Record 1 of 104
Title: Relationship Between Death Anxiety of Turkish Nurses and Their Attitudes Toward the Dying Patients
Author(s): Pehlivan, S (Pehlivan, Seda); Lafci, D (Lafci, Digdem); Vatansever, N (Vatansever, Nursel); Yildiz, E (Yildiz, Ebru)
Source: OMEGA-JOURNAL OF DEATH AND DYING Article
Number: 0030222819895122 DOI: 10.1177/0030222819895122 Early Access Date: DEC 2019
Abstract: This study aims to investigate the relationship between death anxiety of the Turkish nurses and their attitudes toward the dying patient. This study involved 203 nurses who were working at a university hospital. The data were collected using "Nurse Information Form" (which was prepared by the authors of this research), "Thorson-Powell Death Anxiety Scale," and "Attitude Scale about Euthanasia, Death, and Dying Patient." There was a positive correlation between death anxiety and dying patient avoidance behavior and euthanasia score (p < .05). The findings showed that nurses, death anxiety, and death scores were high in the loss of a close relatives (p < .05). Our findings suggest that the situation of the dying patients and their families and also nurses should be improved. Thus, special psychological education/training should be given to the nurses to deal with death anxiety and their attitude to the dying patient.
Accession Number: WOS:000503585000001 PubMed ID: 31856657
Author Identifiers:
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Record 2 of 104
Title: Analysis of 24-Hour Heart Rate Variability among Panic Disorder Patients without Previous Drug Treatment and Comorbid Disorders
Author(s): Gunduz, N (Gunduz, Nermin); Akpinar Aslan, E (Akpinar Aslan, Esma); Eren, F (Eren, Fatma); Sodan Turan, H (Sodan Turan, Hatice); Ozturk, M (Ozturk, Mustafa); Tural, U (Tural, Umit)
Source: TURK PSIKIYATRI DERGISI Volume: 30 Issue: 4 Pages: 236-244 DOI: 10.5080/u23715 Published: WIN 2019
Abstract: Objective: One of the methods used to assess autonomic nervous system dysfunction in the etiology of panic disorder (PD) is heart rate variability (HRV). HRV is controlled by the sympathetic and parasympathetic (vagal) branches of the autonomic nervous system and reflects the capacity of autonomic stimulation by the parasympathetic system. The aim of this study was to evaluate heart rate variability (HRV) time domain parameters based on twenty four hour holter ECG analysis among drug-naive patients with panic disorder (PD) without any other medical and psychiatric comorbidities.
Method: The study group consisted of 41 patients with PD and 46 healthy controls. Participants were evaluated with SCID-1 for psychiatric diagnoses. Then Hamilton Depression Rating Scale (HDRS), Hamilton Anxiety Rating Scale (HARS), Panic Disorder Severity Scale (PDSS) and
Clinical Global Impression Scale (CGI-S) were applied to participants. Twenty four hour Holter ECG outcomes were analyzed on a computer program and time domain parameters were evaluated.

Results: Among the parameters analyzed from HRV, SDANN was significantly higher (p < 0.001); duration of RMSSD, NN50 and pNN50 were lower in PD group than the control group (p = 0.003, p = 0.005, p = 0.047, respectively). In the correlation analysis, there was a moderate negative correlation between CGI-S and NN50 and pNN50. In logistic regression analysis, the increase in SDNN was found to increase the probability of PD by 1.11 (95% CI, 1.010-1.209); the increase in SDANN was found to decrease the probability of PD by 0.892 (95% CI, 0.818-0.973), and the increase in pNN50 was found to decrease the probability of PD by 0.523 (95% CI, 0.342-0.801).

Conclusion: The data obtained in our study confirm that there is a decrease in some HRV parameters like RMSSD, NN50 and pNN50 reflecting parasympathetic activity among patients with PD.

Accession Number: WOS:000510147300002
PubMed ID: 32594484
Author Identifiers:

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ISSN: 1300-2163
Record 4 of 104
Title: Reliability and Validity Study of the Turkish Version of the Bipolar Spectrum Diagnostic Scale
Author(s): Ince, B (Ince, Bahri); Cansiz, A (Cansiz, Alparslan); Ulusoy, S (Ulusoy, Sevirc); Yavuz, KF (Yavuz, Kasim Fatih); Kurt, E (Kurt, Erhan); Altinbas, K (Altinbas, Kursat)
Source: TURK PSIKIYATRI DERGISI Volume: 30 Issue: 4 Pages: 272-278 DOI: 10.5080/u23605 Published: WIN 2019
Abstract: Objective: The purpose of this study is to evaluate the reliability and validity of the Turkish Version of the Bipolar Spectrum Diagnostic Scale (BSDS).
Method: The study was carried out with 130 patients diagnosed with bipolar I disorder, 15 patients diagnosed with bipolar II disorder, and 38 patients diagnosed with major depressive disorder attending the outpatient psychiatry departments of the Bakirkoy Prof. Dr. Mazhar Osman Training and Research Hospital for Mental Health and Neurological Diseases. The Mood Disorder Questionnaire (MDQ) was used for convergent validity. The internal consistency coefficient, item-total score correlation coefficients, test-retest correlation coefficient, confirmatory factor analysis, correlation with concurrent scale, and ROC curve were statistically calculated.
Results: Confirmatory factor analysis indicated that the 20-item version did not show adequate goodness-of-fit. The item 4 with a relatively low regression weight was removed from the model. For the 19-item revised and corrected model, the observed goodness-of-fit indexes were RMSEA = 0.040, CFI = 0.900, GFI = 0.890, IFI = 0.900 and chi(2)/df = 1.230. The internal consistency Cronbach's alpha coefficient was 0.831. The correlation coefficient between the Turkish version of the BSDS and the MDQ was 0.54. The cutoff point of the scale calculated by the ROC analysis was 12 with a sensitivity of 78.6% and a specificity of 86.8%.
Conclusion: The Turkish Version of the BSDS, has been shown to be reliable and valid tool for screening bipolar disorder after removal of the item 4 of the original version of the scale.
Accession Number: WOS:000510147300007
PubMed ID: 32594489
ISSN: 1300-2163

Record 5 of 104
Title: Depression and Somatization in Refractory Lateral Epicondylitis
Author(s): Gukcay, E (Gukcay, Eda); Tamkan, AU (Tamkan, Arif Ugur); Karaahmet, OZ (Karaahmet, Ozgur Zeliha); Tombak, Y (Tombak, Yasemin); Guzel, S (Guzel, Sukran); Cakci, A (Cakci, Aytul)
Source: ARCHIVES OF RHEUMATOLOGY Volume: 34 Issue: 4 Pages: 367-370 DOI: 10.5606/ArchRheumatol.2019.7139 Published: DEC 2019
Abstract: Objectives: This study aims to present two major psychological factors, namely depression and somatization, which may occur with high probability in patients with refractory lateral epicondylitis (LE).
Patients and methods: This cross-sectional study included 36 patients (11 males, 25 females; mean age 42.6 +/- 8.09 years; range 26 to 60 years) diagnosed as refractory LE. Duration of symptoms was >6 months. Each patient completed the Beck Depression Inventory and the Symptom Checklist-90-Revised test evaluating psychosocial status and somatization, respectively.
Results: Depression was found in 24 (66.6%) (moderate in 15 [41.7%] and mild in 9 [25%]) and somatization was found in 28 (77.8%) patients. Depression and somatization were significantly more common in females than males (p=0.02 and p=0.04, respectively).

