroadaptation produced by repeated administration of a drug. Data regarding prevalence, demographic factors, causal factors, reported motives are sparse in Sri Lanka.

**Aims:** To describe the demographic characteristics, motives and treatment strategies in patients referred to the substance clinic, psychiatry unit of National hospital Sri Lanka.

**Methodology:** A descriptive study was carried out prospectively over 3 months. Patients referred to the substance clinic were given an information sheet and a consent form and a doctor filled the questionnaire. Details were recorded and converted to percentages after analysis.

**Results:** Forty five patients agreed to participate in the study. All met ICD 10 criteria for dependence. The sample consisted of 44 males and one female. The highest percentage was between 30-40 years of age (29%). Most were Sinhalese (68%) and were married (53.3%). The highest number was from Colombo (60%). Most of these patients' education level was between grade 5 to 10 (44.4%). Only 26% had completed O/L. The commonest substance of abuse was alcohol (62.2%), followed by heroine (35.5%). Cannabis and nicotine were abused by 24.4% and 44.4% respectively. Around 44.4% abused more than one substance. There were no cocaine abusers in the sample. A psychiatric illness was diagnosed in 16% (n=16) and the commonest diagnosis was depression 37.5% (n=6). Other diagnoses were antisocial and borderline personality disorder, schizophrenia, delusional disorder, conduct disorder, GAD, social phobia and OCD. Most spent 500-1000 Rs per day (35%). According to the stages of motivation described by Prochaska and Diclemente, 44.5% were in the precontemplative stage, 44.5% in the contemplative stage, and 11% in the action stage. Most patients preferred psychological management for maintenance of abstinence.

**Conclusions:** Characteristics of this sample exemplify the complex nature of patients entering outpatient treatment programs. Implications of these findings are discussed in terms of treatment needs, challenges, and prognosis.

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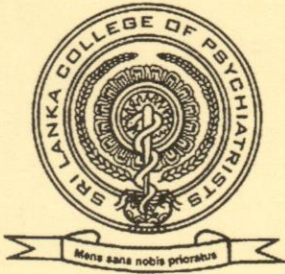
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