

**1993**

1. Arain, V.S., Loveria, J.T. & Pacquing, D.P.M. (1993). Relapse Rate of Patients Treated at the Admission and Crisis Intervention Section, National Center for Mental Health. (unpublished paper)
2. Briguela, Ma. V. V., Abilla, R., Santiago, S. B., & de Gracia, V. B. (1993). A demographic study of male patients admitted at the Forensic Section of the National Center for Mental Health.

The National Center for Mental Health serves as the only forensic psychiatry unit in the country. All patients admitted are court-mandated and come from all parts of the country. Forensic patients numbering around 375 are housed in two pavilions. Pavilion 4 caters to male patients which comprises 90% of the forensic population while Pavilion 35 houses the female patients and improved male patients with minor criminal offenses. The Forensic Section has an average annual admission of 155 and an annual discharge of 138 patients.

Fifty-six male patients were admitted to Pavilion 4 from January to May 1991 with ages ranging from 14-70 years old. Interview with resident physicians using a guide questionnaire and a review of patients' records and mental status examinations were done to gather information regarding personal and family data, history of drug use, nature of criminal charges, frequency of imprisonment, and diagnosis using the DSM IV criteria. The male forensic patients were found to be mostly residents of Luzon, with a mean age of 30.3 years, mean of 8.3 years of education, and without permanent interpersonal relationship at the time of admission. They were also likely to be psychotic. The nature of criminal activity was mostly crimes against persons. The subjects in the study perceived their doctors as the only persons who can help them get back to the community. In many cases, distance prevented them from receiving visitors and hampered their disposition. The study results showed that a large number of the men suffered from severe debilitating mental illness. The severity of the diagnosis, along with the nature and severity of the crimes committed, suggested that forensic patients and their families must be given mental health education during their hospital commitment.

3. Castro-Rodriguez, S. (1993). Psychiatric disorders among sexually abused children and adolescents.

4. Gellido, C.L., Conde, B. L., Marasigan, S. M., Navarro, J. C., Rivera, R. D., & Pacquing, D. (1993). Cognitive abnormalities among Filipinos with asymptomatic and symptomatic HIV-1 infection. *The Philippine Journal of Psychiatry, 18* (1,2), 11-16.

This is a cross-sectional study conducted to demonstrate neurocognitive abnormalities in HIV-1 seronegative, asymptomatic seropositive and symptomatic seropositive Filipinos. The study also discussed and compared the extent of neurocognitive abnormalities among HIV-1 seropositive patients with those found in Westerners and Europeans. A total of 43 seropositive subjects using ELISA with confirmatory Western Blot for HIV-1 infection were given a battery of Neurobehavioral Cognitive Status Examination (NCSE) to evaluate the functioning of five major ability areas namely language, construction, memory, calculation, and judgment. The examination also assessed levels of consciousness, orientation, and attention. A significant difference on all neurobehavioral cognitive parameters was found among the three groups. Comparing separately the asymptomatic and symptomatic seropositive groups to the control group, the asymptomatic seropositive group showed mild cognitive abnormalities and performed significantly poor compared to the control group on the following measures: orientation, attention, language, memory, and calculation. On the other hand, the symptomatic seropositive group performed worst compared to the control group in all neurobehavioral measures. The authors recommended to have a longitudinal follow up which should be continued for at least six months. The study also suggested that a similar study be conducted ensuring a larger sample population including not only bar girls but also gay men and intravenous drug users.

5. Santiago, L. P. R. (1993). The language of mourning and depression in Filipino and its cognates in Bahasa Indonesia and Malay: Sociological, historical, artistic, therapeutic, and transcultural aspects. (published; details not completed as of this inventory).

**1994**

6. Bascara-de la Fuente, E., & Lopez, J. P. (1994). Evaluation of the effectiveness of the introduction to patient care program of the College of Medicine. *The Philippine Journal of Psychiatry, 18* (1,2), 17-25.

The objective of the evaluation study was to determine the effectiveness of the Introduction to Patient Care (IPC) program in achieving the objectives set for each of the IPC courses. Parameters noted to be relevant to the objectives of each course were extracted from three psychological tests and arbitrarily assigned to each course. The tests used were the Personal Orientation Inventory, the Test of Personal Insight, and the Gordon Personal Profile. The parameters chosen for IPC-1 (Self Awareness) were inner directedness, self-actualizing value, feeling reactivity, spontaneity, self regard and self acceptance; for IPC-2 (Awareness of Self in a Group with Others), existentiality, emotional stability, constructive nature of man, synergy, social insight, ascendancy and sociability; and for ICP-3 (The Self in Relation to the Patient, His/Her Family and other Health Professionals), interpersonal sensitivity. A stratified proportionate sampling design was used. Study subjects were composed of two experimental groups: all Year Level 2 (n=37) and 3 (n=39) students who have participated in the IPC program by June 1993, and four control groups: all Year Level 1 students (n=39) on their first day of IPC as well as first, second, and third-year premed students who have not yet participated in IPC. The premed students were matched for age and sex with Year Level 1, 2, and 3 students. The study design used was a quasi-experimental post-test only control group design. Data gathered was subjected to quantitative methods of analysis using the T-test at a one-tailed confidence interval of 95%. The program will be deemed effective if ICP participants obtain statistically significant higher scores in the attributes being tested.

7. Loberiza, F. R., Conde, B. L., & Abcede, D. H. (1994). A psychometric derivation of cognition and critical clinical thinking in the stages of medical education. *The Philippine Journal of Psychiatry, 18* (1,2), 1-10.

The objectives of the study were to construct a two-phase cognitive module in the evaluation of the medical population, to establish the correlation of cognition in the clinical evaluation of critical events applicable to medical

situations, and to construct models for acquisition of critical thinking in a medical population. A two-phase cognitive module applied to a medical population was utilized to evaluate the function of cognition in the areas of objective identification, objective abstraction, and objective judgement. Similarly, critical clinical thinking was measured using psychometrics in emergency, therapeutic, bioethical, and ward management problem situations. Cognitive parameters measured in objective abstraction and objective judgement proved highly correlated in the critical clinical thinking exercise scores. Cognitive scores failed to improve in a linear manner with the stages of medical education. On the other hand, critical clinical thinking demonstrated a linear progression with the stages of medical education.

8. Oavenga, M. G. (1994). Sociodemographic profile of patients with schizophreniform disorder admitted at the National Center for Mental Health.

This paper attempted to describe the sociodemographic profile of schizophreniform patients who were admitted at the Center and to determine the number of patients who developed a more chronic course of psychiatric illness. This was a retrospective study of patients discharged from ACIS from January 1988 to December 1989. One hundred eighty-four patients with schizophreniform disorder who progressed into a more chronic course were identified. Clinical diagnosis by the resident on duty, confirmed by supervisors, was based on the revised edition of the DSM III. Diagnosis made by the chief of clinics is adopted in case of diagnostic inconsistencies among supervisors. EPI INFO was used for data analysis. It was revealed that subjects belonged to the lower socioeconomic status, and availed of free professional and medical services during hospitalization. Their ages ranged from 13 to 69 years old. Majority were males and single. More than half of the study population reached high school, and had a history of mental illness. Eighty-two males and fifty females (71.1%) progressed into a more chronic course. The study results also showed schizophreniform disorder was more common among male patients.

9. Panganiban, R. R., Loberiza, F. R. Jr., Abcede, D. H., Conde, B. L., & Ordinario, A. T. (1994). Adolescent psychobehavioral patterns and homicidal risk in a military population using a conduct retrieval study. *The Philippine Journal of Psychiatry*, 17 (1,2), 26-34.

A conduct retrieval method was utilized to determine adolescent psychobehavioral profile among 1) military in-service policemen, 2) former policemen with criminal offense, and 3) a non-military group, using the

Modified Offer's Self-Image Questionnaire. These self-images were correlated with Allen's Homicidal Risk Scale scores. The military group was found to have weak impulse control, poor affective control, poorly developed sense of duty, and inability to deal with crises. These variables showed a potential predictive role in homicide risk thereby calling for subsequent intervention for the prevention of homicidal conversion.

## 1995

10. Britanico, T. R. Jr., Gorospe-Ponce, E., Laraya, T. R., & Muncada, A. L. (1995). Psychiatric symptoms among Filipino domestic helpers repatriated from Kuwait. *The Philippine Journal of Psychiatry, 19* (2), 9-13.

The study was a comparative analysis of the social and psychological characteristics of 93 domestic helpers repatriated from Kuwait. Two study groups – not abused domestic helpers (Group A) and abused domestic helpers, either physically or sexually (Group B), were administered the Hopkins Symptom Checklist (HSCL). Group A comprised 26.9% and Group B was 73.1% of the study population. The mean age of the subjects was 29.03. Majority were single, came from Mindanao, had a high school level of education, and manifested symptoms of anxiety and depression. The 15-19 age group recruited from rural areas was found to be most vulnerable to physical and sexual abuse. Marital status, religion, education, and age, were not related to abuse in this group of female migrant workers.

11. Cruz, M. C. & Pacquing, D.P.M. (1995). Symptoms of mental disorder among hospitalized child and adolescent patients at the National Center for Mental Health. (unpublished paper).

12. Ladrido-Ignacio, L. (1995). Personality and psychopathology, A review. *The Philippine Journal of Psychiatry, 19* (1), 38-45.

The article discussed the different theories of personality development based on the work of various theorists. It also tackled the different approaches to the understanding of personality and psychopathology. Also, the interactive role of social psychiatry while complementing the three other fields of psychiatry namely psychopathology, biological psychiatry, and clinical psychiatry in the biological field, was briefly discussed.

13. Loberiza, F. R. Jr., Cruz, A. J., Conde, B. L., & Abcede, D. H. (1995). Generational differences in sexual behavior patterns among Filipino women: Its impact on population control strategies. *The Philippine Journal of Psychiatry, 19* (1,2), 13-24.

The sexual behavior patterns of 1,308 Filipino married women were retrieved through a vernacularly translated sexual history index using sealing technique. Cross comparative and correlative measures were done among the four sets of generation improvised, namely Group 1: ages 20-29, Group 2: ages 30-39, Group 3: 40-49, and Group 4: ages 50-59. Higher incidence of masturbatory and extramarital affairs was seen in the older group while variations in sex (oral) and sex-related experiences (rape, incest, and homosexuality) were seen in the younger group. Definite preference for, and actual usage of, artificial fertility control measures were seen in the younger group while the older group preferred and actually used natural methods of contraception. Sexual behavior patterns influencing usage of artificial fertility control measures were correlated with premarital sex, masturbatory practices, decreased number of affective expression, and variations in sex. The church was seen to positively influence sexual behavior, while the media was found to have regressive influence on sexual behavior.

14. Lokin, J. K., Autor, R. P., & Conde, B. L. (1995). Correlating panic disorder and mitral valve prolapse. *The Philippine Journal of Psychiatry, 19* (2), 14-19.

The objectives of the study were to establish the presence of mitral valve prolapse (MVP) in panic disorder, to determine the differences in symptomatology among patients with panic disorder without MVP, and to evaluate treatment responses of patients diagnosed to have panic disorder with MVP using benzodiazepines alone or in combination with beta-blocking agents. The diagnostic criteria in mitral valve prolapse proposed by Perloff was used. The Hamilton Anxiety Rating Scale and Global Assessment Scale were used to evaluate the treatment responses to benzodiazepines alone and in combination with beta-blockers. Patients treated with benzodiazepines in combination with beta-blockers showed more significant recovery from panic disorder with or without mitral valve prolapse as compared to those treated singly with benzodiazepines.

15. Maylem, G. D., & de Sagun, R. Q. (1995). Period prevalence, clinical profiles, risk factors and the complexity associated in children with neurodevelopmental dysfunctions: A population-based study. *The Philippine Journal of Psychiatry*, 19 (1), 30-37.

The study aimed to determine the point prevalence of children afflicted with neurodevelopmental dysfunctions, their clinical profile, and the risk factors that are associated with developing neurodevelopmental dysfunctions. A retrospective review of medical records of 110 patients, with ages up to 15 years old, with neurodevelopmental dysfunctions who consulted at the Pediatric Neurology-Neurodevelopmental Clinic OPD covering the period of July 1993 through June 1994 was done. Sociodemographic and clinical profiles were noted. Risk factors associated with the possibility of developing neurodevelopmental dysfunctions were noted using the Adversity Index (proposed by Stanton et al, 1991), namely: a) perinatal complications; b) family background; c) child rearing practices; and d) the child's physical health.

The point prevalence of children afflicted with neurodevelopmental dysfunctions was 18.2%. The sociodemographic and clinical profiles were varied. Perinatal complications and health indices were associated with, and were predictive of, physical impairment. Perinatal complications, family background, child rearing patterns and health indices were associated with, and predictive of, cognitive functioning impairment while family background and child rearing patterns were associated with, and predictive of, social functioning impairment. The study stressed the complexity of neurodevelopment dysfunction as it transcends the social, economic, and psychological make-up of the affected child.

16. Milan, M. L. (1995). A profile of the responses to stress: a preliminary study. (unpublished paper)

The objective of the study was to identify psychosocial stressors affecting the performance of medical clerks and interns, their patterns of physical, emotional, cognitive and behavioral responses to stress, as well as their coping mechanisms and contingency plans. The study was performed through psychosocial processing facilitated monthly by psychiatric staff in 3-4 hour sessions. Psychosocial processing is a direct psychological intervention for individuals or groups of individuals aimed at: a) helping them reestablish equilibrium and harmony after a stressful situation; b) regaining personal control; and c) helping them plan for the immediate

days in the aftermath of a stressful situation. The study group consisted of all medical interns and clerks rotating in the Psychiatric Department of the Baguio General Hospital and Medical Center from March 1995 to November 1995. Subjects employed common behavioral responses and coping mechanisms in the presence of varied stressful situations. Analysis of the behavioral responses suggests four clinically relevant categories: physical, emotional, cognitive, and behavioral. Medical interns and clerks have their own stressful situation that may affect the effectiveness of their performance. These stressors had been identified, and by understanding these experiences, their reactions and coping mechanisms, they form their contingency plans in order to be more effective as health caregivers.

17. Pacquing, D.M. & Mendoza, O. M. (1995). Risk factors for readmission after short-term psychiatric hospitalization. *The Philippine Journal of Psychiatry, 19* (2), 2-8.

This retrospective cohort study identified the risk for readmission of new short-stay psychiatric patients at the National Center for Mental Health. The six-month incidence of readmission was found to be 27-30%. The best explanatory factors identified through logistic regression analysis were marital status and gender.

18. Pacquing, D.M. & Mendoza, O. M. (1995). Time to readmission as a measure of outcome after short-term psychiatric hospitalization. (unpublished paper).

19. Panganiban, R. R., Javier, R. S., Conde B. L., & Abcede, D. H. (1995). Adolescent developmental patterns and psychosocial characteristics of institutionalized juvenile delinquents. *The Philippine Journal of Psychiatry, 19* (1), 7-12.

The adolescent psychobehavioral profile of male and female juvenile delinquents was assessed using the Modified Offer's Self-Image Questionnaire. The self-image scores were compared with those of male and female non-delinquents. Female delinquents were found to have poor performance in all areas, namely poor impulse control, poor affective control, poorly structured self concept, poor social relations, poorly developed superego, poor sense of responsibility, poor concept of sexuality, poor family relations, inability to deal with crises, inability to cope with environment, and psychopathology. Male delinquents showed poor impulse control, poor affective control, poor social relations, poorly developed superego, poor sense of responsibility, poor family relations, inability to

deal with crises, and inability to cope with environment. There was also significant correlation between the identified psychosocial factors and self-image scores. These parameters showed potential identifying factors for adolescents at risk of committing delinquent behavior and preventing adult antisocial behavior.