Conclusion: Depression and somatization may occur frequently in refractory LE patients, particularly in females. Both physical and psychological assessment tools should be incorporated into the clinical evaluation while psychological support should be included in the treatment of refractory LE.

Accession Number: WOS:000504829300001
PubMed ID: 32010884
ISSN: 2148-5046
eISSN: 1309-0283
survey among 1509 volunteered university students in Ankara who regularly use the Internet, among whom we conducted analyses related with IA. Among these students, 987 of them, who play video games, were included in the analyses related with IGD. Correlation analyses revealed that the severities of the scale scores were mildly correlated with each other both among students who regularly use the Internet and students who play video games. Probable ADHD was associated with the severity of IA symptoms, together with depression and aggression, particularly physical aggression and hostility, in ANCOVA analyses. Similarly probable ADHD was also associated with the severity of IGD symptoms, together with depression and aggression, particularly physical aggression, anger and hostility, in ANCOVA analyses. These findings suggest that the presence of probable ADHD is related with both severity of IA and IGD symptoms, together with aggression and depression.

Accession Number: WOS:000493679900008
PubMed ID: 31062235
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ISSN: 1866-6116
eISSN: 1866-6647

Record 8 of 104
Title: Predictors of drug treatment resistance in obsessive compulsive disorder
Author(s): Unverdi Bicakci, E (Unverdi Bicakci, Esra); Ozyildiz Guz, H (Ozyildiz Guz, Hatice); Sahin, AR (Sahin, Ahmet Rifat); Boke, O (Boke, Omer); Sarisoy, G (Sarisoy, Gokhan); Karabekiroglu, A (Karabekiroglu, Aytul); Kahve, AC (Kahve, Aybeniz Civan)
Abstract: Objective: The aim of this study is to investigate the predictive factors related to pharmacotherapy resistance in patients with obsessive-compulsive disorder (OCD). Methods: Structured Clinical Interview for DSM-IV Axis I Disorders (SCID-I), Structured Clinical Interview for DSM-III-R Axis II Disorders (SCID-II), Yale-Brown Obsessive Compulsive Scale-Symptoms Checklist (YBOCS), Hamilton Depression Rating Scale (HDRS), Childhood Trauma Questionnaire (CTQ), Dissociative Experiences Scale, Level of Expressed Emotion were applied to 30 treatment resistant patient with OCD and 30 treatment responder patients with OCD. Expressed Emotion Scale (EES) were applied to the relatives of patients. Results: When the groups were compared, living out of city center, age of onset in disease, total disease duration and presence of psychiatric disease in the family, YBOCS, HDRS, OVIS, EES, CTQ sexual abuse scale scores and major depression comorbidity were significantly higher in treatment resistant group. High YBOCS total score and presence of mental illness in the family were found to be effective for predicting resistance to drug treatment. Conclusion: The high severity of the disease and the presence of psychiatric diseases in the family increase the risk of treatment resistance.
Accession Number: WOS:000490862500001
ISSN: 1302-6631

Record 9 of 104
Title: Analysis of elderly patients treated with electroconvulsive therapy and complication rates: a single center experience
Author(s): Elboga, G (Elboga, Gulcin); Karayagmurlu, E (Karayagmurlu, Elif); Kocamer Sahin, S (Kocamer Sahin, Sengul); Altindag, A (Altindag, Abdurrahman)
Objective: Electroconvulsive therapy (ECT) is an effective treatment method used in many psychiatric disorders, primarily in mood and psychotic disorders. ECT is also effective and safe for geriatric depression. This study aimed to analyze elderly patients treated with ECT in bipolar disorder, major depressive disorder and psychotic disorder diagnostic groups. Methods: In this study, we retrospectively reviewed 58 geriatric patients over 60 years old who were treated with ECT between January 2014 and December 2017. Patients' sociodemographic data, preliminary American Society of Anesthesiologists physical status assessments (ASA) scores and Clinical Global Impression (CGI), Hamilton Depression Rating Scale (HAMD), Young Mania Rating Scale (YMRS), Positive and Negative Symptom (PANSS) Scales before and after ECT were analyzed. Results: CGI, HAMD, YMRS and PANSS scores have significantly decreased after ECT. According to preoperative anesthesia consultations of the patients, 62.1% (n=36) were assessed to be in ASA 2 risk group and 34.5% (n=20) in ASA 3 risk group. One patient in the ASA 2 risk group and four patients in ASA 3 group had to discontinue treatment due to cardiovascular instability. These patients were administered medical treatment. There were no other mortalities or severe complications. Conclusion: This data shows that there were no mortalities or severe complications in elderly patients and supports the effectiveness and safety of ECT in elderly patients with bipolar disorder, major depressive disorder and psychotic disorder.

Accession Number: WOS:000490862500007

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ISSN: 1302-6631

Title: Changes in Visual Cognitive Skills After Weight Loss Surgery in Women

Author(s): Onen, S (Onen, Sinay); Budak, E (Budak, Ersin); Taymur, I (Taymur, Ibrahim); Cayci, HM (Cayci, Haci Murat); Dilektasli, E (Dilektasli, Evren)

Source: BARIATRIC SURGICAL PRACTICE AND PATIENT CARE DOI: 10.1089/bari.2019.0027  Early Access Date: NOV 2019

Abstract: Objective: There is evidence that obesity leads to impairments in certain cognitive functions and provide improvement in these cognitive functions after weight loss. However, the relationship between visual cognitive skills and weight loss has not been adequately studied in the literature. Therefore, this study aims to investigate the change in visual cognitive abilities after weight loss. Methods: In this study, 22 obese volunteer women with a body mass index (BMI) of >= 40 kg/m(2) who underwent laparoscopic sleeve gastrectomy (LSG) were evaluated. Three days before surgery, a Symptom Check List-90, Benton Judgment of Line Orientation (JoLO) Test, and Rey Complex Figure Test (RCFT) were applied to participants. All participants were reevaluated 12 months after surgery through these tests. Results: The BMI of the participants decreased by 21.95-49.41% after the LSG. The mean JoLO scores and mean RCFT short- and long-term memory scores were observed to have increased significantly after 12 months (p = 0.014, p = 0.001 and p = 0.003, respectively), and the psychopathological complaints of the individuals were also found to have decreased significantly (p = 0.003). Conclusions: The findings revealed that women who have undergone bariatric surgery experienced positive changes in their visual spatial and visual memory performances 12 months after the surgery.

Accession Number: WOS:000498729700001

ISSN: 2168-023X
Record 11 of 104

**Title:** Associated Factors of Psychological Symptoms Among Unemployed Turkish Adults: The Role of Personality Factors and Rumination

**Author(s):** Tuna, E (Tuna, Ezgi); Balci, S (Balci, Seyma)

**Source:** PSYCHOLOGICAL REPORTS  
**Article Number:** UNSP 0033294119886251  
**DOI:** 10.1177/0033294119886251  
**Early Access Date:** NOV 2019

**Abstract:** Unemployment has been associated with adverse mental health outcomes including depression and suicide. In the last decades, unemployment rates have increased substantially in Turkey; yet, factors and mechanisms that play a role in experiencing psychological symptoms among unemployed individuals are not well understood. The aim of this study was to investigate the role of personality characteristics on psychological symptoms among unemployed Turkish adults and to test the mediating role of rumination as a dysfunctional cognitive strategy. The sample consisted of 217 unemployed Turkish adults who completed self-report measures on neuroticism, external locus of control, rumination, and psychological symptoms. The results of the structural equation modeling indicated that rumination partially mediated the relationship between personality variables (i.e., neuroticism and external locus of control) and psychological symptoms, thus verifying the hypothesis of the study. The direct paths from trait neuroticism and external locus of control to psychological symptoms were also significant. Results revealed that a tendency to attribute future outcomes to external factors and an increased tendency to experience negative emotions are associated with engaging passively in rumination, which in turn predicts psychological symptoms. Interventions are suggested to focus on effective coping strategies along with increasing individuals' perceived control over life and future.

