The World Psychiatric Association produced a statement in May 2002 regarding the escalation of violence in the Middle East and its consequences on mental health. The statement stated that the WPA “has been following with great concern the escalation of violence in the Occupied Territories, in Israel and in the refugee camps in the West bank and Gaza, which represents a new and serious threat to the mental and general health of affected people”. The statement acknowledged the psychological trauma being experienced and the psychological consequences to be expected from chronic exposure to violence against civilians both in the Occupied territories and Israel and anticipated an increase in the prevalence of post-traumatic stress disorders and emotional disorders of childhood, in addition to a wide spectrum of stress reactions, both acute and chronic, especially among the most vulnerable groups such as children, women, the elderly and the disabled. In its conclusion the statement appealed to all sides in the conflict to consider the short and long-term psychological consequences of violence and war and to bear their respective responsibility concerning the mental well being of future generations in the region. Less than a year after the issuance of the statement the region witnessed the US military aggression against Iraq, adding yet another conflict to the area which did not only affect the Iraqi people but also spilled over to an accentuation of violence in the Middle East. The statement was met with a positive response from both Palestinian and Israeli psychiatrists encouraging the WPA to initiate a task force to implement its recommendations and called on its member societies to raise public awareness in their respective countries regarding the psychological hazards of war, trauma and mass killings and to lobby their governments to play an active role to break the cycle of violence in the Occupied Territories and Israel. In June 2003 WPA cosponsored a meeting in Malta under the theme “The Role of Health and Culture in Conflict Resolution”. The meeting was attended by an audience who were interested in Mental Health in the region and who believed that peace and democracy could play a major role in the development of the Arab countries. My contribution to that meeting was a plenary intervention discussing “the process of negotiation” from a psychological perspective, trying to highlight factors that contribute to the success or failure of the process, the impact of culture on negotiation and suggesting that peace negotiations are an ongoing process that has to be enforced and supported beyond the bilateral or multilateral talks. A meeting was a plenary intervention discussing “the process of negotiation” from a psychological perspective, trying to highlight factors that contribute to the success or failure of the process, the impact of culture on negotiation and suggesting that peace negotiations are an ongoing process that has to be enforced and supported beyond the bilateral or multilateral talks.

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**Abstract:** The paper reviews the topic of the relationship between depression and Ischemic heart disease, depression has been established as an independent risk factor of myocardial infarction. The high prevalence of depression in chronic diseases is becoming more clear, the diagnosis and treatment of depression has great impact on the prognosis of IHD and many chronic diseases, the clinical implication of these findings are discussed with special emphasis on the use of antidepressants in cardiac patients.

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**Case Report:**

- Specific Serotonin Reuptake Inhibitors in Organic Personality Disorder / Ros'Leszek MD
- Book Review
- Introduction to the Psychiatry of Ancient Iraq / Walid Abdul-Hamid

**Summary**

- Depression and Ischemic Heart Disease / Walid Sarhan

**Abstract:** Clozapine is an atypical dibenzodiazepine antipsychotic drug, which was approved widely for resistant cases of schizophrenia, but as...
yet not for resistant bipolar affective disorder (BAD), despite some researchers suggesting its use in the long-term treatment of resistant bipolar affective disorder. This paper presents a prospective monitored evidence over a five-year period for this claim, using all previously used outcome measures in the same setting in Saudi BAD patients. Eleven patients consecutively admitted with chronic BAD to King Khalid University Hospital (KKUH) were tried on at least two mood stabilizers, separately or in combination, one of them lithium for at least two years. Improvement outcome was assessed using the Brief Psychiatric Rating Scale (BPRS), the Clinical Global Impression (CGI), the Quality of Life Scale (QLS) and the Extrapyramidal Symptom Rating Scale (ESRS). Also work status, suicidality, the number of admissions; the number of attendances to accident and emergency (A/E) rooms and the number of relapses were measured before and after treatment.

All above measures showed statistically significant improvement all through the period of the study except the QLS measure. This report, in spite of the small number of patients studied, presents reasonable evidence for the long-term efficacy of Clozapine monotherapy in chronic resistant BAD patients.

Key words: Clozapine, chronic resistant bipolar affective, Saudi Arabia.