20. Poblete, J. Q., & Conde, B. L. (1995). A cursory look on health maintenance organizations and attitudes towards mental health disorders. *The Philippine Journal of Psychiatry, 19 (2), 20-27.*

The article discussed the lack of awareness and full acceptance of Health Maintenance Organizations (HMOs) in the Philippines. At the time of the study, the main factor found hindering the inclusion of psychiatric illnesses in HMO programs was the lack of sufficient data on incidence, cost of confinement, expenses on outpatient consultations, and other significant information on mental health disorders in the Philippines. Assuming that substantial data can prove that including psychiatric disorders in HMO programs is beneficial to both HMOs and their members, there is no reason why patients afflicted with mental illness cannot be covered by HMOs whether fully or in a limited capacity. It was therefore recommended that HMOs must first, be given incentives to cover psychiatric treatment while making a profit, second, that given the confidential nature of this field, psychiatrists should be given autonomy in diagnosing and prescribing treatment and must have the right to discontinue treatment of a patient who refuse to cooperate, and lastly, members must be able to choose which psychiatrist should attend them.

21. Ponce, D. E. (1995). On top of Mt. Pinatubo, the Aytas killed their God: A book review. *The Philippine Journal of Psychiatry, 19 (2), 34-35.*

The article discussed the book "From Victims to Survivors: Psychosocial Intervention in Disaster Management" by Ladrado-Ignacio and Perlas. The book is about the detailed treatment of psychosocial processing (PSP) and its various applications. There was also discussion about "burn-out," and "hidden victims." Focus was also given to caregivers, and the exploration of the role of spirituality in disaster management. With so much useful information served, really important concepts like psychosocial processing and its various applications ran the risk of being trivialized as a result of competing "goodies." These are minor quibbling on the author's part –in the author's word "a half-hearted posturing of someone who has to say

something critical in order to appear objective, balanced, and academically correct."

22. Potenciano, A. A., Conde, B. L., & Gamez, G. L. (1995). Clinical presentation of prefrontal lobe dysfunction in patients with neurologic disorders and negative type of schizophrenia: On common grounds. *The Philippine Journal of Psychiatry, 19* (1), 25-29.

The prefrontal lobe functions in twelve patients with gross structural lesion of the frontal lobe and in twenty-two patients with schizophrenia on clinical setting were evaluated. Negative or deficit symptoms were noted in the two groups. Frontal release signs or primitive pathologic reflexes were likewise noted in both the neurologic and schizophrenic groups. Five (83%) subjects in the neurologic group and 10 (45%) patients in the schizophrenic group presented negative symptoms. Frontal release signs were elicited in seven (50%) neurologic patients and in 8 (79%) schizophrenic patients. The presence of frontal release signs did not correlate with demographic data, medication, and duration of the illness. In the schizophrenic group, frontal release signs correlated significantly with negative symptoms. In terms of frontal release signs and negative symptoms, no significant differences were found between the two groups.

23. Santiago, L. P. R., (1995) Centennial: The First Psychiatric Article in the Philippines (1895). *Philippine Sociological Review*

24. Tirol Solidum, M. (1995). The defense of insanity: The Philippine perspective. *The Philippine Journal of Psychiatry, 19* (2), 28-33.

The article aimed to show that there exists an existential flaw in the complete deprivation standard of insanity in the Philippines. The insanity defense test of the Philippines, like that of the "wild beast test," also requires a "complete deprivation of understanding and memory" inasmuch as reason and understanding are but aspects of one's cognition and intelligence. It is even stricter in the sense that it does not merely require a loss of understanding and memory but rather of cognition, intelligence, and consciousness. The law has alienated the already mentally "alienated" offender and has abandoned them instead of treating them with consideration and understanding in view of their illness. The law fears that psychiatry might understand the transgressor too well and might forgive him/her too readily. The author strongly suggested to reexamine the Philippine's insanity defense case law. There must be a cessation of dogmatic and stubborn adherence to the outmoded Spanish case law

doctrines. In line with its constitutional mandate to dispense justice, the Supreme Court must pave the way for the development of a new case law, which should be more in tune with advances in science and psychiatry. A good insanity test must take into account both the elements of cognition and volition. The Philippine Supreme Court should adopt the ALI test instead of adhering to its traditional interpretation of the insanity defense test, which makes it near impossible for one to make the insanity case in view of very restrictive and stringent standards that has no basis in psychiatry or psychology.

**1996**

25. Pacquing, D. P. M. (1995). Determinants of Length of Hospitalization in a Government Psychiatric Center. (unpublished paper).

The major bulk of the mental health care financial resources go to costs needed to maintain patients undergoing longer hospitalization. At the National Center for Mental Health in Manila, 35% of those who undergo short-term hospitalization are admitted for continued treatment. An undetermined number of these patients remain in the hospital for more than six months lasting to several years.

This is a prospective cohort study that investigates the factors affecting length of hospitalization of 260 mentally ill patients. Special attention is given to symptoms of mental disorder among those who need continued psychiatric care.

Among the variables studied, level of functioning, length of previous hospitalization, and place of residence were identified to determine length of hospitalization.

26. Perlas, A., Ignacio, L. L., Tronco, A., et al. (1996) Baseline survey on mental illness in Region 6. (unpublished paper).

27. Reyes, N. V. (1996). Sociodemographic and clinical profiles of patients admitted to the Forensic Pavilion of the National Center for Mental Health.

Mental disorders today are noted as the secondary cause of increase in social dysfunctions, and the people with mental imbalance constitute an interesting population for study. This study aimed to describe the sociodemographic and clinical characteristics of psychiatric patients

admitted at the Forensic Pavilion of the National Center for Mental Health. This descriptive study comprised a sample of court case male patients assessed as mentally ill. Guided by a questionnaire, data were taken from patients' identification and social service information forms, physicians' observation notes, court reports, and psychological test results. Seventy-five samples were collected, as some of the patients have not yet undergone psychological testing and have no court reports. Based on the data, the typical patient confined at the male Forensic Pavilion of the NCMH was 32 years old, single, Roman Catholic, a school drop-out, unemployed, residing outside Metro Manila, and suffers from schizophrenia. The outcome of the study did not prove that there was an etiological universality behind the commission of crime in psychiatrically ill male patients. The author therefore recommended further investigation to establish a direct relationship between psychosis and criminal acts.

**1997**

28. Banaag, C. (1997). *Resiliency: Stories found in Philippine streets*. Manila: UNICEF.

The book reports the stories of survival of 25 Filipino street children who summoned their inner strengths and sought and welcomed external help to use above obstacles in their lives.

29. Cruz, R. S., & Reyes, B. B. (1997). The DSM IV classification of cases of neurocirculatory asthenia (NCA) seen in the emergency room of the Makati Medical Center. *The Philippine Journal of Psychiatry*, 21 (1), 26-28.

This study sought to clarify concepts regarding neurocirculatory asthenia (NCA) and to determine the applicability of the DSM IV criteria as its classification. Forty-two (42) patients diagnosed as having NCA by the ER residents of the medical facility were evaluated by the psychiatry resident. Interviews were conducted and the DSM IV criteria applied to arrive at a diagnosis. Random interviews of ER residents were also done to ascertain their concepts of NCA. Of the 42 patients, 18 were diagnosed to have an adjustment disorder, 15 had anxiety disorder, 3 had depression, and one had somatization disorder, while 5 patients cannot be categorized. The ER residents diagnosed NCA in the presence of anxiety or panic-like symptoms in patients with a history of stress but normal physical examination findings. Hyperventilation syndrome and NCA are oftentimes deemed

equivalent. The results indicated that some psychiatric disorders are being misdiagnosed as NCA at the ER, and that there is a need for proper psychiatric intervention so that they can be managed accordingly.

30. Della, C. (1997). A comparative study of factors associated with early and delayed hospitalization of psychiatric patients at the University of Philippines-Philippine General Hospital. *The Philippine Journal of Psychiatry*, 21 (1), 12-19.

Hospitalization diminishes the self-esteem of patients because of the social stigma that is attached to being confined in a psychiatric ward. Furthermore, this significantly affects the patients' family, both financially and psychologically. The phenomenon of multiple rehospitalization continues to affect mental health professionals because it is seen as an indicator of poor quality health care delivery. Thus, efforts have to be made toward identifying the various factors that are associated with rehospitalization and focusing interventions on such. This is a cross-sectional study of patients who are hospitalized at an acute psychiatric ward in a tertiary hospital from 1 June to 17 October 1996. The patients were classified into 1) early rehospitalization (rehospitalization within one year from their last admission) and 2) delayed rehospitalization (rehospitalized more than one year from their last admission). These patients were compared in terms of their sociodemographic, as well as their illness and treatment related characteristics. They were also compared in relation to their primary caregivers as evaluated on their (caregivers) knowledge about mental illness, level of comfort towards mental illness, perceived burden of care, and perceived assessment of care that is provided by the physician. The study showed that there is an association between early and delayed rehospitalization of psychiatric patients and the following factors: 1) duration of mental illness; 2) mental status on discharge; 3) compliance to treatment requirements namely intake of medication and outpatient follow-up consultations; 4) the primary caregiver's knowledge about mental illness; 5) the primary caregiver's level of comfort towards mental illness; and 6) the primary caregiver's perceived burden of care. The following factors were found not to be associated with rehospitalization: 1) patients' sociodemographic characteristics; 2) diagnosis; 3) age at onset of illness; 4) reasons for admission; 5) length of hospitalization; and 6) the primary caregiver's perceived assessment of care provided by the attending physician.

31. Dellosa, R. M. (1997). Profile of physically abused children and the patterns and perceptions of their abuse. *The Philippine Journal of Psychiatry*, 21 (1), 4-11.

Although the Filipino public is becoming more aware and more concerned with the physical abuse of children, there is a lack of large-scale research on this societal atrocity. In response to such a lack, this paper aimed to 1) determine the demography of physically abused children, 2) determine the patterns of their abuse, and 3) determine the attitudes of physically abused children towards their maltreatment. Using a pre-tested questionnaire, 249 physically abused children from 24 governmental and non-governmental centers were interviewed. Research data revealed the profile of the abused children as largely female, with a mean age of 10.9 years, and usually a middle child with around 4-5 siblings. The mother is the usual perpetrator of the abuse, using her hand to hit the child, commonly at the buttocks. The precipitant behavior for physical abuse was the child leaving home without permission, yet ironically, running away from home is how the child usually copes with the abuse. The children perceived the punishment as cruel or abusive and felt anger towards the abuser, but nevertheless felt optimistic about the future. Besides encouraging research on a nationwide scope, physicians were also encouraged to strengthen their roles as advocates for these abused and defenseless children.

32. Gawidan, Ma. S. T. (1997). The prevalence of psychiatric disorders among chronically ill medical out-patients seen at the Baguio General Hospital and Medical Center from March 1997 to August 1997.

Previous studies have reported a high prevalence of psychiatric disorders in the general medical setting. This study was conducted in order to determine the prevalence of psychiatric disorders among chronically ill medical patients in the local setting. The Primary Care Evaluation of Mental Disorders (PRIME-MD) was used to screen, evaluate, and diagnose the mental disorders most commonly seen in the clinics. The study determined that there was a high prevalence of psychiatric disorders among the chronically ill medical patients seen at the outpatient section of Internal Medicine. Depression had the highest rate, followed by anxiety disorder, somatoform disorder, dysthymia, and alcohol disorder. The results were comparable to findings in foreign and local studies. With the high prevalence of psychiatric disorders in the general medical setting, it appears that doctors should be aware that up to 30% of their patients might have some degree of psychiatric disorder.

33. Ignacio, L. L., (1997). Health and socio-economic effects of disaster: psychosocial aspect. (unpublished paper).
34. Milan, M. L. (1997). A profile of the psychosocial responses of female victims of violence.

The purpose of the study was to investigate the psychosocial and behavioral profile of female victims of violence in response to physical and sexual abuse, and to establish patterns by which they form coping styles and contingency plans. The author conducted a retrospective review of the medical records of 103 female patients who were served at the Crisis Intervention Stress Debriefing at the Women and Youth Health Desk of the Emergency Room of the Baguio General Hospital and Medical Center during the period March 1996 to February 1997. Crisis Intervention Stress Debriefing is a psychosocial process for individuals to help them reestablish equilibrium and harmony after the violence, to regain personal control and to help them plan for the immediate days in the aftermath or presence of an abusive situation. Psychiatric resident physicians performed direct psychosocial intervention. The data obtained from the documented physical and sexual abuse cases were grouped according to the victims' sociodemographic features, psychosocial responses, coping styles, and contingency plans of recovery. Female victims of physical and sexual abuse demonstrated psychosocial responses of fear, anger, unhappiness, somatization, irritability, nervousness, and tension. Coping techniques found to be more commonly utilized by the survivors were crying, running away, talking it out with the offender, hoping for change in the offender, and passivity. Contingency planning included filing charges against the offender and seeking psychological and medical treatment. Survivors of physical and sexual abuse demonstrated psychosocial responses that have been categorized into physical, emotional, cognitive, and behavioral reactions. Stress-buffering strategies employed to cope with the abuse also included physical, emotional, cognitive, behavioral, and spiritual techniques. Contingency plans of recovery resulted from the survivors' evaluation and appraisal of their abusive state as they were guided through psychosocial processing.

35. Nery-Marquez, M. (1997). Medical student abuse among fourth year UERMMMC students. *The Philippine Journal of Psychiatry*, 21 (1), 29-35.

A pilot study of a fourth-year medical class was carried out to explore student perceptions on mistreatment or abuse. The main objective of the study was to see if medical student abuse exists within the UERM medical setting. The students were asked to rate the frequency and cite the sources among classmates, co-interns, faculty, residents, fellows, nurses, and patients. They were also asked to assess the effects of such episodes on their physical health, emotional well-being, social and family life, and attitudes towards becoming a physician. Based on the answers of 101 students who completed the questionnaire, results showed that abuse was present but that its frequency was generally low. Forty percent (40%) of the respondents mentioned that if only they had known in advance about the extent of mistreatment or stress they would be subjected to in medical school, they would have chosen a different profession. Sixty-two percent (62%) became more cynical about academic life and the medical profession while 65% of the respondents said that they would not recommend to their friends or children to enter the medical profession. The overall quality of their life compared to that of their peers in other professions was perceived to be worse, as cited by 61% of the students. Rather than dismiss this problem as an isolated event, the study underscored the need to examine the issue more closely.

36. Pascual, J. (1997). Assessing the patterns of psychiatric referrals in the emergency room setting. *The Philippine Journal of Psychiatry*, 21 (1), 20-25.