**Accession Number:** WOS:000497122100001

**PubMed ID:** 31735117

**Author Identifiers:**

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**ISSN:** 0033-2941  
**eISSN:** 1558-691X

Record 12 of 104

**Title:** Cognitive Flexibility Mediates the Relationship between Big Five Personality Traits and Life Satisfaction

**Author(s):** Odaci, H (Odaci, Hatice); Cikrikci, O (Cikrikci, Ozkan)

**Source:** APPLIED RESEARCH IN QUALITY OF LIFE  
**Volume:** 14  
**Issue:** 5  
**Pages:** 1229-1246  
**DOI:** 10.1007/s11482-018-9651-y  
**Published:** NOV 2019

**Abstract:** The aim of this study was to investigate the mediator role of cognitive flexibility in the relation between five-factor personality traits and life satisfaction. The sample in present cross-sectional research consisted of 620 university students, 460 female and 157 male. Samples ranged in age between 18 and 32, with a mean age of 20.80 (SD=2.07). Participants filled out the Five-Factor Personality Inventory, the Cognitive Flexibility Inventory and the Satisfaction with Life Scale. The personality traits of extraversion, agreeableness, conscientiousness and neuroticism emerged as significant predictors of life satisfaction. Additionally, there were significant relationships among personality traits, cognitive flexibility and life satisfaction. The mediation results revealed that cognitive flexibility is a significant mediator in the relation between personality traits and life satisfaction. These results provide information regarding a
possible through which cognitive flexibility with its own dynamics may improve the
determination of hedonic gains affection satisfaction with life.

Accession Number: WOS:000504340700005

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ISSN: 1871-2584
eISSN: 1871-2576

Record 13 of 104

Title: Evaluation of clinical and suicidal behavior characteristics among urban, Turkish middle-age depressive patients with comorbid attention deficit hyperactivity disorder

Author(s): Delibas, DH (Delibas, Dursun Hakan); Erdogan, E (Erdogan, Esin); Gulseren, S (Gulseren, Seref)

Source: INDIAN JOURNAL OF PSYCHIATRY Volume: 61 Issue: 6 Pages: 612-617 DOI: 10.4103/psychiatry.IIndianJPsychiatry_448_18 Published: NOV 2019

Abstract: Background: In the presence of attention deficit hyperactivity disorder (ADHD) together with additional psychiatric diseases, the treatment process and prognosis of both ADHD and psychiatric comorbidity are adversely affected.

Aims: The aim of this study is to compare the characteristics concerning suicidal behavior of the patients diagnosed with major depressive disorder either having (ADHD+) or not having (ADHD-) adult ADHD comorbidity and their responses to depression treatment.

Materials and Methods: Ninety-six inpatients were included in the study. Sociodemographic data form, the Hamilton Depression Rating Scale (HDRS), the Wender Utah Rating Scale (WURS), the Adult ADD/ADHD DSM IV-Based Diagnostic Screening and Rating Scale, and the Personal and Social Performance Scale (PSP) were applied to the cases.

Results: HDRS scores were found to be significantly high (P < 0.000) in the ADHD+ group during admission and discharge. However, there was no difference found in terms of PSP scores (P = 0.46) during discharge. In the ADHD+ group, the depressive episode started at an earlier age (P < 0.011). The idea of suicide (P < 0.018) and suicidal attempts (P < 0.022) was found to be higher in this group compared to the ADHD-group. ADHD+ patients had more suicidal attempts requiring more medical intervention (P < 0.001).

Conclusion: Depression starts at an early age in individuals with comorbid ADHD diagnosis, and the progress of the depression treatment changes negatively. This patient group is at greater risk in terms of suicidal behavior. Therefore, it should be considered by the clinicians that ADHD can associate with depression while making the follow-up plans for the cases diagnosed with depression.

Accession Number: WOS:000502755300011

PubMed ID: 31896868

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ISSN: 0019-5545
eISSN: 1998-3794

Record 14 of 104
Title: Does psychotherapy improve alexithymia? A comparison study among patients with mild or moderate depression

Author(s): Yilmaz, O (Yilmaz, Onur); Mircik, AB (Mircik, Ali Barlas); Kunduz, M (Kunduz, Merve); Combas, M (Combas, Muge); Ozturk, A (Ozturk, Ahmet); Deveci, E (Deveci, Erdem); Kirpinar, I (Kirpinar, Ismet)


Abstract: Background: Alexithymia is reported to be a risk factor for depression. Psychotherapy is efficient for treatment of depression. Yet, the effect of psychotherapies on alexithymia is poorly understood. Objectives: We aimed to compare Cognitive Behavioral Therapy (CBT), Existential Psychotherapy (ExP) and Supportive Counseling (SUP) for therapeutic efficacy and effect on alexithymia in depression. Methods: There were 22 patients for each patient group. Sessions were performed as eight consecutive weekly and following two monthly boosters. Sixty six healthy controls were added. Prior to the sessions, patients received Sociodemographic Data Form, the Structured Clinical Interview for DSM-IV Axis I Disorders (SCID-1), Hamilton Depression Rating Scale (HDRS) and 20-item Toronto Alexithymia Scale (TAS-20). The control group received Sociodemographic Data Form, SCID-1 and TAS-20. Patients additionally received HDRS and TAS-20 after their weekly and booster sessions. Results: Patients' mean TAS-20 score was greater than of controls, however, it did not have a significant change throughout the study. Mean HDRS scores of ExP and CBT groups were lower than SUP group at the end. Discussion: Alexithymia did not improve with psychotherapy. The exception was effect of ExP on externally oriented thinking. Psychotherapies all improved depression. CBT and ExP were more helpful than SUP.

Accession Number: WOS:000499670700004

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ISSN: 0101-6083
eISSN: 1806-938X

Record 15 of 104

Title: Intrinsic functional connectivity in social anxiety disorder with and without comorbid attention deficit hyperactivity disorder

Author(s): Ergul, C (Ergul, Ceylan); Ulasoglu-Yildiz, C (Ulasoglu-Yildiz, Cigdem); Kurt, E (Kurt, Elif); Koyuncu, A (Koyuncu, Ahmet); Kicik, A (Kicik, Ani); Demiralp, T (Demiralp, Tamer); Tukel, R (Tukel, Rait)

Source: BRAIN RESEARCH Volume: 1722 Article Number: 146364 DOI: 10.1016/j.brainres.2019.146364 Published: NOV 1 2019

Abstract: Neuroimaging research about social anxiety disorder (SAD) points to hyperactivity in the fear circuit and altered connectivity between the fear circuit and the intrinsic connectivity networks that modulate it. We investigated intrinsic functional connectivity changes in SAD patients by taking into consideration the commonly overlooked comorbidity of attention deficit hyperactivity disorder (ADHD). We compared intrinsic functional connectivity alterations in 16 patients with pure SAD, 18 patients with SAD and comorbid ADHD and 21 healthy controls using seed-to-voxel functional connectivity analyses. Hypoconnectivity of the right fusiform gyms with the left lingual gyrus was the unique difference between whole SAD group and
healthy controls, while in the pure SAD group the fusiform gyrus displayed hypoconnectivity with the posterior default mode network (DMN) regions. In contrast, ADHD comorbidity was associated with hyperconnectivities of the salience network (SN) with the fusiform cortex and the posterior DMN regions, and hyperconnectivities of the posterior DMN with visual, somatosensory and motor cortices. The dichotomic dissociation of the SAD related functional connectivity changes into hypoconnectivities in the pure SAD group vs hyperconnectivities in the SAD-ADHD group leads also to the question, whether ADHD treatment can be considered an alternative for selected SAD cases.

