

and to determine the effects of sociodemographic and disorder related factors on sexual functions.

Method: In a national based survey, 827 patients from 50 centres were evaluated by Clinical Global Impression of Severity (CGI) scale, UKU side effects rating scale, The Arizona Sexual Experience Scale (ASEX; for males and females).

Results: Sixty six % of the patients were male (mean age: 33.1±7.4 years). Mean schizophrenia duration was 8.7±6.3 years. Disorder severity was mild (39.8%) to moderate (34.3%). No questions about their sexual life were asked to 72.3% of patients during previous psychiatric examinations. While 45.9% of the patients found their sexual life adequate before schizophrenia this ratio declined to 16% after the disorder; the percentage of patients who found their sexual lives inadequate increased from 15.7% to 37.2% ($p < 0.001$). Total scores (TS) of ASEX was 19.1±6.4 for women, and 16.0±5.1 for males ($p < 0.001$). Patients from higher income group had significantly lower ASEX-TS (14.7±4.9) compared to low or medium income groups (17.4±5.9 and 17.1±5.7, respectively). ASEX – TS of patients using TA (haloperidol, chlorpromazine, zuclopenthixol), atypical antipsychotics (AA) (quetiapine, risperidone, clozapine and olanzapine) and TA+AA were 17.9±6.2, 16.9±5.6 and 17.6±5.6, respectively. The ASEX-TS of males using TA (16.6±5.7), AA (16.6±5.7) and TA+AA (17.5±4.7) antipsychotics were different ($p = 0.042$). The ASEX-TS of patients using risperidone (17.7±5.6) tend to be higher than other AA users. This tendency was most prominent when compared risperidone to quetiapine ($p = 0.022$). The TS of males using risperidone was significantly higher than quetiapine and olanzapine groups ($p = 0.001$, $p = 0.015$, respectively). With regression analysis, (independent variable: ASEX-TS and dependent variables: disease duration, CGI score, age, cigarette number, education level, TA/AA drugs, hospitalization numbers and gender), only gender ($B = -3.017$; $p < 0.001$) and CGI scores ($B = 0.102$; $p = 0.004$) were observed to have effects on ASEX-TS. According to UKU side effect scale, weight gain was observed more pronounced in TA antipsychotic group than in AA and TA+AA groups ($p < 0.001$).

Conclusion: Having a high percentage of patients (72%) not questioned about their sexual functions, indicates that psychiatrists underestimate the sexual dysfunctions in schizophrenic patients. There is no difference between the patients ASEX-TS using TA or AA drugs. In males, combination of TA+AA drugs deteriorates the ASEX-TS. Risperidone seems to have more negative effects on sexual functions compared to other AAs. In conclusion, sexual functions of schizophrenic patients should be questioned during patient visits. In addition, while selecting medications for long term therapies of schizophrenic patients, the effects of medications on sexual life should be considered, in order to increase the compliance and the quality of life of patients.

P.8.078 Neuroprotective effects of vitamin C on injured hippocampal neurones by impulse noise: experimental study

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Purpose: Intense impulse noise can damage the neurons of the hippocampus, cerebral cortex and hypothalamus. These pathologic

entities may be responsible for serious behavioral and mental disorders in exposed to impulse noise survivors. Also, believed that vitamin C has a neuroprotective effects via its' antioxidant properties. The aim of this study was to evaluate neuroprotective effects of vitamin C on injured hippocampal neurons.

Methods: Fourteen hybrid rabbits were exposed to 90 dB impulse voice (which listening at various social activities) at doses of 5×60 min/day in an equal time intervals for two months. Only half of these animals supplemented with vitamin C and the others feeded with standart foods. After two months, all animals were sacrificed under general anesthesia and their brains were fixed with % 10 formaline solution. Later, 5 µm hippocampal sections were taken and stained with H&E. Physical dissector method was used to evaluate the numbers of living and degenerated neurons in each hippocampus. Numerical density of neurons and nuclear height were measured. The results were analysed by statistically.

Results: The numerical density of neurons and nuclear height in the hippocampus in vitamin C group was 15.9 mm³ and 4.8 nm. In contrast, in the non-treated group had a neuronal numerical density of 12.50 mm³ and a nuclear height of 3.0 nm. There was a significant difference in both the mean density of neurons and the mean height of nuclei between vitamin C-treated and control groups ($p < 0.05$).

Conclusion: Exposure to intense impulse noise may cause hippocampal injury and vitamin C treatment has important neuroprotective effects on the injured neurons resulted from impulse noise.

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P.8.080 Disturbed leptin, insulin and glucose interactions in eating disorders

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Objective: Anorexia nervosa (AN) and bulimia nervosa (BN) are syndromes of unknown etiology. They are associated with multiple sociological, psychological and biological factors. In the multimodal etiological approach of eating disorders the different endocrine abnormalities have important roles. Among others in the focus of interest are leptin and insulin and their effect on food intake and energy homeostasis. By binding to specific receptors in the hypothalamus leptin plays role in the body weight homeostasis, but it is involved in quite diverse physiological functions, such as reproduction. The aim of our study was to investigate the interaction between leptin, insulin and glucose metabolism by measuring the changes of plasma leptin, insulin and C-peptide concentration during glucose tolerance test and their correlation with BMI.