In the charged setting of the emergency room, psychiatric patients deserve as much attention as other patients. The organizational set-up of emergency room staff may result in undue neglect of psychiatric patients. With the growing trend towards deinstitutionalization, more patients will seek immediate resolution of their problems in the emergency room. This study aimed to describe the patterns of psychiatric referral and the factors associated with delayed referral. The method used was a cross-sectional study of all psychiatric referrals from the emergency room service of the University of the Philippines-Philippine General Hospital Medical Center from 1 September to 15 October 1996. Eighty-one percent (81%) out of 106 patients included in the study presented psychiatric emergencies. Referrals were delayed in 52% of these patients. Logistic regression analysis showed

that female sex ( $p=0.03$ ) and violent behavior ( $p=0.05$ ) were protective against a delayed referral while treatment intervention by the emergency room physician ( $p=0.04$ ) was associated with a delayed referral. The study showed an increasing number of substance-induced psychoses in contrast to those of schizophrenia and mood disorders as cited by foreign literature. Only three study variables showed an association with the timing of referral in this study, probably because of its small sample size. Further, studies to determine other significant variables resulting in delayed referral should be carried out. The present set-up of the emergency rooms must be modified to meet the needs of psychiatric patients. It is inevitable that the emergency facility will serve as a portal of entry for people who are not only physically ill but also mentally and emotionally.

**37. Querimit, I. (1997). Mortality among patients at NCMH.**

The objective of this study was to document the mortality of psychiatric patients at the National Center for Mental Health from January 1996 to December 1996. It specifically aimed to determine the sociodemographic profile of patients who died during said period, the common causes of death, and the most common psychiatric diagnosis. This was a descriptive study on the age, sex, date of admission, date of death, psychiatric diagnosis, cause of death, and data on readmission. Of the 204 total deaths for the whole year of 1996, 117 were male while 87 were female. Mortality was highest in the 30 to 39 years age group for both males and females. For both sexes, there were more deaths among the first admission cases compared to readmission cases. Pneumonia was the most common cause of death and schizophrenia the most common psychiatric diagnosis.

**38. Rios, A. A., & Guiang, J. (1997). A study on the sociodemographic and clinical profile of patients at Cottage I of the National Center for Mental Health.**

Patients with seizure disorder who also display oddities in behavior present many problems to the clinician. A sociodemographic and clinical profile of admitted male patients at Cottage I was done, with 38.55% of the admitted patients escorted. It was difficult to get a profile from the data. Most patients were single, Roman Catholic, and came from the National Capitol Region. The most common escorts to patients were social workers. Most of the patients were admitted due to aggressive behavior. Most of them have been diagnosed to have seizure disorder prior to admission. Of those who were not known to be epileptics on admission, there was an

average of 245 days before the first experience of a seizure episode. The average length of stay in the hospital was 1641 days. Fractures and infected wounds were the most common surgical diagnoses of those initially admitted at the Male Surgical Infirmary, while fluid and electrolyte imbalance as well as hypertension were the most common medical diagnoses of those initially admitted at the Male Medical Infirmary.

39. Roque, R. Jr. (1997). Court cases of schizophrenic patients admitted at the NCMH.

The study aimed to determine the number of patients admitted at the Forensic Pavilion diagnosed as having schizophrenia within a period of one year, and the nature of crimes they were charged with. One hundred sixty-three patients were obtained from the list of admissions from 1 June 1996 to 31 May 1997; those diagnosed as suffering from schizophrenia based on the criteria set by DSM IV were extracted. Information was gathered through a review of court orders, court reports, patients' charts, and patient interview. Based on the results of the study, there were more schizophrenic patients with court cases suffering from sub-chronic mental illness. Majority of the patients had previous confinement either at the NCMH or in other institutions. Most were poorly compliant to medication and follow up and have follow up only after a court case has been filed. Majority of the patients were charged with crimes of assault. In interviews with some patients' relatives, it was revealed however that some of the charges filed in court were fabricated to facilitate the patient's confinement, or to make the patient stay confined for a longer period of time.

40. Samson, R. L., & Buenaventura, R. D. (1997). Cognitive functioning in elderly schizophrenic patients. *The Philippine Journal of Psychiatry*, 21 (2), 4-8.

Several studies have reported that institutionalized geriatric schizophrenic in-patients often manifest severe global cognitive impairment. This study determined whether this impairment in cognitive functioning is also found among elderly schizophrenic patients. Thirty patients (15 males and 15 females) were included for the study using the following standard rating scales: Activities of Daily Living; Clinical Global Impression, Mini Mental State Exam, and Brief Cognitive Rating Scale. The results showed that these patients have no significant cognitive impairment in the MMSE but showed a mild cognitive impairment in the BCRS. ADL showed no need for assistance in performing daily activities in the ward for these patients. The

CGI results showed most of them are very much improved and appeared normal and not ill at all.

41. Triunfo S. J. (1997). Social support system of institutionalized unwed mothers.

The objectives of the study are to determine the sources of support of the institutionalized unwed mothers, to determine the quantity and quality of their social support system, and to identify the factors that motivate them to seek institutionalization.

This is a descriptive study that involved 36 unwed mothers housed in two non-governmental institutions. The Social Relationship Scale (SRS), Duke-UNC Functional Social Support Questionnaire (DUFSS), and a questionnaire on the factors that motivate unwed mothers to seek institutionalization were administered.

The research showed that the social support system of the institutionalized unwed mothers is composed primarily of limited friends, and to a lesser extent, their nuclear families. In spite of the high helpfulness ratings and reciprocal relationship between the subjects and their contacts, the SRS does not provide a true picture of the quality of such relationships. This is so because almost all the subjects named only individuals whom they consider would be of help and excluded those whom they perceive would do otherwise. However, the DUFSS showed that the subjects had a good and effective yet poor confidant support. Because of the limited quantity and the quality of social support, institutionalization seems to be a better solution. Factors regarding the subjects' institutionalization have been identified and responses vary according to age group.

**1998**

42. Ang, M. S., Delgado, D., Cabrera, M., Conde, B. L., & Navarro, J. C. (1998). A correlation between the ovulatory phase and cytohormonal maturation index of women with affective disorders: A preliminary study. *The Philippine Journal of Psychiatry*, 22 (2), 4-8.

The difference in endocrine features between men and women supports a biological hypothesis regarding affective disorders among women. Studies have showed a high probability that mood changes is associated with hormonal alterations, particularly that of estrogen and progesterone. There are cyclic morphological changes occurring in the female reproductive

system in response to these hormones. The cytohormonal maturation (CHMI) is used to evaluate the female hormonal milieu. A differential of the three types of cells is expressed as percentages of the parabasal (P), the intermediate (I), and the superficial (S) cells, in that order. Predominance of the superficial cells is that of estrogen. This study aimed to compare the correlation of CHMI with the ovulatory phase between women of reproductive age with affective disorder and that of a control group, as well as to compare the CHMI of the two groups. Eight women of reproductive age (mean age =  $29.62 \pm 7.95$ ), diagnosed as having affective disorder and episodes of mania/hypomania of depression, underwent Pap smear. Written consents were obtained. LMP and PMP were obtained to determine the current ovulatory phase. The control group was composed of seven women from the same age group, but having no manifestations of any psychiatric illness. Pap smear on both groups was performed by a gynecology resident. A pathology resident blinded to the study reviewed the slides for CHMI. Fisher's exact t-test and the Mann-Whitney U test were utilized. A p-value of  $< 0.05$  was considered as statistically significant. There was a significant difference in the proportion of agreement between the ovulatory phase and the CHMI between the two groups ( $p=0.045$ ). However, there was no difference in the percentages of progesterone and estrogen between the two groups ( $p=0.247$  and  $0.452$ , respectively).

43. Bautista, A. P., & Buenaventura, R. D. (1998). Zolpidem in insomnia 3-year post-marketing surveillance study in the Philippines. *The Philippine Journal of Psychiatry*, 22 (2), 12-18.

A post-marketing surveillance study was conducted in the Philippines in routine practice involving 1,482 patients treated with Zolpidem (Stilnox®), an imidazopyridine hypnotic agent. The patient population was 53.24% women and 45.28% men with a mean age of 47 years old (18.42% were over 65 years old). Of the patients, 44.26% were treated with a zolpidem dosage of 10 mg/day and 35.96% with 5 mg/day. The treatment duration ranged from 2 to 35 days and a mean of 8 days. All adverse events were collected through spontaneous reporting. Thirty-nine patients (2.6%) reported 79 adverse events, 20 (1.3%) of them discontinued treatment. Central nervous system (CNS) related adverse events accounted for 70% of the total events. The most common events were headaches and drowsiness on the next day respectively in 0.88% and 0.81% of the total cases. Dizziness, lack of concentration, restlessness, hallucinations, nightmares, and disorientation were observed in a lower percentage of the sample population, with one episode of twitching of the lower extremities.

No serious adverse event was reported and no new risk factors of at-risk populations were identified. The safety profile of Zolpidem is thus consistent with its known pharmacological properties, the results of previous clinical trials, and the cumulative international experience gained with this short-acting hypnotic drug.

44. Caducoy, E. I. (1998). A profile of in-patients with criminal court cases admitted at the Baguio General Hospital and Medical Center, Department of Psychiatry from June 1995 to May 1997. (unpublished paper)

The study described the sociodemographic profile and identified the specific major mental disorders of patients with criminal offenses admitted at the Department of Psychiatry of the Baguio General Hospital and Medical Center during the period June 1995 to May 1997. A retrospective review of the medical records of 43 patients was conducted. Data obtained from the medical records were grouped according to sociodemographic features, types of major mental disorders the subjects were suffering from during the commission of the crime, precipitating factors in criminal behavior, types of criminal offenses committed, length of mental illness at the time of the commission of the crime, and frequency of admission at the psychiatry ward. The study found that 58% of the male sample population belonged to the 26-40 years old group. Majority of the subjects were male, single, had reached elementary or high school education, unemployed, Roman Catholic, Ilocano, and diagnosed to have schizophrenia. Hallucinations and delusions were factors that precipitated criminal behavior. The crimes committed by the subjects were murder, homicide, and frustrated murder. This study also showed that the majority had a duration of illness of less than five years, had been admitted once in the psychiatric ward, and had stayed in the ward for less than a month.

45. Cordova, C. D. (1998). Sociodemographic profile of female psychotic patients with criminal cases admitted at the Pavilion 35.

The objective of the study was to determine the common factor with regard to the sociodemographic profile of female psychotic patients with criminal cases admitted at the Pavilion 35 of the National Center for Mental Health during the month of July 1997, according to their age, marital status, educational attainment, occupation, family composition, family history of mental illness, history of prohibited drug intake, diagnosis, number of admissions, and crimes committed. Review of hospital records of 38 female psychotic patients revealed that most of them belong to middle

adulthood, were single or separated, with low educational attainment, and jobless. Most of them belonged to a family with many members, and those with previous admissions have been found to commit more serious crimes. These factors were deemed by the author to be related to the subjects' psychoses and criminal behavior.

46. Dijamco, D. D. (1998). Sociodemographic and clinical profiles of patients admitted at the Forensic Pavilion of the National Center for Mental Health.

The Forensic Service of the NCMH caters to mentally-ill individuals who are committed through a court order after alleged commission of a law violation. This study aimed to determine certain denomination characteristics of the patients currently confined at the Forensic Pavilion. This was a descriptive study involving 80 subjects (58.8% male) with a mean age of 31-33 years, mostly Roman Catholics, single, and unemployed. A significantly high frequency was noted for a psychiatric diagnosis of schizophrenia. The fact that all patients were committed in compliance with a court order was also noted. In relation to the nature of crimes, theft and illegal possession of drugs was more frequently committed.

47. Mallari, Ma. C. C., Conde, B. L., & Navarro, J. C. (1998). Is there a stigma of psychiatrists among medical colleagues in Tarlac? *The Philippine Journal of Psychiatry*, 22 (2), 9-11.

Psychiatrists are numerous in urban areas, but are lacking in the provinces. Could there be a discrimination of psychiatrists by physicians in rural areas? Is there stigma attached to being a psychiatrist in the province? In an attempt to answer the above questions, a questionnaire survey of physicians in the province of Tarlac was conducted. Internal validity of the questionnaire was tested using Chronbach Alpha. Two pretests were conducted; the actual test consisted of fifteen items with 92 points. Stigma was defined in terms of a cutoff value above 50% from the total number of points. In 75% of the respondents, it was found that stigma was attached to being a psychiatrist in Tarlac. The following were cited as disadvantages of being a psychiatrist in said province: few patients, inadequate facilities, and poor income. Some thought that psychiatrists might identify with their patients and acquire the same symptoms. The presence of stigma carries a negative implication as to the delivery of mental health care. There is a need to reorient and re-educate physicians in Tarlac and reintegrate psychiatry into general medical practice.

48. Mendoza, O.M., Nadera, D.P.P. & Muncy S. (1998). Baseline Study for the Project on Elimination of Child Sexual Abuse and Exploitation through Human Resource Development. (unpublished paper).

This the first of the three-phase project on the United Nations-Economic and Social Commission in the Asia and Pacific (UNESCAP) on the Project on the Elimination of Child Sexual Abuse and Exploitation through Human Resource Development. Key informants from selected government hospitals, social welfare institutions, non-government organizations, judicial system and law enforcement body were interviewed on their available services, resources, and needs in addressing issues relating to child sexual abuse and exploitation. In all sectors, there was a perceived need to understand the dynamics of child sexual abuse and exploitation and to enhance the referral system for specialized services. It appeared that the different sectors were not fully aware of the initiatives and services of the other sectors. The caseload trend over the past five to ten years was also plotted. The findings in this research served as the basis for the development of a training manual on child sexual abuse and exploitation (Phase 2) for the training of human resources (Phase 3).

49. Montes, R., & Yatco-Bautista, J. N. (1998). Profile of mentally retarded and autistic children attending special education centers and the parents' perspective and expectations. *The Philippine Journal of Psychiatry*, 22 (1), 4-9.

This paper aimed to 1) determine the demographic profile of mentally retarded and autistic children attending special education (SPED); 2) determine parents' reason/s for bringing these children to SPED centers; 3) determine parents' perspectives on their children's disability; and 4) determine parents' expectations from SPED centers. Using a pre-tested questionnaire, 51 parents from two SPED centers were surveyed. Research data revealed that mentally retarded or autistic children attending SPED were largely male with a mean age of 7.7 years, belonging to a Catholic family. Usually the eldest among siblings, they were diagnosed when they were 2 to 3 years old. No specific past illness or trauma, nor family history thought to have been associated with the condition were elicited. The length of stay of a child at the SPED center was less than one year. Doctors were the primary sources of referrals to the centers. Initial reactions of parents to their children's condition included grief and frustration, eventually leading to acceptance. Bringing their children to SPED centers stemmed from the desire to have these children to be able to

attend regular schools, but acceptance of their children's capabilities, potential, and maximizing these to gain independence, predominated later on. Besides encouraging research on a larger population size, preferably nationwide, the authors likewise encouraged research on the profile of other types of exceptional children in local settings.

50. Murillo, R. E., Diokno, M., & Bernardo, J. L. (1998). Psychobehavioral patterns and risk of homicidality among rehabilitated drug abusers. *The Philippine Journal of Psychiatry, 22* (1), 10-16.

Drug abuse remains a serious and threatening psychosocial problem in the Philippines. What makes an individual take psychoactive drugs stem from a variety of neurobiological, psychological, socioeconomic, and cultural factors, among others. The psychobehavioral patterns of 101 rehabilitated drug abusers and 88 non-abusers with similar age range, sex, and educational attainment, were determined using the Tennessee Self-Concept Scale. Their risk of homicidality was likewise compared utilizing the Allen's Homicidal Risk Scale. Results of this cross-sectional study showed significant differences between the two groups of respondents on scales measuring the physical self, moral-ethical self, family self, social self, identity, behavior, and the overall level of self-esteem. While the drug abusers showed higher homicidal risk scores than non-abusers, the findings were not significant when tested for differences. There was a significant difference between the two groups when the scores on the moral-ethical self, family self, social self, and the overall level of self-esteem were correlated with the chronicity of substance abuse. Results of this study has provided additional target areas of concern for psychotherapeutic interventions employed by psychiatrists who are members of the therapeutic community wherein drug abusers were being rehabilitated.