Accession Number: WOS:000491301400022
PubMed ID: 31400309

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ISSN: 0006-8993
eISSN: 1872-6240

Record 16 of 104
Title: The impact of hereditary angioedema on quality of life and family planning decisions
Author(s): Tuncel, OK (Tuncel, Ozlem Kuman); Gokmen, NM (Gokmen, Nihal Mete); Demur, E (Demur, Ece); Gulbahar, O (Gulbahar, Okan); Pirildar, S (Pirildar, Sebnem)
Source: INTERNATIONAL JOURNAL OF PSYCHIATRY IN MEDICINE Volume: 54 Issue: 6 Pages: 377-394 DOI: 10.1177/0091217419837068 Published: NOV 2019
Abstract: Objective Hereditary angioedema is a serious disease with unpredictable attacks. It has an impact on patients' health-related quality of life. This study aimed to assess the quality of life of the hereditary angioedema patients and to investigate the relationship between quality of life and demographic, clinical, laboratory, and psychiatric parameters. Method A semistructured face-to-face interview, Hamilton depression rating scale, and Hamilton anxiety rating scale were performed by a psychiatrist. Participants completed Medical Outcomes Study Short Form-36, Revised Form of the Multidimensional Scale of Perceived Social Support, Anxiety Sensitivity Index-3, and Adult Separation Anxiety Questionnaire. Patients' complement results were recorded, and clinical data obtained by interview were cross-checked from patients' files. Results In 33 hereditary angioedema patients, subscales of the Study Short Form-36, except for physical functioning, vitality, and mental health were significantly lower compared with population norms. Quality of life scores were found to be correlated with depression, anxiety, anxiety sensitivity, separation anxiety, perceived social support, perceived discrimination, perceived limitation, treatment naive C1-Inhibitor function, and C1q level. Physical role functioning scores were better in the patients using attenuated androgens (p = 0.006, t = -3.027). Hereditary angioedema contributed to the marital problems and childbearing decisions of the patients. Conclusion Hereditary angioedema results in significant impairment in quality of life of the patients and has an impact on family life and life style of the patients. In case of depressive and/or anxiety symptoms, patients should be referred to psychiatrists for better quality of life. Higher levels of C1-inhibitor function and C1q seem to correlate with better quality of life; these needs to be further studied.
Accession Number: WOS:000486236600002
Assessing the treatment adherence and clinical correlates of low adherence among bipolar disorder outpatients: a cross-sectional study

Author(s): Karadag, H (Karadag, Hasan); Kokurcan, A (Kokurcan, Ahmet); Guriz, SO (Guriz, Seher Olga); Atmar, M (Atmar, Mehlika); Orsel, S (Orsel, Sibel)

Source: PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY  Volume: 29  Issue: 4  Pages: 558-564  DOI: 10.1080/24750573.2018.1480082  Published: OCT 2 2019

Abstract: OBJECTIVE: The aim of this study was to assess sociodemographic and clinical correlates of poor treatment adherence among outpatients with bipolar disorder (BD) in remission period.

METHODS: This was a cross-sectional study carried out in a University Hospital in Turkey, and 117 outpatients with BD according to DSM-IV-TR criteria were included. All participants were administered a sociodemographic form, the SCID-I, the Morisky 8-item Medication Adherence Questionnaire, the Hamilton Depression Scale, the Young Mania Rating Scale, Schedule for Assessing the three components of insight, and Global Assessment of Functioning Scale. Collected data were analysed via descriptive statistics and logistic regression was used to determine significant variables.

RESULTS: Patients with poor treatment adherence were low educated, were more likely to be not married, and had a greater prevalence of anxiety disorder comorbidity. The patients with poor adherence also showed more subsyndromal depressive symptoms but no significant differences were seen in terms of age, gender, living status, social support, or number of episodes between patients with good and poor adherence. Logistic regression analyses revealed that comorbid anxiety disorder, lower education level, and duration of depression period were the main predictors of poor adherence.

CONCLUSION: This outcome is consistent with previous studies, and assuring complete adherence in all bipolar patients is difficult, but increasing the number of adherent patients is possible and substantial for sufficient outcome. Improving subsyndromal symptoms and awareness of the patient about the features of the disorder may provide better adherence to treatment and greater functionality of the patient. Psychotherapeutic interventions and psychoeducation should be implemented along with the medical treatment to improve subsyndromal symptoms and to avoid treatment maladherence in advance. Further research is needed to assess the role of interventions in treatment adherence of patients with BD.

Perinatal Anxiety Screening Scale validity and reliability study in Turkish (PASS-TR validity and reliability)
Abstract: BACKGROUND: Anxiety disorders are common in women. This sensitivity extends into the perinatal period as well. Thus, screening for anxiety disorders during the aforementioned period is important for the proper management and treatment of conditions. This study was conducted to assess the validity and reliability of the Perinatal Anxiety Screening Scale, which was determined to be beneficial for the purposes listed above.

METHOD: For this study, the "Perinatal Anxiety Screening Scale" (PASS) was translated into Turkish and relabelled "Perinatal Anksiyete Tarama olcei" (PASS-TR). 312 perinatal women were then evaluated with: the ICD 10 diagnosis system, SCID-1, the Hamilton Anxiety Scale, Hamilton Depression Scale, Beck Anxiety Scale, and PASS-TR. The resulting data was examined using Pearson Correlation analysis, Reliability tests, ROC analysis, and Factor analysis. The generated sub-dimensions were re-examined again by confirmatory factor analysis and Root Mean Square Error of Approximation (RMSEA), Root Mean Square Residual (RMR), Standardized Root Mean Square Residual (SRMR) chi(2)/sd, the Goodness of Fit Index (GFI), Adjusted Goodness of Fit Index (AGFI), Comparative Fit Index (CFI), Akaike's Information Criterion (AIC), and the Bayesian Information Criterion (BIC).

RESULTS: In this assessment, Cronbach's Alpha value for the scale is = 0.95, and the sub-dimensions obtained by explanatory factor analysis are: (1) general anxiety and specific fear, (2) perfectionism and control, (3) social anxiety and adjustment disorder, (4) acute anxiety and trauma. The cut-off score for the scale is 16. As a result, it was determined that PASS-TR is an accurate method for the scanning of anxiety disorders in the perinatal period.

CONCLUSION: PASS-TR can be validly and reliably used to scan for anxiety disorders amongst perinatal women.
performed to identify relationships between resilience and the other variables examined.

RESULTS: We found a negative correlation between resilience and novelty seeking (NS) and harm avoidance (HA), but no correlation was found between resilience and self transcendence (ST) (respectively, r: -0.26, p < 0.01; r: -0.45, p < 0.01; r: -0.07, p > 0.05). There were positive correlations between resilience and the other temperament and character dimensions (respectively, r: 0.14, p > 0.05; r: 0.29, p < 0.01; r: 0.56, p < 0.01; r: 0.37, p < 0.01). The TCI dimensions of persistence (P), self-directedness (SD), and ST (F: 7.3, df: 7, p < 0.01, adj.R^2: 0.16) predicted resilience.