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The Relationship Between Anxiety And Some Parental Treatment Styles / Fahad Abdullah Addelaim

Introduction: Anxiety disorders are the most common psychological problems reported by children and adolescents, with up to 20% of children being affected and 8% at a level of severity. Approximately half the children with an anxiety disorder will have a diagnosable disorder eight years after its onset. The chronicity of childhood anxiety is related to their associations with some psychosocial difficulties.

Prior to 1950, only two books had been written about anxiety, one being Freud's "the Problem Of Anxiety" and Kierkgardis » The Concept of Dread". However, at the start of the second half of the last century a wide range of experimental studies and field research were carried out, especially after Janet Taylor published The Manifest Anxiety Scale.

Many theoretical approaches tried to explain the concept of anxiety. Freud (1959) believes that anxiety is an inevitable aspect of the human condition and it refers to the fear that one's inner impulses cannot be controlled. Horney (1945) thinks that anxiety is created by social forces rather than by the human predicament itself. Specifically, she believes a variety of negative conditions in the environment could produce insecurity entailed in basic anxiety, conditions such as overprotection, parental dominance and discord,

Parental fostering and socialization may leave children with feelings of frustration, fear and insecurity. Developmental psychologists were carried out, especially after Janet Taylor published The Manifest Anxiety Scale. Baumrind (1990) classified the parental treatment into four styles: indulgent parents, authoritarian parents, authoritative parents and uninvolved parents. The present study tries to define the nature of the correlations between anxiety and parental treatment styles of their adolescent sons.

Specific Serotonin Reuptake Inhibitors in Organic Personality Disorder / Ros’ Leszek MD

Introduction: It has been found that a significant improvement in personality disturbances of paranoid personality, borderline personality and avoidant personality types, as a response to SSRI specially Sertraline. The serotoninergic disturbed functions with the central nervous system could be the basis of impulsive aggression and self-destructive behaviour expressed by patients with personality disorders. Several studies have shown good response to SSRIs SPECIFIC SEROTONIN REUPTAKE INHIBITORS IN ORGANIC PERSONALITY DISORDER / ROS’ LESZEK MD

Specially irritability and aggression developed as consequence closed head trauma. This result were replicated by others.

Part two: the darkness era (1900-1950) in one hundred pages, in which he criticize the Mendelian Madness, and the Compulsory sterilization of the severely mentally ill, insulin therapy, electroshock and prefrontal lobotomy.

Part three: Back to Bedlam (1950-1990s) 110 pages in 5 sections, started with the introduction of chlorpromazine and the phenothiazines that were supposed to be insecticides in the nineteenth century.

Mr. Whitaker went on to describe the side-effects of neuroleptics, and the era of drug industry that started to control medicine and science, he is very critical of the clinical studies and FDA approval system, he cited several patients report of their experiences,
and criticize president Kennedy move towards moral and community treatment, in fact as a clinical psychiatrist, I would agree with some of his comments, but definitely not with the notion that nothing is good about psychiatry and psychiatric treatment, in some statements his hostility reaches a pathological intensity, but nevertheless every psychiatrist should be a ware of such views that could be shred by decision makers, patients and their families. Part four: Mad medicine today (1990s-present) fifty pages started by statements made by the American joint commission on mental illness and mental health 1961. (This is a field where fads and fancies flourish, Hardy a year passes without some new claim, for example, that the cause or cure of schizophrenia has been round. The early promises of each of these discoveries are uniformly unfulfilled, successive waves of parents habitually appear to become more resistant to the newest “miracle” cure than was the group on which the first experiments were made). The rest of this part carries very

Walid Sarhan
Introduction to the Psychiatry of Ancient Iraq- Walid Abdul Hamid

Abstract: Mesopotamia is the Greek name of the land between the two great rivers Tigris and Euphrates which constitute present-day Iraq. It was the cradle of major early civilizations in human history. It was in 3200 BC and in Ur in southern Iraq that the first text was ever written. From then till the birth of Christ the ancient Iraqis kept almost half a million cuneiform tablets. Several thousands of these tablets covered medical texts. These medical texts were mainly consisting of handbooks and collection of prescriptions. Some of these medical text contained information on the diagnosis and treatment of psychiatric disorders. I have tried to explore the psychopathology detailed in these text to compare with current diagnostic practices in Psychiatry.

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