51. Ng, A. R., Ranoa, G. V. Jr., & Yatco-Bautista, J. N. (1998). Depression in Filipino pediatric hemophilic patients. *The Philippine Journal of Psychiatry, 22* (1), 22-24.

Hemophilia is one of the chronic illnesses of children that has various sociocultural implications. Being a long-term illness involving not only the affected child but the caregiver as well, depression symptoms can occur in the child overtly and covertly. This study aimed to detect depression in Filipino hemophilic children by means of the Bellevue Index of Depression (BID) and to evaluate the patient's perception of the depressive signs and symptoms as related to their illness. A total of nine hemophilic pediatric patients were included in the study. The presence of depression in these

patients was determined by interviewing both the patient and the caregiver. Eight out of nine subjects showed depressive features with most of the symptoms pointing to dysphonic mood and aggressive behavior. The consequences of long term and repeated treatment may be contributory to such features. The availability of effective support groups is put into question because of the persistence of depressive features despite seemingly adequate family care.

52. Pascual, J. (1998). Forced acid diuresis in metamphetamine-induced psychosis
53. Talens, R., & Jurilla, E. L. (1998). Correlating dexamethasone suppression tests and total leukocyte and lymphocyte counts among depressed patients. *The Philippine Journal of Psychiatry*, 22 (1), 17-21.

Stress and depression have been frequently associated with immune dysregulation with various factors such as HPA axis mediating immune effect. DST, a laboratory procedure that assesses this axis, was utilized in this study by correlating its results among unipolar depressed patients with immune parameters such as total leukocyte, and total and absolute lymphocyte counts. A total of eighteen patients diagnosed as having unipolar major depression, nine with (+) and nine with (-) DST results were included in this retrospective study. There was a significant difference between the two populations in the total and absolute lymphocyte with the (+) DST group showing decreased lymphocyte counts. There was no significant difference in the total leukocyte counts between the two populations. The study showed correlation between DST results and immune parameters such as total and absolute lymphocyte counts, underscoring the usefulness of DST in identifying depressed patients who are vulnerable to immune dysregulation. DST is still a useful laboratory procedure to ensure a holistic approach to management of depressed patients.

**1999**

54. Artuz, D., Conanan, L. S. A., Coching, R. M., & Briones-Querijero, M. (1999). A study on the prevalence of psychiatric disorders using PRIME- MD among the officers and men of the 16<sup>th</sup> Scout Rangers Company, 1<sup>st</sup> Scout Ranger Regiment, Special Operations Command, Philippine Army. (unpublished paper)

A descriptive cross-sectional study was conducted on 52 elements of the 16<sup>th</sup> Scout Ranger Company, First Scout Ranger Regiment who are currently assigned at Tuboran, Mawab, Compostela Province regarding the prevalence of mood disorders, anxiety disorders, and probable alcohol abuse/dependence. The PRIME-MD was administered to the 52 respondents in two steps. First, they were made to fill up the Patient Questionnaire which consisted of 25 items that detect somatoform, eating, mood, anxiety, and alcohol disorders. Those who responded positively to trigger questions on mood, anxiety, and alcohol, proceeded to the second part of PRIME-MD, the Clinician Evaluation Guide, to gather additional information. This study found out that of the 52 respondents, 20% had minor depression and 31.4% had major depression. Of those who answered yes to questions on anxiety, 12.5% were diagnosed to have anxiety disorders. Among those who answered yes to trigger questions on alcohol, 22 (70.9%) had probable alcohol abuse/dependence. The findings of this study can be used as baseline information in conducting a similar study among men in uniform. Also, a more comprehensive screening of applicants and periodic evaluation of those involved in actual combat can be done.

55. Banaag, C. G. (1999). Child psychiatry: Past, present, and future. *The Philippine Journal of Psychiatry*, 23 (2), 29-32.

The article discussed the beginnings of child psychiatry that formerly focused on mentally retarded and juvenile delinquent adults. Measurement of degrees of mental deficiency was one of its earliest goals. In the 1930's to the early 1960's, child psychiatry flourished in the community-based multidisciplinary clinics that focused on service. The "remedicalization" of psychiatry brought the discipline into the mainstream of medicine and ushered in the biological revolution of psychiatry. Advancement in assessment techniques has made it easier to identify affective symptoms in children and adolescents and the development of structured or semi-

structured interviews; questionnaires and rating scales improved the reliability and validity of psychiatric diagnosis. In the near future, the author suggested that psychiatry will remain the single specialty with the greatest shortage of practitioners all over the world and will increasingly establish itself as an important academic discipline if child psychologists will make an increased and sustained commitment to teaching medical students and residents in fuller partnership with general psychiatry.

56. Bautista, T. D. (1999). Psychosocial aspect of disaster: Psychiatric morbidity. *The Philippine Journal of Psychiatry*, 23 (1), 24-34.

This descriptive study aimed to determine the prevalence of psychiatric syndromes among the disaster victims in CABCOM, Pampanga, who underwent psychosocial processing through the Self-Reporting Questionnaire and the Present State Examination (PSE) as diagnostic instruments. The 74 respondents were mostly 21-40 years of age, female, married, unemployed, and Catholic. Anxiety and depression were found to be equally predominant syndromes among 31.08% of the disaster victims who underwent psychosocial processing. It was recommended that a diagnostic instrument more applicable to victims be used, particularly the Impact of Event Scale. The main psychotherapeutic and pharmacologic treatment methods deserve detailed consideration and need to be adequately tested, and verified for cross-cultural applicability and general effectiveness.

57. Briones-Querijero, M. (1999) Psychiatric morbidity among Filipino domestic workers in Hongkong. (unpublished thesis).

58. Buenaventura, R. D. (1999). Geriatric psychiatry in the Philippines. *The Philippine Journal of Psychiatry*, 23 (2), 33.

The article discussed the status of geriatric psychiatry in the Philippines today. It enumerated the institutions providing services and studies for geriatric psychiatry. The author hoped for greater awareness on the part of the community, medical practitioners, and psychiatrists of the heterogeneity of the elderly population and the particular concern of elderly patients.

59. Bautista, T. D., & Salem, W. S. (1999). Knowledge, attitudes and practices regarding sex among first-stroke patients. *The Philippine Journal of Psychiatry, 23* (1), 35-42.

This article describes the knowledge, attitudes, and practices of first-stroke patients regarding sex and their socio-demographic and clinical profiles. The thirty respondents were mostly male, with a mean age of 50, Catholic, high school graduates, and unemployed at the time of the study. Most of the respondents were right-handed, with hypertension, on anti-hypertensive agents, with left hemisphere lesions and mild hemiparesis, no visual defects, and no sensory deficits. Forty percent of the respondents disagree with the following common facts: that sexual intercourse is possible after stroke, that sexual activity can lead to another stroke, that blood pressure increases during the sexual act, that certain drugs for stroke patients can cause sexual dysfunction, and that there is a decrease in desire and sexual performance among stroke patients. Majority (76.7%) of the subjects felt the need to consult their physician about what will happen to their sexual life after experiencing a stroke. Loss of sexual desire was found in 60% of the respondents. Within three months of their stroke, the majority (71.4%) had resumed their sexual activities though to a less extent. Fifteen respondents expressed anxiety over resuming sexual intercourse, primarily due to their fear of having another stroke. The authors recommended that physicians should be aware that sexual morbidity after brain attack may largely be unrelated to the brain attack itself. Neurologists should be sensitive to psychiatric symptoms among this special population for proper referral and evaluation.

60. Flores, F. A., & Albaran, C. (1999). Sociodemographic and clinical profile of patients accused of parricide and admitted to the Forensic Pavilion.

The sociodemographic and clinical profile of patients included were gathered using a questionnaire and an interview of improved patients. The psychiatric diagnosis was based on the DSM IV criteria. Results were analyzed using EPI INFO. The age range of the subjects included was parallel to the age of onset patients diagnosed with schizophrenia. Most of the subjects came from Luzon. A majority of the patients were mentally ill prior to the commission of the crime; a few had a history of prohibited drug use. Most of the subjects were diagnosed as having schizophrenia of the undifferentiated type, as most of the patients interviewed were reacting to

auditory hallucinations. The subjects stayed at the institution for 5456 days on average.

61. Ladrido-Ignacio, L. (1999). Social psychiatry and the changing world. *The Philippine Journal of Psychiatry, 23* (2), 12-17.

The article revolved around the issue of "what will life be like in the 21<sup>st</sup> century," addressed considering major economic, population, and social trends. The article showed that mental health and behavioral problems are being seen as an increasing health burden in all parts of the world thus resulting to many implications for psychiatry. The author saw that there is an urgent need for a paradigm shift in the training programs for psychiatrists towards a reorientation of the programs to include social psychiatric concepts and strategies at all levels.

62. Lu, H. U. (1999). Psychiatric aspects of cancer pain management. *The Philippine Journal of Psychiatry, 23* (1), 14-18.

This article discussed the different psychological influences on cancer pain experience, the causes of inadequate cancer pain management and the different cognitive-behavioral techniques to help guide the patient toward a sense of control over pain. The author advised that the clinician who wants to provide comprehensive management of cancer pain must be familiar with, or have available expertise regarding, psychiatric assessment and interventions for cancer patients.

63. Perlas A.P., Briones-Querijero, M. Abcede, D, Buot, M., Elma-Chua, L., et al. (1999). The prevalence of psychiatric disorders among the chronically-ill medical patients in selected tertiary hospitals in the Philippines. (unpublished paper)

This study was conducted to document the prevalence of psychiatric morbidity among chronically ill medical patients in selected hospitals in the Philippines. It is a cross-sectional study of the chronically medically ill patients seen in selected hospitals from Luzón, Visayas and Mindanao. Using the Primary Care Evaluation of Mental Disorders (PRIME-MD), 774 patients were screened for mental disorders. The prevalence of each of the psychiatric disorders were calculated using the formula for estimation of a proportion for stratified random sampling. The differences in the sample size from each of the study sites were taken into consideration in the estimation of the site-specific prevalence of mental disorders. The 95% confidence intervals of the prevalence rates were computed.

Almost half of the patients (47.8%) were diagnosed with at least one of the psychiatric disorders elicited from the PRIME-MD. Thirty two percent had depressive disorder, followed by anxiety disorder, somatoform disorders, alcohol-related disorder and eating disorder. According to hospital site, the overall prevalence rate of psychiatric disorder was noted to be highest at the Davao Medical Center. The overall prevalence of psychiatric disorder noted in this study was higher than that described in foreign literature, the most common of which was depression.

64. Ramos-Salcedo, P. (1999). Psycho-spiritual paradigm in caring for the critically and terminally ill. *The Philippine Journal of Psychiatry*, 23 (1), 11-13.

The article discussed the psycho-spiritual paradigm that contributes immensely to the understanding and resolution of bio-ethical dilemmas that attend the care of the critically ill and the dying. Such issues as prolongation of the dying process, do not resuscitate orders, withdrawing or withholding life support, extraordinary means, the use of painkillers, to cite a few, are the domain of the psycho-spiritual. The author stated that they are undeniably soul issues.

65. Ranoy, G. C. (1999). Case report. *The Philippine Journal of Psychiatry*, 23 (1), 43-44.

V. S. is a 57-year old woman, coming from a well off family and married into one, unaccustomed to problems until she had a series of serious medical conditions that drastically altered her quality of life. She was referred to psychiatry for her depressed mood, lack of appetite, hypersomnia, and social withdrawal. She was also referred to various specialists due to other illnesses she developed. She was diagnosed as having a mood disorder due to a general medical condition (ESRD) in Axis I, and multiple medical illnesses in Axis IV. Her psychiatric treatment included supportive psychotherapy and antidepressant medication as well as marital therapy. The patient also received a multiple drug regimen, i.e. immunosuppressants, anti-infectives, antidiabetics, antihypertensives, antacids, and sertraline (Zoloft 50mg) taken once daily for her depression.

66. Reyes, B. V. (1999). Psychotherapy, dynamic psychiatry, and neuroscience. *The Philippine Journal of Psychiatry, 23* (1), 7-10.

The article is a collection of information engendered by developments in neuroscience as essential in understanding the mechanisms of various psychiatric disorders influenced by psychosocial forces. Contemporary psychiatric research has conclusively demonstrated that the mind/brain responds to biological and social vectors and is jointly constructed by both. Major brain pathways are specified in the genome; detailed connections are fashioned by the consequently reflected socially mediated experience in the world. The psychodynamic perspective of psychiatry makes one see the meaning of human functioning because this meaning brings about the structural and chemical changes observed in neuroscience and is the basis for the continuing importance of psychotherapy as a treatment mode in present day psychiatry practice.

67. Reyes, B. V. Jr., & Della, C. D. (1999). Treatment of mental illness in the Philippines: A historical perspective. *The Philippine Journal of Psychiatry, 23* (2), 7-11.

The article discussed the history of treatment of mental illness in the Philippines as divided into six major periods. First was the period prior to the colonization of the Philippines by Spain; second was the era of Spanish rule (1565-1898); fourth was the Japanese rule (1942-1945); fifth was the liberation period and the era of the republic (1945-1960); and the sixth consisted of present day psychiatry covering the period 1960 to the present.

68. Salazar-Aleta, Ma. C. I. (1999). Establishment of community-based psychiatric programs. *The Philippine Journal of Psychiatry, 23* (2), 25-28.

The article provided thoughts and insights as to how psychiatric programs respond to the needs of the community. It enumerated community issues that affect the physical and mental health of residents, the physical and mental concerns that beset the community, and the factors that affect the delivery of health services. Actions were done through development of training programs for selected caregivers and the institution of new services at the National Center for Mental Health (NCMH) to provide care at a most efficient and cost effective manner. The article also gave an overview of the National Mental Health Program.

69. Salazar-Aleta, Ma. C. I. (1999). Historical development of the mental health services. *The Philippine Journal of Psychiatry*, 23 (2), 18-24.

This article gave a brief background of the historical development of the mental health services in the Philippines, which was reaction-based rather than well-planned, participatory, proactive, and visionary in nature. It also gave a chronology of development of the mental health services which started as a charitable system run by religious groups. It also gave a comprehensive profile of mental health facilities and other mental health service resources in the Philippines.

70. Vasquez-Genuino A. J. (1999). Knowledge, perceptions, and attitudes towards wife abuse among third year medical students in Manila, SY 1998-1999. (unpublished paper)

71. Vasquez-Genuino A. J. (1999). Suicide among children and adolescents. (unpublished paper)

72. Vista, S. D. (1999). Developing a trophoblastic disease psychiatric liaison program. *The Philippine Journal of Psychiatry*, 23 (1), 19-22.