CONCLUSION: There are significant relationships between resilience and personality dimensions in chronic psychiatric patients. Our results indicate that, consistent with Cloninger's model, both environment (i.e. character dimensions) and genetic endowment (i.e. temperament dimensions) contribute to resilience, which involves lower levels of HA and higher levels of P and SD in psychiatric inpatients whose diseases have acquired chronicity.

Accession Number: WOS:000510621700026

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ISSN: 2475-0573
eISSN: 2475-0581

Record 20 of 104

Title: Behavioural and psychological symptoms of Alzheimer's disease associated with caregiver burden and depression

Author(s): Bozgeyik, G (Bozgeyik, Gamze); Ipekcioglu, D (Ipekcioglu, Derya); Yazar, MS (Yazar, Menekse Sila); Ilnem, MC (Ilnem, Mehmet Cem)

Source: PSYCHIATRY AND CLINICAL PHARMACOLOGY Volume: 29 Issue: 4 Pages: 656-664 DOI: 10.1080/24750573.2018.1541646 Published: OCT 2 2019

Abstract: OBJECTIVE: The aim of the study was to investigate the relationship between behavioural and psychological symptoms of Alzheimer's disease with caregiver burden and depression.

METHODS: In this prospective and clinic-based study, 71 patients over 65 years of age diagnosed with Alzheimer's disease according to DSM IV diagnostic criteria who were admitted to Bakirkoy Prof. Dr. Mazhar Osman Research and Training Hospital for Psychiatry, Neurology and Neurosurgery between April 2014 and November 2014 and their 71 caregivers were included in the study. Information on patients and caregivers were assessed using the sociodemographic and clinical data form. The Standardized Mini Mental State Examination (SMMSE) and the Global Deterioration Scale (GDS) were used to determine disease severity and stage. The Neuropsychiatric Inventory (NPI) was used to assess the behavioural and psychological symptoms of the patients. Caregivers' burden and depression were assessed using the Zarit Caregiver Burden Scale (ZCBS) and the Hamilton Depression Rating Scale (HAM-D). SPSS 22.0 program was used for the statistical analysis of data.

RESULTS: The average age of the caregivers was 52, 81.7% (n: 58) were female and 53.5% (n: 38) were the patients' daughters. Caregiver burden was found to be mild in 50.7% (n: 36), moderate in 15.5% (n: 11) and heavy in 33.8% (n: 24) of caregivers. Depression was found to be mild in 19.7% (n: 14), moderate in 19.7% (n: 14) and severe in 4.2% (n: 3) of caregivers. The most common behavioural and psychological symptoms were: apathy (60.6%), delusions (57.7%), depression / dysphoria (56.3%), hallucinations (53.5%), irritability (47.9%), anxiety (32.4%), abnormal motor behaviour (29.6%), agitation / aggression (26.8%), eating-appetite changes (26.8%) and elation / euphoria (1.4%). Patient caregivers in the group with more
behavioural and psychological symptoms had more caregiving burden and depression. Symptoms having a significant effect on caregiver burden were delusions, hallucinations, agitation/aggression, depression/dysphoria, anxiety, apathy, disinhibition, irritability, abnormal motor behaviour. Behavioural and psychological symptoms that correlate with caregiver depression are agitation/aggression, anxiety, disinhibition, irritability. In the correlation analysis between NPE and ZCBS factor groups, only the factor 4 showing the economic burden did not show any significant correlation.

CONCLUSION: Results show that behavioural and psychological symptoms in Alzheimer's patients increase the caregiver burden and cause caregiver depression. Preventive measures to prevent the emergence of such symptoms and effective and rapid intervention are required. Further multi-center studies with a prospective design, involving different cultures, patients from a wider population, different care settings are required.

CONCLUSION: Results show that behavioural and psychological symptoms in Alzheimer's patients increase the caregiver burden and cause caregiver depression. Preventive measures to prevent the emergence of such symptoms and effective and rapid intervention are required. Further multi-center studies with a prospective design, involving different cultures, patients from a wider population, different care settings are required.

Accession Number: WOS:000510621700027

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ISSN: 2475-0573
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Record 21 of 104
Title: The relationship between somatic sense perception levels and comorbid psychiatric diseases in chronic pain patients

Author(s): Cakmak, S (Cakmak, Soner); Ozbek, HT (Ozbek, Hayri Tevfik); Isik, AG (Isik, Abdulkadir Geylan); Tasdemir, A (Tasdemir, Ali); Pektas, S (Pektas, Sinan); Unlugenc, H (Unlugenc, Hakki); Tamam, L (Tamam, Lut); Demirkol, ME (Demirkol, Mehmet Emin)


Abstract: The purpose of the study was to evaluate any comorbid psychiatric disorders in patients with chronic pain and to examine the effects of sociodemographic details and the level of somatic sense perception on the severity of these diseases.

Methods: In this study, 51 chronic pain patients were evaluated in a consultation with a psychiatrist. Sociodemographic characteristics of the patients, such as age, gender, education level, and marital status were recorded, and Structured Clinical Interview for DSM-IV results were assessed. The patients' chronic pains were classified as idiopathic or secondary to organic etiology. In addition, the Symptom Checklist-90, Somatosensory Amplification Scale (SSAS), Hamilton Depression Rating Scale, and the Hamilton Anxiety Scale (HAM-A) were used.

Results: The incidence of psychiatric disorders in chronic pain patients was found to be 74.5%. Somatoform disorders were the most frequently diagnosed, at 37.3%. The rate of depressive and anxiety disorders was, respectively, 29.4% and 23.5%. Comorbid anxiety scores (p=0.019) and SSAS scores (p=0.046) were significantly higher in chronic pain patients with a somatoform disorder. HAM-A scores were found to be significantly higher in patients with depression (p=0.004). A positive and linear relationship was determined between the SSAS score and depression, anxiety, and the severity of mental symptoms.

Conclusion: Structured or semi-structured interviews can be performed in pain polyclinics or psychiatric outpatient clinics to determine the level of perception of somatic sensations. This could be beneficial in the treatment of chronic pain and comorbid psychiatric disorders.

Accession Number: WOS:000496919400004

PubMed ID: 31741346

Author Identifiers:
Assessment of depressive symptoms, self-esteem, and eating psychopathology after laparoscopic sleeve gastrectomy: 1-year follow-up and comparison with healthy controls

**Author(s):** Calisir, S (Calisir, Saliha); Calisir, A (Calisir, Akin); Arslan, M (Arslan, Mehmet); Inanli, I (Inanli, Ikbal); Caliskan, AM (Caliskan, Ali Metehan); Eren, I (Eren, Ibrahim)

**Source:** EATING AND WEIGHT DISORDERS-STUDIES ON ANOREXIA BULIMIA AND OBESITY DOI: 10.1007/s40519-019-00785-7 Early Access Date: OCT 2019

**Abstract:** Purpose The aim of this study was to assess depressive symptoms, self-esteem, and eating psychopathology in bariatric surgery patients at the preoperative period (t0) and at the 6-month (t1) and 12-month (t2) follow-ups after laparoscopic sleeve gastrectomy (LSG). A second aim was to investigate associations between these variables and weight loss. Method The study participants were 48 bariatric surgery candidates and 50 non-obese controls. Both groups underwent assessment with the Sociodemographic Data Form, Hamilton Depression Rating Scale (HDRS), Eating Disorder Examination Questionnaire (EDE-Q), and Rosenberg Self-esteem Scale (RSES). These assessments were repeated for the patient group at t1 and t2. Results The HDRS, RSES, and EDE-Q scores were higher in the patients before LSG (t0) than in the control group. A significant progressive improvement was identified in the patient HDRS and RSES scores as well as EDE-Q weight and shape subscale scores at t1 and t2. However, the patient EDE-Q total and dietary restraint scores improved at t1 then stabilized. The patient EDE-Q eating concern subscale improved at t1, but then worsened. The patient HDRS scores at t2 were similar to the control group, but the EDE-Q and RSES scores were still higher than the control scores at t2. Regression analyses revealed no association between the preoperative scores and percent changes in postoperative scores for any scale and patient weight loss at t2. Conclusion Depressive symptoms, self-esteem, and eating psychopathology showed an improving trend in patients after LSG. However, some aspects of eating psychopathology worsened despite an initial improvement.

**Accession Number:** WOS:000488896100001
**PubMed ID:** 31576497

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**ISSN:** 1124-4909
eISSN: 1590-1262

A cross-sectional study comparing some clinical features of patients with rapid cycling and non-rapid cycling bipolar disorder

**Author(s):** Ozen, ME (Ozen, Murat Eren); Yilmaz, MB (Yilmaz, Mehmet Bertan)

**Source:** ANADOLU PSIKIYATRI DERGISI-ANATOLIAN JOURNAL OF PSYCHIATRY Volume: 20 Issue: 5 Pages: 477-484 DOI: 10.5455/apd.22515 Published: OCT 2019

**Abstract:** Objective: Literature indicates that rapid cycling (RC) feature in bipolar disorder (BD) has been associated with worse disorder outcome and more severe disability. We aimed to
investigate factors that affect or involved in vulnerability to increase rapid cycling in the previous 12 months. Methods: This is a cross-sectional study. Patients (n=380) were recruited from an outpatients clinic of a general hospital. Diagnostic interviews were performed with Structured Clinical Interview for DSM-IV Disorders (SCID-I) and SCID-II. Sociodemographic Form, Young Mania Rating Scale (YMRS) and Hamilton Depression Rating Scale (HAM-D) were applied. RC was defined as presence four or more mood episodes in the previous 12 months. Patients were arranged as whether having rapid cycling bipolar disorder (RCBD) or not. RCBD was compared to the group of non-RCBD patients regarding the sociodemographic and clinical data. Results: Study group showed a female preponderance (65.0%). Sixty patients (15.8%) had RC in the previous 12 months. There were statistically significant differences between two groups regarding number of suicide attempts, family history of mood disorders, psychotic depression, number of antidepressants utilized, manic, depressive, mixed and total number of episodes. Discussion: The presence of RC in the previous 12 months was found correlated with specific clinical features closely related to worse outcome in the course of BD. Further studies are needed to clarify disease-related factors in patient groups with a standard definition of homogeneous RCBD.

**Accession Number:** WOS:000486651400004

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**ISSN:** 1302-6631

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**Record 24 of 104**

**Title:** Subjective quality of life among patients with schizophrenia spectrum disorder and patients with major depressive disorder

**Author(s):** Tan, XW (Tan, Xiao Wei); Seow, E (Seow, Esmond); Abdin, E (Abdin, Edimansyah); Verma, S (Verma, Swapna); Sim, K (Sim, Kang); Chong, SA (Chong, Siow Ann); Subramaniam, M (Subramaniam, Mythily)

**Source:** BMC PSYCHIATRY Volume: 19 Issue: 1 Article Number: 267 DOI: 10.1186/s12888-019-2248-7 Published: SEP 2 2019

**Abstract:** Background The goal of clinicians and healthcare workers providing treatment to patients with psychiatric disorders, has shifted over time from focusing on the symptoms alone towards functional improvement. In this study, we aimed to compare the subjective quality of life (QoL) among patients with schizophrenia spectrum disorders and major depressive disorder (MDD). Methods QoL scores were collected using 36-item Short Form Survey Instrument. QoL scores were compared between 203 outpatients with schizophrenia spectrum disorders and 185 outpatients with MDD using analysis of covariance. The Positive and Negative Syndrome Scale was administered to assess the severity of psychiatric symptoms among patients with schizophrenia and Personal Health Questionnaire-8 items was utilized to assess the severity of depressive symptoms among patients with MDD. The correlation coefficient (r) of sociodemographic factors and core psychiatric symptoms with QoL were analyzed using multiple linear regression. Results As compared to patients with MDD, patients with schizophrenia reported better health scores in all QoL subdomains, except for physical function (PF). Among patients with schizophrenia, old age was correlated with better mental health (MH, r = 0.35) and PF (r = 0.37). Compared to those of Chinese ethnicity, those of Malay, Indian and other ethnicity were correlated with worse PF (r = - 0.43 for Malays; r = - 0.30 for Indians and r = - 0.34 for other ethnicities). Longer duration of mental illness was correlated with worse MH (r = - 0.30), worse PF (r = - 0.38) and worse scores on role limitations due to physical health problems (RP, r = - 0.30). Among patients with MDD, older age was correlated with worse PF (r = - 0.33) and patients without comorbid physical illness reported less bodily pain (r = 0.45) and better general...
health (r = 0.34). Moreover, all psychiatric symptoms among patients with schizophrenia were negatively correlated with QoL, but the strength of the correlation was less than that between depressive symptoms and QoL among patients with MDD. Conclusion Patients with schizophrenia generally reported better QoL as compared to patients with MDD. The correlates of QoL differed between patients with schizophrenia and patients with MDD. This study adds to the understanding of QoL among patients with mental illnesses and may aid in better management of these patients with different psychiatric diagnoses.

Accession Number: WOS:000483665600002
PubMed ID: 31477079
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eISSN: 1471-244X