Liaison programs have been set up at the Trophoblastic Disease Ward and the Cancer Institute of the Philippine General Hospital. Among the interventions set up were regular group therapy sessions for patients and their relatives, expressive therapy including visual arts, music, relaxation, meditation, and guided imagery. For the nursing and medical staff, seminars and workshops were held to aid in the detection and early intervention of behavioral problems. Group therapy sessions were also done when interpersonal problems and burnout were detected; individual psychotherapy was done when such need arose. At the Trophoblastic Disease Ward, the physiological, psychological, and social domains of the WHO-DOH Quality of Life Questionnaire were administered to in-patients before instituting the liaison program, and again six months after program institution. A comparison of the pre-test and post-test scores showed a significant improvement in all the domains, a p-0.05 level of significance. A Purpose in Life Test was also administered to the companions of these patients. There was a significant improvement in their scores after six months at p-0.05 level of significance. Subjective evaluation was done on the ward staff who showed an improvement in their interpersonal relationships with other staff, patients, and patients' companions. The author endorsed psychiatric liaison programs as an effective intervention in

dealing with psychosocial problems of cancer patients, their companions, and ward staff.

**2000**

73. Arias, A. J. V., Vista, B. & Yu, R. (2000) Attitudes and clinical practices of Mandaluyong City Medical Center physicians towards psychiatry: A needs assessment study. (unpublished paper)
74. Bernardo, C. G., Reyes, B. V. & Ramos-Salceda, P. (2000) A proposed interactive reference manual of psychiatric medications used in the Philippines and their drug interactions using the Psychiatric Drug Database (PsyDDas/Xidas) System.
75. Caducoy, E. I. (2000). A profile on the responses of the Luis Hora Memorial Regional Hospital staff and the community leaders of Abatan, Bauko, Mountain Province regarding mental illness.

The objective of the study was to determine the profile of the responses of Luis Hora Memorial Regional Hospital staff and the community leaders of Abatan, Bauko, Mountain Province regarding mental illness. Specifically, it aimed to determine the sociodemographic profile of the subjects and their knowledge, skills, and attitudes toward mental illness. The design of the study was descriptive. Data collection was done from November 1999 to March 2000. The sample population consisted of 41 respondents (34 hospital staff and 7 community leaders). The study revealed that the subjects have a slight awareness of the identification and management of problems related to mental health. The respondents had little knowledge on mental health issues, and as a result, they do not know what to do if they have patients with mental illness. The study also showed that majority of the respondents attached stigma to mental illness. It was recommended that staff of said hospital should undergo training on the identification and management of specific psychological problems and psychiatric emergencies to equip them with sufficient knowledge, skills, and attitudes regarding mental health issues. The community leaders should also be oriented about mental health so that they may understand and know how to handle mentally ill patients within the community.

76. Carcereny, J. M. C., Yu, R., & Vista, B. (2000). A study on the psychiatric morbidity of disabled clients of the Rehabilitation Sheltered Workshop-National Capital Region.

77. Cortez, M. L., Manood, H., & Patac, J. C. (2000). Psychiatric assessment of foreign detainees at the Bureau of Immigration Jail: A descriptive study.
78. Dy, C. P. (2000). A comparison of the cost of home conduction and extended hospitalization of psychiatric patients at the Baguio General Hospital and Medical Center from July 1998 to July 1999.

The objective of the study was to describe the difference between the total cost of extended hospitalization and home conduction of patients at the Department of Psychiatry of the Baguio General Hospital and Medical Center from July 1998 to July 1999. This was a cross-sectional study on patients who were home conducted. Charts of patients included in the study were reviewed. Collected personal data as well as data on diagnosis, length of hospitalization, cost of hospitalization, and cost of home conduction were encoded and analyzed using the Statistical Package for the Social Sciences Software (SPSS) for Windows. Statistical analysis was done through the same software. The study showed that 14.5% of patients admitted at the Hospital had extended stay and were eventually home conducted. Majority of the subjects were female in their young adulthood (21 to 30 years old) from Pangasinan, with a diagnosis of schizophrenia. It has also been found that bringing patients home cost less than extending unnecessarily their hospital stay.

79. Gacias, R., Eduardo-Ilaga, M.W., and Ranoa, G. (2000). Factors associated with recurrent suicide ideations/attempts: Santo Tomas University Hospital experience. (unpublished paper)
80. Gacias, R., Rosales, R. I., Salazar, G. C. & Lim, R. (2000). Psychiatric disorders of repatriated seafarers: A profile and its prevalence.
81. Ignacio, L. L & Tronco, A. T. (2000). *Mental health care in the community*. Quezon City: Megabooks Company.

The book provides a biopsychosocial framework of health and proceeds with concrete questions that the primary care workers can ask for assessment of a particular patient. In the choice of the problems focused in this book, the authors were guided by three questions: Is it enough? Are they perceived as important by the community? Do interventions that the primary care workers can use at their level exist?

Illustrative cases are used to give a human dimension to the conditions discussed specifically on depression, multiple somatic complaints and chronic psychosis. The chapter on Crisis integrates the insights gained from working with victims of disasters. A chapter on children is included because any book on mental health care should.

A chapter each is devoted to the use of drugs and interventions for the individual, family and community. Again, what can be done at the level of care of the primary care workers guided the authors. Finally, flow charts were used. This summarizes the approach that the health worker can use readily and easily in their consultation with their patients.

82. Ilagan, R. H., & Abcede, D. H. (2000). MDMA (Ecstasy) abuse and high risk sexual behaviors among 87 gay and bisexual men.
83. Ly-Uson, J. T. (2000). Comparison between primary care evaluation of mental disorders patient questionnaire and the self-reporting questionnaire as screening tools for psychiatric disorders at the UP-PGH Pain Clinic. *The Philippine Journal of Psychiatry*, 24 (2), 12-18.

This research aimed to compare the validity of two screening instruments – PRIME-MD Patient Questionnaire (PQ) and self-reporting questionnaire (SRQ) – in terms of their ability to discriminate between patients with and without psychiatric disorders at the UP-PGH Pain Clinic. It is a cross-sectional study of 102 patients evaluated by three pain fellow physicians and reviewed by one psychiatrist. The study found good agreement between PRIME-ME PQ and psychiatric interview ( $k=0.67$ ) compared to the correlation between SRQ and psychiatric interview ( $k=0.51$ ). However, with the removal of the item in the SRQ eliciting grandiosity from the “psychotic” items, agreement of the psychiatric interview with the modified SRQ (without item 22) rose to  $k=0.76$ . When all items on psychosis were eliminated (SRQ-20), agreement was even better ( $k=0.79$ ). Both shorter versions of SRQ (Modified SRQ and SRQ-20) were superior to the PRIME-MD PQ in discriminating between patients with or without psychiatric disorders.

84. Ly-Uson, J. T. (2000). Survey of community reactions to mental disorders from an urban poor community. *The Philippine Journal of Psychiatry, 24* (2), 19-25.

This study was undertaken in conjunction with a program aimed at promoting community-oriented medical education and introducing community-based mental health care and primary care. The findings of the study were envisioned to be used in selecting priorities and designing interventions in the community. Attitudes towards mental disorders were studied in an urban poor community using standardized interviews with key informants. The informants were given descriptions of common mental disorders, and they knew an average of two individuals who matched the given descriptions. The primary source of help for physical as well as psychological symptoms was found to be modern health services. Traditional healers seemed to be less sought after except in cases of "possession." The most commonly identified conditions were substance-related problems, mental retardation, and epilepsy. Perception of mental illness and their social consequences have been graphically represented as "attitude profiles," where differences in responses to the six mental conditions were elicited. Most respondents showed negative reactions towards psychotic disorders while depression and anxiety garnered more optimistic responses. Epilepsy and mental retardation, although perceived as grave, were believed not to bring about serious consequences.

85. Mallillin, N. A. T., Conde, B. & Salazar, G. C. (2000). Cerebrospinal fluid lactate and pyruvate levels in male chronic schizophrenia.

86. Mendoza, D. T. L. & Baroque, A. (2000). The clinical profile of in-patients with psychoactive substance induced mental disorder and co-morbidity in a tertiary hospital from January 1995 to September 2000.

87. Montes, R. (2000). Comprehensive study in effectiveness of TCA vs. SSRI in treatment of myofascial pain syndrome. *The Philippine Journal of Psychiatry, 24* (2), 26-32.

This research aimed to compare the effectivity of tricyclic antidepressants (TCAs) and selective serotonin reuptake inhibitors (SSRIs) in the treatment of MPS with regard to pain intensity, pain threshold, and active cervical range of motion, as well as to compare the initial values of the measured parameters with the values on the sixth week of treatment with fluoxetine, imipramine, and placebo. The subjects had similar working conditions that

helped limit the variability on the etiology of MPS development. For high dosage of TCA, the maximum antidepressant effects appeared in 2-4 weeks of treatment when used for pain disorders. Low dosage TCAs required 1-3 weeks for analgesia to take effect. While the antidepressant effects of SSRIs appeared between 2-4 weeks after treatment was started for chronic pain, 4-6 weeks were allotted before pain relief was re-evaluated. Significant clinical improvement was obtained within each treatment group especially from fluoxetine (SSRI), as compared to imipramine (TCA).

88. Peña, Ma. C. S., Reyes, A. S., Pacheco, R. & Conde, B. (2000). Correlation of cranial CT scan findings and positive and negative symptoms in chronic schizophrenics.
89. Pineda, A. A. M., Abcede, D. H., & Navarro, J. C. (2000). Initial validation of the Pilipino-translated Darmouth Assessment of Lifestyle Instrument (DALI) as substance use disorder screen at the Santo Tomas University Hospital.
90. Ramos-Salceda, P., Della, C. D., & Bernardo, C. G. (2000). An overview of boundary transgressions in the doctor-patient relationship. *The Philippine Journal of Psychiatry*, 24 (2), 7-11.

This article discussed the roles of both the doctor and the patient in the healing process. During the course of this process, boundary transgressions occurs wherein the doctor-patient relationship moves from a professional to a personal level. In assessing such boundary issues, the authors cited the need to study the conditions or situations in distinguishing boundary crossing from boundary violation. The authors also suggested means to prevent boundary transgressions.

91. Ronquillo, E. L. (2000). Mental health in disaster in the Philippines. (unpublished conference paper)
92. Saguil, E. D. (2000). A profile of patients with substance-related disorders seen at the out-patient section of the Baguio General Hospital and Medical Center, Department of Psychiatry from March 1999 to March 2000.

The study aimed to describe the population of patients with substance-related disorders seen at the out-patient section of the Baguio General Hospital and Medical Center, Department of Psychiatry from March 1999 to March 2000. . Data was collected through review of medical records of 70

subjects. The study showed that majority of the patients with substance-related disorders were young adults between 25 to 35 years old. Most were male, single, and high school dropouts. The most commonly used substance by all groups was alcohol, followed by shabu. Shabu was more commonly used by college dropouts while marijuana was more commonly used by college graduates. The most common substance-related disorder was alcohol-induced psychotic disorder followed by alcohol dependence and alcohol withdrawal syndrome. Major depression was the most common psychiatric co-morbid condition.

93. Santiago, L. P. R. (2000). Rizal's family background: a psychological study.

94. Santiago, L. P. R. (2000). The heart of a father: a psycho-theological study.

95. Santiago, L. P. R. (2000). Rizal and Philippine psychiatry. *The Philippine Journal of Psychiatry*, 24 (1), 5-23.

This article talked about Rizal and his liking for psychiatry aside from ophthalmology. Rizal primarily specialized in ophthalmology because he wanted to restore the sight of his mother. But the other reason for his choice of the medical profession was to find a remedy for the turbulent symptoms of his epileptic sister, Josefa. Though Rizal's interest in psychiatry was not much known, it showed in his various works. For example, in his novel "Noli Me Tangere" he narrated the circumstances and stages of Sisa's breakdown. Another example was Rizal's article entitled "La Curacion de los Hechizados. Apuntes hechos para el estudio de la Medicina Filipina" (The Treatment of the Bewitched. Notes made for the Study of Philippine Medicine) which dealt with the psychodynamics and treatment of mentally ill patients then believed to be possessed by a witch. The article also tackled the German and French influences of Rizal in the field of psychiatry, and the people who encouraged his interest in this field.

96. Ty, A. U., Conde, B. L., and Abcede, D. H. (2000) The Phenomenon of Sapi (Spirit Possession) Among Five Filipino Spirit Mediums: Some Implications for Psychiatric Diagnosis and Practice.

**2001**

97. Aguadera, M. E., & Seludo, B. T. (2001). A profile of female in-patients with sexually transmitted diseases in a government psychiatric center. *The Philippine Journal of Psychiatry, 25* (1), 17-21.

This study described the sexually transmitted diseases among female psychiatric in-patients and to determine the psychiatric diagnosis of these patients at the National Center for Mental Health. In this study, female in-patients with mental illness who underwent work-up for STD/HIV/AIDS were included. Patients were given a set of questionnaires. Charts were also reviewed. The results showed that schizophrenic female patients with venereal warts were positive for VDRL and n. gonorrhea. One of the three patients positive for HIV had a psychiatric diagnosis of mood disorder and schizophrenia. Most of the patients were formerly sex workers with history of prohibited drug use. The authors recommended strict surveillance and monitoring of female psychiatric patients.

98. Angeles-Besa, M.L. and Briones-Querijero, M. (2001). Profile of suicide attempters seen at the hospital emergency room who follow-up at the psychiatry out-patient service. (unpublished paper).

99. Anlacan, J. (2001). Prevalence of hyperglycemia among patients taking atypical antipsychotics seen in a hospital setting. (unpublished paper).

100. Arcena, Ma. B. M., (2001) Awareness, perception and knowledge on stroke at St. Luke's Medical Center Stroke Forum. (unpublished paper).

101. Arcena, Ma. B. M., & Vista, B. (2001). Psychiatric morbidity and perceived social support of spinal injury patients admitted at the Philippine Orthopedic Center. *The Philippine Journal of Psychiatry, 25* (2), 15-21.

The survey identified the psychosocial aspects of caring for spinal cord injury (SCI) patients at the Philippine Orthopedic Center. Specifically, it aimed to determine the demographic profile, psychiatric morbidity, and perceived social support of this population. This cross-sectional study described the psychological impairment and perceived social support of 42

SCI patients who were assessed using the Self-Reporting Questionnaire (SRQ) and Norbeck Social Support Questionnaire. A mean age of 35.3 years was noted, with males accounting for 74% of the patients. Most of them were skilled workers who had reached high school. About 66% had complete spinal cord transection. More than half (57.1%) of the study population had a score of five or more on SRQ items 1-20, which screen for anxiety and depressive symptoms; 23.8% had a score of one or more on SRQ items 21-24, which screen for psychotic symptoms. The spouses (33%) and the nursing staff (31.7%) were perceived by the patients to be most supportive.

102. Balanza, K. N. (2001). The profile of psychotic patients admitted for the first time due to violent behavior at the Department of Psychiatry, Baguio General Hospital and Medical Center for the year 2000.

This paper aimed to identify the features of patients with psychotic disorder who manifested violent behavior on first admission. Data were collected from medical records. The sample population, totaling to 316, consisted of all patients who were admitted for the first time due to violent behavior. Majority of the study population were male, belonging to the younger age bracket, single, unemployed, and belonging to the lower socioeconomic group. The study showed that violent behavior had a remarkably high incidence between two weeks to one month of the illness. Types of violent behavior ranged from threatening to use a weapon to hacking or hurting oneself. It was noted that the type of psychotic symptom associated with the highest incidence of violent behavior was prominent delusion of persecution closely followed by other types of hallucinations and delusions. With regards to substance abuse, 40.2% of the subjects had a history of use ranging from a few hours to 2 years. The study also showed that majority of the subjects were diagnosed as having schizophrenia and mood disorders.

103. Bauson, M. & Vista, B. (2001). A study on depression among amputated patients having phantom limb pain. (unpublished paper)

104. Baylon, M.L. (2001). The psychosocial effects of caregiving on primary caregivers of persons with schizophrenia seen at the out-patient department of the Philippine General Hospital. (unpublished paper).