Record 25 of 104
Title: Assessment of the Functioning Levels and Related Factors in Patients with Bipolar Disorder during Remission
Author(s): Hacimusalar, Y (Hacimusalar, Yunus); Sezgin Dogan, E (Sezgin Dogan, Esra)
Source: NOROPSIYATRI ARSIVI - ARCHIVES OF NEUROPSYCHIATRY Volume: 56 Issue: 3 Pages: 213-218 DOI: 10.29399/npa.23539 Published: SEP 2019
Abstract: Introduction: The course of bipolar disorder (BD) is characterized by relapse and remission periods. Although the symptoms show a significant and sometimes almost complete improvement during remission, the patients' functioning levels may be lower compared to the premorbid period. This study aimed to compare the functional levels between patients with BD during remission period and healthy controls and to evaluate the factors related to the functional status of the patients.
Methods: In this cross-sectional study, functioning levels of the BD-I patients, who were in remission for three months or longer, were compared with those of the healthy controls. Young Mania Rating Scale and Hamilton Depression Rating Scale were used to determine remission status, and Bipolar Disorder Functioning Questionnaire (BDFQ) was used to determine the level of functioning.
Results: The study included 165 BD-I patients during remission and 63 healthy controls. The BDFQ scores of the patients including intellectual functioning, sexual functioning, feeling of stigmatization, introversion, relationships with friends, participation in social activities, daily activities and hobbies, and taking initiative were found to be statistically significantly lower than those of the controls. When the functioning comparisons were carried out within the patients considering the drugs they were using, the functioning levels including domestic functioning and introversion domains were found to be significantly impaired in those who use at least one antipsychotic in addition to the mood stabilizers than in those who use only mood stabilizers. Conclusion: In BD, the impairments with in multiple functioning domains are observed even during remission periods. Besides targeting remission through pharmacological treatment, psychosocial interventions for functioning are also important in the treatment of these patients.
Accession Number: WOS:000503184000011
PubMed ID: 31523149
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Record 26 of 104
Title: Optical coherence tomography findings in bipolar disorder: a preliminary receiver operating characteristic analysis on ganglion cell layer volume for diagnosis
Author(s): Alici, S (Alici, Soner); Onur, OS (Onur, Ozge Scahmelikoglu); Cavusoglu, E (Cavuscoglu, Ercan); Onur, IU (Onur, Ismail Umut); Erkiran, M (Erkiran, Murat)
Abstract: Background: Optical coherence tomography (OCT) has been recently used to investigate neuropsychiatric disorders. Objective: The aim of this study was to compare the retinal nerve fiber layer thickness (RNFLT) and the ganglion cell layer (GCL) volume in patients with type 1 bipolar disorder (BPD1, diagnosed according to DSM 5) to the values in healthy controls. Methods: Eighty consecutive outpatients with a diagnosis of euthymic BPD1 and 80 healthy controls were enrolled in the study. Following assessment with the Sociodemographic Data Form, Structured Clinical Interview for DSM-IV (SCID-I), Hamilton Depression Scale and Young Mania Evaluation Scale, both groups underwent Optical coherence tomography (OCT). Results: The mean RNFL thickness and mean GCL volume were significantly lower in the BPD1 group than in the controls (p < 0.05). The GCL global value had a significant and independent effect in distinguishing the BPD1 patients from the controls. A cut-off value of 101 mm(3) for global GCL volume was proposed to distinguish BPD1 patients from controls with a sensitivity of 87.5%. Discussion: Lower values of GCL volume and RNFLT in patients suffering from BPD1 suggest that neurodegeneration may occur during the course of BPD and that this degeneration can be characterized in particular by a thinning of the GCL volume.
Accession Number: WOS:000499061500003
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ISSN: 0000-0667
eISSN: 1309-4866

Record 27 of 104
Title: Mothers of 0-3-year-old children with Down syndrome: Effects on quality of life
Author(s): Dinc, GS (Dinc, Gulser Senses); Cop, E (Cop, Esra); Tos, T (Tos, Tulay); Sari, E (Sari, Eyup); Senel, S (Senel, Saliba)
Source: PEDIATRICS INTERNATIONAL Volume: 61 Issue: 9 Pages: 865-871 DOI: 10.1111/ped.13936 Published: SEP 2019
Abstract: Background The aim of this study was to assess the quality of life (QoL) of mothers of children with Down syndrome (DS) and the factors related to it. Methods Seventy-five DS child-mother diads and 54 healthy child-mother diads were included in this study. The brief World Health Organization Quality of Life scale - Turkish version (WHOQOL-BREF-TR), Symptom Check List-90-Revised (SCL-90-TR), Beck Depression Inventory, Beck Anxiety Inventory and Maslach Burnout Inventory (MBI) were completed by mothers to assess maternal QoL, burnout, anxiety, depression and general psychiatric symptoms. Results Mothers of DS children had
significantly higher SCL-90 general symptom index scores, Beck depressive symptom scores and higher scores in all domains of the brief World Health Organization Quality of Life scale - (WHOQOL-BREF-TR) except the WHOQOL-BREF-TR-psychological health domain. MBI personal achievement scores were weakly correlated with psychological health in mothers of DS children. There was a reverse correlation between comorbid disorders and the WHOQOL-BREF-TR psychological health domain, and a weak correlation between sex (having a baby girl with DS) and increased WHOQOL-BREF-TR physical health domain score. Number of offspring was negatively correlated with maternal social quality of life. Conclusion Mothers of children with DS are negatively affected in terms of QoL and mental health, even in the early period. It would be useful to systematically screen these mothers and to refer them for appropriate intervention at an early stage.

Accession Number: WOS:000490896300004
PubMed ID: 31267616
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ISSN: 1328-8067
eISSN: 1442-200X

Record 28 of 104
Title: The Relationship Between State-trait Anxiety and Childhood Trauma in Patients with Acute Chest Pain
Author(s): Dogan, B (Dogan, Bilge)
Abstract: Aim: In the present study, we examined to investigate whether state and trait anxiety are related to childhood trauma in patients with acute chest pain (ACP). We hypothesized that childhood trauma and/or state-trait anxiety may be predictive for the distinction between non-cardiac (NCCP) and cardiac chest pain (CCP).
Materials and Methods: A diagnostic interview with 102 ACP patients was performed with DSM-IV Structured Clinical Interview-I (SCID-I). The State and Trait Anxiety Scale I-II (STAI I-II), Hamilton Depression Rating Scale (HDRS), and the short form of Childhood Trauma Scale (CTS-SF) were used to determine the level of state-trait anxiety, depression, and childhood trauma, respectively. The patients with NCCP (n=63) and CPP (n=39) were compared in terms of several sociodemographic and clinical variables. In addition to the correlation analyses, logistic regression analyses were performed to determine the associations of trait anxiety, and origin of cardiac pain.
Results: The rate of male patients tended to be higher in the CCP group compared to the NCCP group (p=0.06). The patients in the NCPP group were younger than those in the CCP group (p<0.0001). In total sampling, the STAI II scores were significantly correlated with total, physical, and emotional abuse subscale scores of CTQ-SF and with the scores of HDRS. Logistic regression analyses indicated that female gender and earlier age were associated with NCCP.
Conclusion: In our study, higher levels of trait anxiety seemed to be correlated with total, emotional, and physical subscale scores of CTQ-SF. Earlier age and female gender were found to be the predictors for non-cardiac origin of the chest pain.
Accession Number: WOS:000489681000004
ISSN: 2149-5807
eISSN: 2149-6048
Record 29 of 104

Title: Relation of quality of life with clinical and demographic features in patients with obsessive-compulsive disorder: The effect of insight and suicidality

Author(s): Ekinci, AE (Ekinci, Asli Erkan); Ekinci, O (Ekinci, Okan)


Abstract: Objective: Obsessive-compulsive disorder (OCD) may affect the quality of life (QOL), family relations, professional performance, and relationships of the individual in many other areas. The evidence has emphasized the relevance of examining QOL as a critical outcome in mental health studies. This study aimed to examine possible effects of clinical and demographic features including insight and suicidality on the QOL in patients with OCD.

Method: The sample of this study consists of 80 patients diagnosed with OCD according to DSM-IV and 80 healthy volunteers. A sociodemographic and clinical data form and the World Health Organization Quality of Life brief form-Turkish version (WHOQOOL-BREF-TR) were administered to the participants. In addition, the patient group was assessed with the Yale-Brown Obsessive-Compulsive Scale (Y-BOCS) and the Hamilton Depression Rating Scale (HAM-D). Insight was evaluated by using the insight item of Y-BOCS and the Overvalued Ideas Scale (OVIS).

Results: The average scores for the physical health, psychological health, and social relationship domains of WHOQOOL-BREF-TR were lower in the patient group; however, there was no significant difference in the environmental health domain between the two groups. Negative correlations were found between the severity of the disease, age at illness onset and QOL subdomains. Besides, a history of suicide attempt had a statistically significant effect on all subscales of quality of life. Insight had no significant effect on any QOL subscale.