105. Calumpiano, A. R. (2001). Comparison of the perceptions of VSMMC resident physicians, post-graduate interns and interns on death and dying. (unpublished paper).

106. Dy, C. R. P. (2001). Psychiatry as a prospective career among postgraduate interns of the Baguio General Hospital and Medical Center from May 2000 to May 2001. (unpublished paper).

The objective of the study was to determine the different factors that may influence postgraduate interns in choosing a medical specialty. This was a cross-sectional study of the specialty preference of the postgraduate interns of the Baguio General Hospital and Medical Center from May 2000 to May 2001. A 52-item questionnaire was designed to be self-administered containing questions on pertinent personal data, choice of specialties, reasons for choice of specialty, perceived respect from different groups of people depending on the choice of specialty and attitudes towards psychiatry as a field of specialty. Measures for central tendency for quantitative variables were computed. Ranking was also determined as necessary for ordinal variables like the choice of specialty and perceived degree of respect. Other descriptive statistics like proportion and variability were also used. The study showed that only 1% of the interns chose psychiatry as a prospective career. The most frequently mentioned unattractive aspects of psychiatry as a career were that psychiatric patients fail to get better fast enough. Interns also felt that they were not suited to the field because it was too emotionally intense. They viewed psychiatry as low in status relative to other medical specialties. Nonetheless, there were also favorable attitudes about psychiatry. However, intern's belief that psychiatry is low in status deserve attention and may be critical in resolving recruitment difficulties.

107. Gauzon-Gayares, Ma. J. (2001). Antidepressant properties of *Centella asiatica* (L.) (takip-kuhol): An experimental study on mice model. *The Philippine Journal of Psychiatry*, 25 (1), 35-40.

Filipino traditional healers have been using *Centella asiatica*, locally known as "takip-kuhol" as a stimulant and brain tonic. Coloma et al. found its leaf decoction comparable to fluoxetine in decreasing immobility time in mice with induced depression. The objective of the study was to establish antidepressant properties of *Centella asiatica* leaf extract in a mice model using a systematic purification of leaf extract and comparing it with fluoxetine. This research was a single blind experimental study using completely randomized design wherein *Centella asiatica* leaves were percolated in 60% ethanol, then evaporated to extract a purified form. Effective antidepressant dose<sub>50</sub> (ED<sub>50</sub>) was determined using the forced-swimming test. *Centella asiatica* ED<sub>50</sub> was then compared with fluoxetine

10mg/kg and NSS 0.1ml to establish antidepressant properties through measurement of immobility time in the forced-swimming test. ED<sub>50</sub> of *centella asiatica* was found to be 37.8 mg/kg. It was noted to be statistically comparable to fluoxetine 10 mg/kg in improving immobility time at t<sub>0.05</sub> of 2.101 and F<sub>0.05</sub> of 3.39 (t=0.24 and F=0.09). Both fluoxetine 10 mg/kg and *centella asiatica* 37.8 mg/kg were found to be not statistically comparable to NSS 0.1 ml at these levels (t=3.89 and 4.97, respectively, and F=14.72 and 17.11, respectively). The study concluded that *centella asiatica* has comparable antidepressant properties as fluoxetine 10 mg/kg in mice, and is better than placebo in improving induced depression.

108. Lao, A. Y., Ma. Celeste, S., & Conde B. L. (2001). Awareness and confidence of family physicians in recognition and treatment of psychiatric illness. *The Philippine Journal of Psychiatry*, 25 (2), 22-26.

The family practitioner plays an important role in the detection and treatment of mental disorders. It is said that over half of all persons affected with mental illness were initially seen and treated by the non-psychiatrist in the outpatient setting rather than in the specialty mental health clinic. This paper aimed to evaluate the perceived level of confidence and competence of the primary care practitioner in the recognition, diagnosis, and management of mental disorders. A survey of family physicians and general practitioners using a 13-point questionnaire during an annual convention of the Philippine Academy of Family Physicians (PAFP) was conducted. The questionnaire included items that attempted to quantify the following: exposure to psychiatry during residency and current medical practice; proportion of mental illness cases among total patient load; signs and symptoms that would be associated with mental illness; familiarity with standardized criteria for diagnosing mental illness i.e. schizophrenia and depression; familiarity with therapeutic medications; and perceived level of confidence in treating psychiatric cases. Results of the study implied that the family physician, although aware of the general signs and symptoms indicative of mental illness, is still hesitant in formulating a definitive diagnosis. Possible reasons for this attitude may be inadequate training in psychiatry as well as unfamiliarity and perceived difficulty with the DSM IV.

109. Mallilin, N. (2001). Defense mechanism utilized by diabetics at the Santo Tomas University Hospital Outpatient Clinic. *The Philippine Journal of Psychiatry, 25* (2), 8-14.

The paper aimed to identify and classify defense mechanisms utilized by diabetic patients and compare these with those utilized by non-diabetics. Specific defense mechanisms were identified in 55 individuals (30 normal controls and 25 diabetic patients) using the Defense Style Questionnaire developed by Bond et al. Diabetic patients significantly utilized mature defenses (sublimation, anticipation, and suppression), as well as immature defenses (isolation, displacement, splitting, rationalization, and somatization) more than their normal counterparts. There was no significant difference in the use of neurotic defenses. The author concluded that awareness of these defense styles is necessary to understand a diabetic's response to illness and to increase flexibility in devising treatment strategies.

110. Manood, H. & Vista, B. (2001). Burn-out profile of nurses assigned at Pavilion 10 of San Lazaro Hospital - A cross sectional study.

111. Mendoza, D. T. L., Gamez, G. & Rosales, V. (2001). Predictive variables of psychiatric illness in epilepsy. (unpublished paper)

112. Navallo, J. C., & Corpuz, C. C. (2001). A survey of mental hospital staff experience on patient violence. *The Philippine Journal of Psychiatry, 25* (1), 28-34.

This survey attempted to determine the proportion of hospital staff who experience violence from patients at the National Center for Mental Health, a government psychiatric center in the Philippines. It also aimed to describe the nature and manner of violence, and the staff's reaction to such violence. Of 104 hospital staff included in the study, 64.4% experienced being assaulted by patients in 1998. The majority experienced physical and verbal assault either singly or in combination, on one or more occasions. The most common experience of violence from patients was verbal assault such as shouting invectives or curses. Also, most assault incidents occurred in the morning. Staff characteristics such as gender, position, and length of hospital service were associated with having been assaulted. The majority of those assaulted by patients reportedly remained calm and kept their composure during the incident.

113. Pineda, A. A. M., Ong, L. V., Pe Benito, R., de Sagun, R. & Yatco-Bautista, J. N. (2001). Co-morbid psychiatric illnesses and associated streptococcal infection in tic/tourette syndrome.

114. Quincina, B. M., and Nadera, D. P. (2001). Correlational study on the cognitive functioning and the positive and negative symptoms of schizophrenia. *The Philippine Journal of Psychiatry*, 25 (1), 22-27.

Schizophrenia is a mental condition that is characterized by its chronic and debilitating nature, associated with cognitive impairment. The study aimed to determine if there is a correlation between the cognitive functioning and positive or negative symptoms of schizophrenia, which can be useful in planning treatment strategy. The subjects were forty-five patients admitted to the National Center for Mental Health with a diagnosis of schizophrenia who were evaluated with the Mini-Mental State Examination. The majority (62.2%) of patients did not show cognitive impairment while 33.3% showed cognitive impairment. At the same time, most of the patients had minimal to mild positive and negative symptoms and cognitive functioning of schizophrenic patients. However, positive symptoms did not show significant correlation. The major impact of these findings is on planning treatment for schizophrenic patients, whether to control or minimize the deterioration of their cognitive functioning.

115. Raya-Ampil, E., Balay, C. I., Rosales, R. & Villafuerte, L. L. (2001). Prevalence of depression and anxiety in psychocutaneous diseases dependent on genetic and environmental Factors at the dermatology out-patient department in a tertiary hospital.

116. Reyes, A. (2001). Body mass index as a predictor of weight concern among early adolescents. (unpublished paper)

117. Reyes, A. & Rosales, R. (2001). Fatigue and its impact on the quality of life of patients with lower motor neuron disorders. (unpublished paper)

118. Samaniego, R. M. (2001). Clinical case conference. *The Philippine Journal of Psychiatry*, 25 (2), 27-30.

Mr. S is a 32 year old single Filipino Catholic, left handed, college graduate, and an engineering professor. He experienced depressive symptoms after being emotionally rejected by a female colleague. This caused him to mutilate both his testicles. He had poor concentration, hot flushes,

generalized body malaise, poor sleep, and anorexia. His family brought him for psychiatric consult, hence his first institutionalization. After his first treatment, he went into another depressive episode with inconspicuous signs of paranoia. He attempted suicide twice, thus leading to his second institutionalization. The initial therapeutic design necessitated institutionalization, primarily to ensure the patient's safety and prevent him from further harming himself. Upon stabilization and discharge, long-term maintenance with an antidepressant and psychotherapy with supportive-expressive continuum needed to be continued on an outpatient basis.

119. San Gabriel, Ma. C., Rosales, R. & Conde, B. (2001). The impact on the quality of life of co-morbid anxiety and depression in Parkinson's Disease. (unpublished paper)

120. Tolentino, R. B. (2001). Psychiatry, media, at lipunan. *The Philippine Journal of Psychiatry*, 25 (2), 31-38.

Ang artikulong ito at tumutukoy sa disiplina o and politika ng pagkakabuo ng "psychiatry" bilang isang larangan at ang kultural na implikasyon na dulot ng ganitong pagkakabuo. Ang tatlong salik – psychiatry, media, at lipunan – ay tumutukoy at tinatahi ang pagbuo ng ugnayang pantao – o kung paano tayo nagkakaroon ng relasyon sa isa't-isa batay sa ating panlipunang identad. Tinalakay din nito ang larangan para magbigay-diin sa representasyon sa popular na imahinasyon tungkol sa "psychiatry." Ipinakita rin dito ang dalawang kapangyarihan ng media at ang karanasan sa atin nito. Nagbigay din ng tatlong mungkahi ang may-akda sa kung papaano magiging kritikal ang ating pananaw sa disiplinaryang ito. Una ay ang pangangailangang pagtuunan ng pansin hindi lamang ang disiplina bilang "medical practice" pero bilang paraan sa pag-"reformulate" ng ating relasyong panlipunan at ang kaakibat nitong simbolikong kahulugan at "practices." Ikalawa, may pangangailangang iugnay ang psychiatry at katutubong sikolohiya at panlipunang kondisyon. At ikatlo, kung paano rin mapapalawak ang "practices" ng "care for the self."

121. Tubongbanua, E. (2001). Incidence and profile of readmitted patients at the Crisis Intervention Unit of the Psychiatry Department of Davao Medical Center from January 1, 1999 to December 31, 2000.

The objectives of the study were to determine the incidence of readmission and to get the profile of new patients readmitted at a tertiary hospital during a 2-year study period. This descriptive study included 235 patients who were readmitted at the Crisis Intervention Unit of the Psychiatry

Department of Davao Medical Center from January 1, 1999 to December 31, 2000. Records of readmitted patients during the study period were reviewed. The incidence of readmission was 10.54% for the population. Readmitted patients had a mean age of 27.22 ( $\pm 10.54$ ). One hundred fifty eight (67.2%) were males. One hundred seventy-eight (75.7%) were without spouse. One hundred five (44.7%) were able to reach high school level. Most of the patients (78.2%) came from Region XI while the rest came from Region IX (0.4%), Region X (2.6%), Region XII (8.2%) and Caraga (10.6%). The four most common diagnoses were schizophrenia (41.3%), brief psychotic disorder (19.1%), schizophreniform (11.1%), and major depression with psychotic features (11.1%). The most common reason for readmission was homicidal behavior seen in 181 (77%) patients. The mean number of readmission was 2 ( $\pm 1$ ). Two hundred (85.1%) of the patients were judged by their psychiatrists to have poor compliance with medications.

122. Velasco-Francia, C., Paradela, A., & Leynes, C. (2001). Assessment of the knowledge and attitudes of parents of mentally retarded children enrolled in special education at Sta. Ana Elementary School. *The Philippine Journal of Psychiatry*, 25 (1), 7-16.

The objective of the study was to determine the level of knowledge about mental retardation and attitudes of parents towards their mentally retarded children enrolled for special education at Sta. Ana Elementary School. Sixty mothers of mentally retarded children were oriented regarding the objectives of the study, and then were given questionnaires to answer. Data regarding the sociodemographic profiles of the respondents were also taken. The Index of Parent Attitude (IPA) was used to measure the extent, security, or magnitude of problems in the parent-child relationship as seen and reported by the parent. The parents who responded to this survey were mostly mothers belonging to the 41-65 age group, married, unemployed, high school graduates earning less than PhP5,000.00 a month, and Roman Catholic. Majority of the respondents had a low or poor level of knowledge regarding mental retardation. The majority (68%) of the parents of the mentally retarded children in this study had significantly problematic attitudes toward their mentally retarded child, while 2% had the tendency to be violent toward their children. Twenty-seven percent (27%) had no significant problematic attitude towards their children. Most of these parents did not really trust their child and tended to compare their special child with other children. The majority of mothers were verbally and physically punitive towards their children since they could not understand nor control their children's behavior.

**2002**

123. Advincula, L.F. and Briones-Querijero, M. (2002). Providing care for patients with dementia: The biopsychosocial effects on caregivers. (unpublished paper)
124. Almendrala J. and Briones-Querijero, M. (2002) Burden of care and quality of life in family caregivers of pain patients seen at the UP-PGH pain clinic from October to November 2002. (unpublished paper)
125. Araullo, M.L.. (2002). Auditory P300 abnormalities in Filipino patients with schizophrenia and their siblings. (unpublished paper)
126. Arcena, Ma. B., Valdez-Cabio, Ma. R., Colon, F., Nievera, C., & Castro-Rodriguez, S. (2002). Psychiatric morbidity in patients with seizure disorders. (unpublished paper).

Many patients referred for management of seizures may actually have psychogenic seizures or non-epileptic seizures (NES). This study aims to determine the underlying psychiatric co-morbidity among patients admitted for treatment at the Epilepsy Monitoring Unit (EMU) of St Luke's Medical Center. Following neurologic and psychiatric evaluations, DSM IV and PRIME MD questionnaires are used to measure psychiatric morbidity. Since mid-2001, 35 patients admitted with a diagnosis of epilepsy have undergone electroencephalographic (EEG) monitoring. Abnormal EEG findings were seen in thirteen patients (37%). Based on the DSM IV and PRIME-MD, psychiatric co-morbidity in non-epileptic patients includes Major Depressive Disorder (30%), Substance Abuse Disorder (5%), Generalized Anxiety Disorder (5%), Simple Phobia (5%), Impulse Control Disorder (5%), and Dissociative Disorder (5%). One patient had a frank psychotic illness. Only thirteen patients (37%) were given anti-convulsant medications upon discharge. The others were given various other medications, including antipsychotics (5%), antidepressants (30%) and anxiolytics (10%). No patients have been readmitted in the follow-up period thus far.

127. Balanza, K. N. (2002). A profile on the responses of the residents of Holy Ghost Extension Barangay, Baguio City, regarding mental illness. (unpublished paper)

The study was conducted to determine the profile of the responses of the residents of Holy Ghost Extension Barangay, Baguio City, regarding mental illness. The sociodemographic profile of the subjects was determined together with their knowledge, skills, and attitudes toward mental illness and mentally ill patients. The types of the different traditional healers still utilized by the residents were also identified. The study was descriptive and data was gathered through a prospective method. There were 79 respondents who were included through random sampling. Data was gathered using the Key Informant Interview Questionnaire of the World Health Organization. Data showed that majority of the subjects considered mental retardation, adjustment disorder, acute and chronic psychoses, depression, and drug abuse as serious problems but does not think the person suffering from such is ill. Majority of the subjects also considered the above disorders to stay much the same for some time except for drug abuse which could worsen quickly according to 25.3% of the respondents. Also, traditional healers are still sought after; 54.4% of the subjects claimed to frequently consult the *mangilots*.

128. Bautista, T. D., Ignacio, L. L., Ronquillo, E. L., Tronco, A. T., & Paradela, A. M. (2002). Psychosocial aspect of disaster: Psychiatric morbidity. *The UP Manila Journal* 7 (1) 22-34.

The main objective of the study is to describe the prevalence rate of psychiatric syndromes among the disaster victims in CABCOM, Pampanga who underwent psychosocial processing.

Seventy-four respondents were interviewed for the study to determine the presence of psychiatric syndromes. All of the respondents were screened using the Self-Reporting Questionnaire (SRQ). These respondents were among the 94 subjects whose SRQ scores did not decrease after four sessions of psychosocial processing done in 1997. The diagnostic instrument used was the Present State Examination (PSE). A descriptive analysis using graphs and proportion was used for statistical evaluation.

Based on the PSE more than half of the respondents (52.7%) do not have a psychiatric diagnosis. The highest prevalence rate is seen in anxiety and depression with a rate of 31.08% for both syndromes. The other psychiatric syndromes detected through PSE were psychosis (6.76%) and substance abuse (2.7%).

129. Belicena, V.A.L. (2002). Knowledge and Attitudes of Key Informants of Four Barangays in Mondragon, Northern Samar Towards Mental Illness. (unpublished paper)

130. Calumpiano, A. R. (2002). Clinical case conference: Breaking the invisible chain. *The Philippine Journal of Psychiatry*, 26 (2), 32-36.

DP is a young woman who, while working as a nursing aid in U.A.E., was repeatedly raped by Jose, a man she considered as her second father. Because of the dismal condition of the accommodation provided by her employer, she was forced to live with Jose and his family. DP endured the abuse and never told Jose's wife because she was bound by her sense of "utang na loob." She waited until her contract expired before she went home to Tagbilaran. Upon her return to the Philippines she was haunted by her horrible experience in U.A.E. She developed symptoms of post-traumatic stress disorder. She only sought psychiatric treatment after being repeatedly prodded by her boyfriend. She was also subjected to cognitive-behavioral therapy to relieve PTSD symptoms. After four months of pharmacological and cognitive-behavioral therapy, her PTSD symptoms resolved.

131. Carcereny, J. M. (2002). Psychiatric morbidity in pre-mastectomy patients diagnosed with breast cancer at the Makati Medical Center. (unpublished paper)

132. Diocales, R.C., (2002). Burden of Care and Quality of Life in Family Caregivers of Patients Undergoing Hemodialysis at the Renal Unit of the UP-PGH Medical Center. (unpublished paper)

133. Dy, C. R. P. (2002). Mental health services in Abra: A situational analysis.

134. Fidelis, M., Domingo, D., Vazquez-Genuino, A., Aumentado, C., Vilorio-Larin, A. et al. (2002). Knowledge, perceptions, and attitudes towards wife abuse among third year medical students in Manila, SY 1998-1999. *The Philippine Journal of Psychiatry*, 26 (2), 24-31.

This paper aimed to determine the knowledge, perceptions, and attitudes of 3<sup>rd</sup> year medical students towards violence against women. A descriptive cross-sectional survey was conducted among 224 3<sup>rd</sup> year medical students of three medical schools in Metro Manila using a pre-tested questionnaire to validate the Knowledge, Attitudes, and Perceptions Towards Violence

Against Women (KAP-VAW) Questionnaire for health professionals. Only the more obvious physical signs of injury were associated with the more readily identifiable forms of abuse – physical and sexual – while subjective somatic complaints, which are mental, and physiological signs and symptoms were less likely associated with VAW. Verbal and economic abuse were hardly known forms of abuse. The more commonly perceived reason for a women to remain in an abusive relationship was perceived to be her emotional dependence, while a variety of negative characteristics were enumerated to explain the abusive husband's behavior such as egotism, sadism, insecurity, and jealousy. Despite the fact that almost all students (99.2%) expressed a positive attitude towards the abused women, only 24.8% felt they were ready to actually handle such cases. The authors concluded that although medical students were aware of the impact of violence against women and seemed eager to learn more about it in medical school, they were hesitant in actually managing such cases as they felt they did not know enough. It was therefore recommended that the medical curriculum include training modules on wife abuse.

135. Gacias, R.I., Araullo, M.L.C., and Rosales, R.L. (2002) Suicidality among Filipino International Seafarers. (unpublished paper).

136. Ignacio, L. L. & Ronquillo, E. L. (2002). A study on the effectiveness of psychosocial processing as a psychosocial intervention for disaste victims. *The UP Manila Journal* 7 (1) 1-21.

The main objective of the study is to determine the effectiveness of psychosocial processing (PSP) as a method of direct psychosocial intervention for the victims of the Mt. Pinatubo eruption at CABCOM Evacuation Center in Pampanga. Specifically, the study aims to: 1) determine the psychosocial symptoms found in disaster victims; 2) undertake psychosocial processing among victims who scored positive in the Self-Reporting Questionnaire (SRQ); and 3) determine the changes in the psychosocial problems among those who had undergone psychosocial processing as compared to those who did not undergo PSP.

This study used randomized control group pre-test post-test design. The SRQ was administered to the subjects before the start of the study and 2-week intervals during the 6-week study period to determine the presence of psychological morbidity. The effect of psychosocial processing was determined through its effects on the scores in the SRQ among the subjects. Data processing was done using EPI-INFO computer software.

The most common psychological symptoms exhibited by the subjects were sleeping badly (49.1%), feeling nervous, tense and worried (47.3%), and feeling tired all the time (47.3%). For both groups, the symptoms for probable depression consistently decreased with time. Item 24, indicative of a more severe psychiatric symptom was the most common symptom for both groups at baseline. Item 27 (referring to the experience of recurrent recall of the disaster), indicative of post-traumatic stress reaction, also scored high.

While the SRQ scores were not categorical in showing the effects of the PSP sessions among the subjects, the focused group sessions documented the psychological experiences of the subjects related to the disaster and the feelings of relief and some experiences of positive outcome following the psychological intervention which was conducted weekly, for four sessions.

137. Ilaga, M. W. Reyes, A. S., San Gabriel, C. P., & Conde, B. (2002). Neurological soft signs in criminals and patients with schizophrenia: clinical and societal implications. (unpublished paper).

138. Jurilla, J. E. (2002). Quality of life of disaster victims. *The UP Manila Journal* 7 (1) 44-49.

The study seeks to determine the quality of life and the socio-demographic characteristics of disaster victims. It specifically aims to describe the quality of life of disaster victims in CABCOM Evacuation Center in Pampanga according to the scores in six domains: physical, psychological, level of independence, social relationships, environment and spirituality/religion/personal beliefs and to determine the total quality of life score. This cross-sectional study found that the majority of the respondents were female (59.8%), married (78.2%), high school educated (53.4%) with a mean age of 36.78 years. The scoring of the questions is a summation of the responses to the questions that were set on a scale of 1 to 5. The author made an assumption that the total of the individual scores would be reflective of the excellent (5), good (4), fair (3), poor (2) or very poor (1).

The respondents considered the physical component of their lives, the psychological component, the level of independence component, the social relationship component, and the environmental as being fair. They considered the spirituality/religion/personal beliefs component as being good. The total quality of life is fair with a score of 34,743.

The major limitation of this study is that there is no present agreement on the computation of the total quality of life scores. There is also no grading system that would indicate whether a domain score is indicative of a diminished quality of life in the individual domain score.

139. Lao, A.Y., (2002). Quantitative and morphologic analysis of lymphocytes and macrophages in the CSF of first-onset and chronic schizophrenics. (unpublished paper).

140. Malicdan, M.C.V., Lao, A.Y., Evangelista, C.L., and Baroque, A. (2002) Night shift work related sleep problems in young female nurses in Manila. (unpublished paper).

141. Malata, R. E. (2002). Evaluation of coping strategies among Filipino victims of disaster. *The UP Manila Journal* 7 (1) 35-43.

This is a cross sectional study that describes the coping strategies and the demographic profile of disaster victims in a resettlement area in CABCOM, Dau, Pampanga. A sample size of 130 relocated disaster victims were asked to evaluate their coping style using the Coping Strategies Indicator Questionnaire.

Majority of the respondents (98.5%) reported using the problem-solving category such as tried to solve the problem, carefully planned a course of action, brainstormed all possible solutions before deciding, and setting some goals for self to deal with the situation. For the seeking social support group, 98.5% often confided fears and worries to a friend or relative, and talked to people about the situation. In the avoidance strategy category, 17.4% of respondents often watched television more than usual and 64.4% reported doing it sometimes. Majority (80.3% sometimes daydreamed about better times. The use of spirituality during and after a disaster was found in all of the respondents.

Filipino victims of disaster living in chronic stress in a relocation center expressed the use of spirituality, problem solving, seeking social support, and the avoidance coping strategies in varying degrees. Majority turned to spirituality in coping with natural phenomenon beyond human control.

142. Matila, R.S., Tayo, N.A.L., and Rosales. V. (2002). Prevailing attitudes towards the mentally ill: A comparison between individuals with and without mentally ill relatives.

143. Mendoza D.T.L., and Yatco-Bautista, J.N., (2002) Clinical and psychological correlates of Attention Deficit Disorder in a hospital setting: A Preliminary Study. (unpublished paper)

144. Paez-Rogacion, Ma. C. (2002). Concordance of consultees with psychiatric diagnosis, diagnostic and psychotropic drug recommendations of the Consultation-Liaison Service at the UP-Philippine General Hospital 2000. *The Philippine Journal of Psychiatry*, 26 (2), 16-23.

This study aimed to describe the concordance of the consultees with the consultation-liaison (CL) psychiatry service's recommendations and diagnosis. The study was done through the review of 138 medical records of patients referred to the CL Psychiatry Service between January and December 2000 at the UP-PGH. The initial psychiatric consultation notes and the discharge summary were reviewed for specific concordance of consultants' recommendations for diagnostic action and use of psychotropic drugs with consultees implementing such recommendations, as well as the psychiatric diagnosis in the final diagnosis. The program EPI-INFO 6 was used in data analysis. Among 4% of cases with recommendations for diagnostic action, there was only 50% concordance with the consultees' action. Of the 56% of cases with recommendations for use of psychotropic drugs there was a 79% concordance with the consultees' action. Representations for psychiatric diagnosis in the discharge summary revealed concordance in 32% of the cases, partial concordance in 6% and non-concordance in 62% of the cases. The author concluded that diagnostic workups and referrals to other clinical services were not usually included in the management of plans of the psychiatrist.

145. Perlas, A., Ramos-Salceda, P., Reyes, B. V., Banaag, C., Jimenez, A. et al. (2002). Obsessive-compulsive disorder in the Philippines: A descriptive study. *The Philippine Journal of Psychiatry*, 26 (2), 4-10.

This study aimed to describe the sociodemographic profile of Filipino OCD patients consulting private psychiatrists, the nature of the obsessions and compulsions experienced, the character and severity of the symptoms associated with the disorder, and other co-morbid conditions. Forty-seven patients with OCD were identified in selected patient clinics in Metro Manila. Information on the nature, character, and severity of the obsessions and compulsions were gathered in 45 patients through chart review. The OCD patients described in this study was more often male, single, and has

attained college level education. The most common obsessions were contamination obsessions (in the form of concern with dirt or germs) and sexual obsessions (in the form of forbidden sexual thoughts, images, or impulse). The most common compulsions were the cleaning-washing compulsions in the form of excessive or ritualized hand washing. The severity and impact of obsessions were moderate to severe, as with compulsions though at a lesser degree. Over half of the patients surveyed (59.6%) had at least one other illness aside from OCD. The most common co-morbid disorders were major depression and dysthymia.

146. Pineda, A.A.M., David, I.S., and Abcede, D.H. (2002). EEG findings in patients presenting with behavioral changes. (unpublished paper).

147. Raya-Ampil, E., & Conde, B. (2002). Prevalence of depression among institutionalized and non-institutionalized Filipino elderly. *The Philippine Journal of Psychiatry*, 26 (2), 11-14.

The objective of the study was to determine if there was a significant difference between the prevalence of depression in institutionalized and non-institutionalized elderly individuals. Sixty female individuals, 65 years and above of age, were included in the study; thirty from the community and thirty residing in an institution. The Mini Mental Status Examination was used to establish absence of cognitive impairment in the population, after which the Geriatric Depression Scale was administered. The prevalence of depression in both institutionalized and non-institutionalized individuals was 20%. The symptoms of depression in the two groups could be considered depressive episodes since they were transient and did not result in any deterioration of function. The findings of this study showed that there was no difference between the prevalence of depression in institutionalized and non-institutionalized elderly individuals.

148. Raya-Ampil, E., Eduardo-Ilaga, M.W., Conde, B., de los Santos, R., and Martinez, N. (2002). Comparison of saccade, smooth pursuit and optokinetic nystagmus among schizophrenic patients, their non-schizophrenic sibling, and normal individuals using the electronystagmogram. (unpublished paper)

149. Santiago, L. R. (2002). The riddle of the sphinx in pre-Freudian art: A psychoanalytic view. *The Philippine Journal of Psychiatry, 26* (1).

Art not only records the psychological development of man but also stimulates and contributes to his psychological development. There is a dynamic projection-introjection process between art and man. Art, within this definition, is a form of language. That it portrays a dream and charts the unconscious is particularly demonstrated in this paper. The paper also traces the evolution of the Oedipal theme in the universal unconscious as depicted in Western art since time immemorial and the beginnings of psychoanalysis. Art will add to a compelling body of works from a wide range of disciplines which has formed to bear witness to one of the basis psychoanalytic concepts – the Oedipus complex.

**2003**

150. Aleta, C. S., Lee, P. V., Oñate, P. T., and Cruz, J. V. (2003). Residency training in psychiatry: The Philippine experience. *ASEAN Journal of Psychiatry 6* (1) 27-34.

151. Buenaventura, R. D. (2003). Is there a future for Geriatric Psychiatry in the Philippines? *ASEAN Journal of Psychiatry 6* (1) 38-39.

152. Casimiro-Querubin Ma. L. (2003). The Philippine Country Report. *ASEAN Journal of Psychiatry 6* (1) 63 – 75.

While the state of the Philippines' mental health situation closely approximates the status of the general health situation, it suffers a fate much worse than physical health. It is characterized by numerous demands and an almost desperate limitation of resources.

There has been a tremendous increase in the number of stressful events in the daily lives of many Filipinos, foremost of which are the following: fragmentation of families following exodus of overseas workers, rapid migration of internally displaced populations due to natural and man-made disasters, worsening levels of poverty, environmental mismanagement, and the proliferation of illicit substances and the attendant social problems.

153. Cayad, G. C. (2003). A profile of patients referred to the Department of Psychiatry from January to December 2003 due to suicidal behavior: A preliminary report.

This study aimed to describe the population of patients according to sociodemographic profiles, methodology of the suicidal act, number of previous attempts, the primary stressful life event preceding the suicidal behavior, presence of substance use, history of abuse, and present psychiatric disorder. The study was descriptive and data collection was prospective. The sample population totaled to 29 patients. It was found that majority of the population were single females who were either students or unemployed. Half of the population had previous suicide attempts. Ingestion of pesticides was the most common method. Two-thirds of the population identified relational problems such as separation from partners or being reprimanded by family members as the stressful life events leading to the suicidal act. There was no concomitant substance use disorder in the majority. Half reported history of abuse and majority suffered from psychiatric disorders with depressive features. It was recommended that the government implement stricter laws on the use of pesticides, and that funding be made available from the government to put up a community crisis center offering immediate help by telephone or counseling to potential suicide victims. It was also recommended that there be more local studies on suicide.

154. Cayad, G. C. (2003). A retrospective study on the profile of women victims of spousal abuse seen at the Women and Children Protection Unit of the Baguio General Hospital and Medical Center from July 2000 to April 2003.

This study aimed to describe the population of women survivors of spousal abuse as to the demographic and psychosocial profile of the victims, the reasons for consultation, the types of abuse suffered by the victims, the relationship of the victims to their abusers, the duration of cohabitation, the injured body part/s, and psychiatric diagnosis. The study was descriptive and the methodology was retrospective. The sample population consisted of 125 subjects at the BGH-MC WCPU. It was found that spousal abuse was highest among women who were between 26-30 year old, married, unemployed homemakers who have some years in college. The majority of the victims reported abuse by their first spouses. The physical signs of abuse were the common reasons for consult, and the common reason for abuse was the abusers' accusation of infidelity. Most victims suffered from

physical abuse commonly in the face, head, and neck. Majority of the victims had been cohabitating with their abusers for a year. The majority was diagnosed as having no psychiatric disorder. The current approach to cases of spousal abuse is temporary separation of the victim from the abuser to prevent further abuse and to ensure safety of the victim. However, because most cases of spousal abuse occur to young, married women who do not appear to have psychiatric disorders, it was recommended that the abusers should also be evaluated for psychiatric disorders that may be treated to prevent further abuse.

155. Concepcion, R. A. M. (ongoing project) May bukas pa: Mga kaalaman tungkol sa Schizophrenia

The project, a comic book, will tackle relevant and important information about schizophrenia. It will be presented in an artistic format that conveys the intention of increasing awareness and understanding about mental illness and decreasing stigma and discrimination against people with mental illness. This project will showcase the comics illustration of a patient with schizophrenia who works as a comics writer and illustrator. It will also include his insights on having a mental illness and how he was able to live with it.

156. Diaz, M. S. I. (2003). Screening for child care workers in child institutions. (unpublished thesis).

157. Escandelor, C. E. & Briones-Querijero, M. (2003). Prevalence of anxiety and depression among resident physicians of the Philippine General Hospital. (unpublished paper).

This cross-sectional study was done to determine the prevalence of anxiety and depression in a representative sample of 550 resident physicians at the Philippine General Hospital (PGH). The study was done over a time period of 5 months using the Self-Reporting Questionnaire (SRQ) to screen for psychiatric disturbance in the primary care setting, and the Hospital Anxiety and Depression Scale (HADS) to assess symptoms of anxiety and depression.

Findings indicate that around 1/3 of resident physicians in PGH might be experiencing psychological distress while 47% and 21% might be having measurable anxiety and depressive symptoms, respectively. Long work hours and consequently, shorter hours spent at home and for recreation were correlated with depressive symptoms. Lesser time spent at home was

also more likely to result in anxiety symptoms. Psychological morbidity as indicated by the three measures was also correlated with dissatisfaction with work results and home life. A previous history of anxiety and depression was correlated with 'caseness' but having emotional sources of comfort such as families and colleagues mitigates these. Inadequacy of the latter, therefore, may result in anxiety and depressive symptoms or psychological distress.

158. Escandelor, C. E. (2003). Factors influencing the choice of psychiatry as a specialty among year level 5 medical students of the University of the Philippines – College of Medicine. (unpublished paper).

The study describes the factors influencing the study of psychiatry as a specialty among the year level 5 medical students of the University of the Philippines – College of Medicine. Using an adapted 38-item likert questionnaire, 55 (52.9%) females and 49 (47.1%) males with ages ranging from 20 to 25 years (mean=22.5 years) who underwent psychiatric rotation from June to October 2003 were included in the study. Of the 104 medical students, only three (2.9%) cited psychiatry as a first choice of specialization while 21 (20.2%) included the specialty in their top three choices. Psychiatry was not a consideration in 76.9% of the students included in the study.

Among the reasons for the choice of psychiatry as a specialty were emphasis on treating the "whole person"; return to humanities/ social science background; amount of novel and unique problems; experience with psychiatric faculty; and amount of intellectual challenge. Reasons for not choosing it were limited range of practice options in psychiatry; salary in psychiatry; opinions of medical school peers and faculty about psychiatry; stigma of mental illness; and status of psychiatry within medicine.

159. Garduño-Cruz, M. (2003). The state of the Philippine undergraduate psychiatry education. *ASEAN Journal of Psychiatry* 6 (1) 26.

160. Gozo-Oliver, G. M. (2003). The history of Child and Adolescent Psychiatry Training in the Philippines. *ASEAN Journal of Psychiatry* 6 (1) 35-37.

161. Loveria, J. T. (2003). Determining the staffing needs of the doctors and nurses at the out-patient service of the National Center for Mental Health. (unpublished thesis).

162. Macapagal, G. A. (2003). Forging ahead together: Psychiatric societies through the years. *ASEAN Journal of Psychiatry* 6 (1) 19-25.

163. Pacquing-Nadera, D. P. (2003) The status of mental health research in the Philippines. *ASEAN Journal of Psychiatry* 6 (1) 53-62.

Research is an important tool for the improvement of health and health care. Research results have been made as bases for the adoption of specific health policies. They are needed to guide reform activities especially in developing countries. Sound research enables countries to spend their health care funds more efficiently. The paper discusses the research agenda for mental health, resources for mental health research, the current status of mental health research in the country, and the future directions for mental health research in the Philippines.

164. Pagaduan-Lopez, J. (2003). The invisible wounds of war. *The Philippine Journal of Psychiatry* 28 (2) 29-32.

165. Paradela, A. (2003) History of Psychiatry. *ASEAN Journal of Psychiatry* 6 (1) 17-18.

166. Reinoso, M. A. M. (2003). The Mindanao conflict and children. *The Philippine Journal of Psychiatry* 28 (2) 38-40.

167. Ronquillo, E. L. (2003). Social and Community Psychiatry in the Philippines. *ASEAN Journal of Psychiatry* 6 (1) 51-52.

168. Santiago, L. P. R. (1990-present). History of Philippine Psychiatry (ongoing)

169. Santiago, L. P. R. (1995-present). Mali-mali syndrome: a neuropsychiatric research. (ongoing)

170. Santiago, L. P. R. (1995-present). "White Complex" of Filipinos. (ongoing)

171. Sison, A. C. (2003). Consultation-Liaison Psychiatry Fellowship Training: Philippine perspectives 1992 – 2003. *ASEAN Journal of Psychiatry* 6 (1) 40-42.

172. Tolentino, E. J. L. (2003). Addiction Psychiatry in the Philippines. *ASEAN Journal of Psychiatry* 6 (1) 43-50.

173. Valdecamos, W. H. C. & Cardinez-Tan, M. (ongoing). The Incidence of pathologic gambling among substance-related disorder patients.

174. Vocalan, L. M. (2003) Association of psychiatry rotation at Veterans Memorial Medical Center and Medical Interns' interest in the specialty. (unpublished paper).

This is a descriptive study conducted to ascertain if undergoing psychiatry rotation plays a role in increasing interest in the specialty at a Veterans Hospital in the Philippines. Specific factors regarding the rotation were investigated for possible effects on improving interest in psychiatry.

Seven hundred and seventy seven (777) interns who rotated at Veterans Memorial Medical Center Psychiatry Ward from May 2001 to April 2003 were included. A validated survey that rated their pre and post rotation interest in Psychiatry was administered. Wilcoxon Signed Rank Test was used to determine if there was a significant change in interest in Psychiatry before and after the rotation.

The mean interest score in Psychiatry before the rotation was weak ( $2.38 \pm 0.84$ ); the mean interest score upon completion of the rotation was moderate ( $3.09 \pm 0.77$ ). Change in score was highly significant ( $p < 0.000$ .)

Among the factors studied, the most significant differences in interest were seen when interns found that their resident related well with students. After undergoing psychiatry rotation at Veterans Memorial Medical Center during the School year 2001 and 2002, there was a significant increase in interest in the specialty. Interpersonal factors seemed to be more significant than academic factors.

175. Lacida-Yap, R. (1995). Profile of Sexually & Physically Abused Female Clientele in 3 Centers of DSWD. (unpublished paper-Davao Medical Center).

**1999**

176. Antonio, A.L.D., Reyes, E., (1999). Childhood Sexual Abuse among Psychiatry Outpatients: Immediate and Long-Term Presentation of Symptoms. (unpublished paper-The Medical City).

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177. Francisco, F.B. (1999). A Pilot Study on Prevalence of Depression among Institutionalized Elderly at Golden Acres. (unpublished paper-The Medical City).

**2000**

178. Ranoy, G.C. (2000). A Study of the Suicide Cases Referred to the Department of Psychiatry, The Medical City, from January 1996 to November 2000. (unpublished paper-The Medical City).

**2001**

179. Cainhug, V.K. (2001). Clinical Profiles of Patients Admitted at The Medical City because of Methamphetamine Abuse from January 1999 – January 2000. (unpublished paper-The Medical City).

180. Sanchez, E.E. (2001). The existing psychiatric referral system of the medical city in the 2000 frequency, reason and timing of referral. (unpublished paper-The Medical City).

181. Penaranda, M.N. (2001). The Prevalence of Depression Among the Resident Physicians of Davao Medical Center. A Preliminary Study. (unpublished paper-Davao Medical Center).

182. Tubongbanua, E. (2001). Incidence & Profile of Readmitted patients at the Crisis Intervention Unit Of the Psychiatry Department of Davao Medical Center from January 1, 1999 to December 31, 2000. (unpublished paper-Davao Medical Center).

**2002**

183. Laud-Quirapas, R. (2002). The Prevalence of Stress Among Psychiatric Staff of the Davao Medical Center from December 1-31, 2001. (unpublished paper-Davao Medical Center).

**2003**

184. Paulino-Obed, K. (2003). Descriptive Study on the Incidence of Major Depression among Homosexuals on Ten Selected Beauty Parlors in Davao City. (unpublished paper-Davao Medical Center).

185. Divino-Lobo, G.A., Cabildo, J.E. A Study on the Incidence and Risk Factors of Post-Stroke Depression. (unpublished paper-The Medical City).

**2004**

186. Lobino-Enojada, R.J. (2004). Stress Reactions of Adolescents in War Conditions in Pikit, North Cotabato. (unpublished paper-Davao Medical Center).
187. Valecantos, W. (2004). A Study on the incidence of Pathologic Gambling Among Substance-Related Disorder Patients. (unpublished paper-The Medical City).

**2005**

188. Monforte, M.R.C., (2005). Prevalence of Burnout and Self-Reported Patient Care Attitudes and Practice of Residents in Training at The Medical City in 2005. (unpublished paper-The Medical City).

**2006**

189. Quezon-Benignos, M. (2006). Prevalence of Depression Among Caregivers of Davao Mental Hospital. (unpublished paper-Davao Medical Center).
190. Manongas, C. (2006). Assessment of the quality of sleep using the Pittsburg Sleep Quality Index among schizophrenic patients admitted in TMC from Jan 1 to Dec 31, 2006. (unpublished paper-The Medical City).
191. Hilario, T.J. (2006). A Restrospective Study on the Electrocardiograph and 2D-Echocardiography findings among Methamphetamine Dependent Patients in The Medical City General Hospital Psychiatry Ward from January to December 2004. (unpublished paper-The Medical City).

**2007**

192. Dela-on, M.C. (2007). A Five year Retrospective Study on the Status of New Forensic Cases at Psychiatry Department –Davao Medical Center from January 1, 1998 to December 31, 2002. (unpublished paper-Davao Medical Center).
193. Gonzales, G.A.S. (2007). Knowledge and Attitudes of Barangay Officials in Nine Districts in Davao City. (unpublished paper-Davao Medical Center).
194. Afroilan, R. (2007). Socio-demographic Profiles of New Patients Admitted for the First Time with Mental Illness at the Emergency Room on December 2006. (unpublished paper-National Center for Mental Health).
195. Quimbo, W.P. (2007). A Profile of the Children and Adolescent Clients Referred to the Woman and Children Protection Unit (WPCU) of National Center For Mental Health in 2006. (unpublished paper-National Center for Mental Health).
196. Lising, A.K. (2007). A Descriptive Study On the Effect of Group Therapy Among Breast Cancer Patients Using The Patient Health Questionnaire and National

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Comprehensive Cancer Network Distress Questionnaire. (unpublished paper-The Medical City).

197. Lu, V.J.M., (2007). A Comparison Study on the Profile of Suicide Attempters Referred to the Department of Psychiatry, The Medical City, from January 2001 – December 2006. (unpublished paper-The Medical City).

198. Gatdula, J. (2007). Assessing the presence of Fatigue Among Caregivers of Patients Undergoing Hemodialysis at The Medical City Hospital from November to December 2007. (unpublished paper-The Medical City).

**2008**

199. Ching, K.B.S. (2008). The Effect of the Movie “A Beautiful Mind” and a Documentary Film on Schizophrenia on the Attitudes of the 4th Year High School Students of Davao Christian High School Batch 2008-2009 Towards People with mental Illness. (unpublished paper-Davao Medical Center).

200. Oco, M.O.A. (2008). A Descriptive Study on the Prevalence of Posttraumatic Stress Disorder Among Adult Vendors Who Were Victims of Bombing Incident at the General Santos City Central Public Market, General Santos City. (unpublished paper-Davao Medical Center).

201. Sina-Perez, J. (2008). Factors Affecting Compliance and Non-Compliance to Out-Patient Follow-up Consultations Among Chronic Schizophrenic Patients at the National Center for Mental Health. (unpublished paper-National Center for Mental Health).

202. Chu, C.C., Sina-Perez, J. (2008). A Retrospective Study on the Demographic and Clinical Profile of Forensic Patients Charged with Parricide seen at the National Center For Mental Health from January 2007-December 2007. (unpublished paper-National Center for Mental Health).

203. Caraos, R., Go, C, et al. Tardive Dyskinesia: Prevalence and its Correlates Among Filipino Schizophrenic Patients. (unpublished paper-National Center for Mental Health).

204. Chu, C.C., Bordado, M.R. (2008). Factors Affecting Oral Medication Compliance Among Chronic Schizophrenic Patients at the Out-Patient Service of National Center For Mental Health. (unpublished paper-National Center for Mental Health).

205. Lopez, M.D. (2008). History of Incidence of Childhood Attention Deficit Hyperactivity Disorder (ADHD) among Adult Substance Users in Selected Drug Rehabilitation Centers: A Descriptive Study. (unpublished paper-The Medical City).

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