Conclusion: This study shows that the quality of life is affected in OCD and this is partly related to the severity of the disease and suicidality but not to insight. Considering the effects of quality of life in both the treatment and follow-up of this patient group, the importance of identifying the factors affecting the quality of life will be better understood in OCD patients. Further large-scale longitudinal studies are needed to clarify this issue.

Accession Number: WOS:000488251200003
ISSN: 1018-8681
eISSN: 1309-5749

Record 30 of 104

Title: Relationship of internet gaming disorder severity with symptoms of anxiety, depression, alexithymia, and aggression among university students

Author(s): Evren, C (Evren, Cuneyt); Evren, B (Evren, Bilge); Dalbudak, E (Dalbudak, Ercan); Topcu, M (Topcu, Merve); Kutlu, N (Kutlu, Nilay)


Abstract: Objective: The aim of the present study was to evaluate the relationship of Internet gaming disorder severity with alexithymia and aggression among university students, while controlling for effects of anxiety and depressive symptoms.

Method: The study was conducted with an online survey among 987 volunteer university students in Ankara. Participants were evaluated by administering the Toronto Alexithymia Scale (TAS-20), the Buss-Perry Aggression Questionnaire (BPAQ), the Internet Gaming Disorder Scale-Short-Form (IGDS9-SF), and the depression and anxiety subscales of the 90-Item Symptom Checklist-Revised (SCL-90-R).
Results: Scores for the different scales mildly correlated with one another. In hierarchical linear regression analysis, both alexithymia (particularly the dimensions "difficulty identifying feelings" [DIF] and "externally-oriented thinking" [EOT]) and aggression (physical aggression) predicted the severity of Internet gaming disorder symptoms, together with severity of depressive symptoms.

Conclusion: These findings suggest that among university students, the severity of alexithymia, particularly in its dimensions DDF and EOT, is related with the severity of Internet gaming disorder, together with aggression, particularly physical aggression, and depression.

Accession Number: WOS:000488251200006

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ISSN: 1018-8681
eISSN: 1309-5749

Record 31 of 104

Title: The predictive role of forgiveness and the level of repetitive thinking on mental health and marital adjustment in married individuals

Author(s): Gumus, IG (Gumus, Isil Goztepe); Kislak, ST (Kislak, Sennur Tutarel)


Abstract: Objective: A review of the literature reveals that while forgiveness, the importance attached to negative experiences to be forgiven, and repetitive thinking are associated with marital adjustment, the role of variables regarding close relationships has so far received little attention from researchers. As the marital relationship, one of the most important interpersonal relations, correlates to mental health, this study aims to examine jointly the predictive power of relevant variables for psychological symptoms and marital adjustment and additionally to investigate possible gender differences in terms of these research variables.

Method: The sample of this study consisted of 157 married individuals (86 women and 71 men). Marital Adjustment Test (MAT), Brief Symptom Inventory (BSI), Forgiving Personality Scale (FP), Repetitive Thinking Questionnaire (RTQ), Importance Attached to the Incident to be Forgiven Scale (IAIFF), and a Personal Information Form developed by the researchers were administered to married persons. Correlation analysis was conducted to examine the relations between variables; subsequently, hierarchical regression analysis was applied to determine the power of the variables to predict psychological symptoms and marital adjustment. One-way MANOVA was used to reveal gender differences with regard to the research variables.

Results: Regression analysis showed that gender, repetitive thinking, forgiving personality, and the importance given to negative experiences expected to be forgiven predict psychological symptoms. In addition, gender, forgiving personality, and repetitive thinking have a significant predictive value for marital adjustment. Finally, gender differences were found to be significant in marital adjustment, psychological symptoms, repetitive thinking, and the importance attached to negative experiences to be forgiven. It was determined that marital adjustment was lower in women while their psychological symptoms were higher.

Conclusion: This study demonstrates that repetitive thinking and forgiveness are important predictor variables for both mental health and marital adjustment. It also suggests that marital therapists should consider relevant variables in psychotherapy when working with married couples.

Accession Number: WOS:000488251200007

Author Identifiers:
Title: Hopelessness and perceived stress: the mediating role of cognitive flexibility and intolerance of uncertainty

Author(s): Demirtas, AS (Demirtas, Ayse Sibel); Yildiz, B (Yildiz, Banu)


Abstract: Objective: This study aims to explore the relationships among hopelessness, cognitive flexibility, intolerance of uncertainty, and perceived stress in a non-clinical sample by proposing a multiple mediation model. It was suggested that hopeless individuals have low cognitive flexibility and high intolerance of uncertainty; consequently, they are more likely to perceive stress.

Method: The participants of this study comprised 302 university students (46.7% female and 53.3% male) between 18 and 40 years of age who were recruited from a state university in Turkey. To collect data, Beck Hopelessness Scale, Cognitive Flexibility Inventory, Intolerance of Uncertainty Scale, and Perceived Stress Scale were applied.

Results: The results showed that hopelessness is negatively correlated with cognitive flexibility and positively correlated with intolerance of uncertainty and perceived stress. Cognitive flexibility has been found to be negatively correlated with intolerance of uncertainty and perceived stress. There is also a positive correlation between intolerance of uncertainty and perceived stress. The mediation of cognitive flexibility and intolerance of uncertainty in the relationship between hopelessness and perceived stress is also statistically significant in the model, and all variables explain approximately 37.0% of the variance in perceived stress.

Conclusion: The findings of the study are considered to provide a guide for mental health professionals and researchers.

Accession Number: WOS:000488251200009

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DEMIRTAS, AYSE SIBEL | AAH-5928-2020 | 0000-0001-8199-9802

ISSN: 1018-8681
eISSN: 1309-5749
Patients and methods: The study group consisted of 136 females including 68 patients with FMS (mean age 43 +/- 10.4 years; range, 25 to 70 years) and 68 FMS-free healthy females (mean age 38.5 +/- 11.3 years; range, 22 to 70 years). Following a Structured Clinical Interview for Diagnostic and Statistical Manual-IV Axis I Disorders by a psychiatrist experienced in psychological trauma, Hamilton Depression Rating Scale (HDRS), Hamilton Anxiety Rating Scale (HARS), visual analog scale (VAS) for the severity of pain and Domestic Violence Against Women Scale (DVAWS) were applied.

Results: In FMS group, 85% of the patients were diagnosed with mood or anxiety disorder. Almost half of these patients had major depressive disorder. The total scores of DVAWS and all subscales were significantly higher in the FMS group than in the control group (p<0.01). The severity of domestic violence were related to the presence of any psychiatric disorder only in FMS patients (p<0.01). Almost half of the FMS patients with high DVAWS score had comorbid mood and anxiety disorders. There was a significant positive correlation between the total scores of DVAWS, HDRS, HARS, and VAS (p<0.01).

Conclusion: Although the etiology of FMS is still uncertain, psychosocial factors may play role as risk factors. Therefore, a multidisciplinary approach to the treatment should be considered.
Record 35 of 104
Title: Examination of formal thought disorder and its clinical correlates with the Turkish Version of the Thought and Language Disorder Scale (TALDTR) in schizophrenia
Author(s): Mutlu, E (Mutlu, Emre); Yazici, MK (Yazici, M. Kazim); Bariskin, E (Bariskin, Elif); Ertugrul, A (Ertugrul, Aygun); Gurel, SC (Gurel, S. Can); Gurkan, S (Gurkan, Sahin); Goka, E (Goka, Erol); Yagcioglu, AEA (Yagcioglu, A. Elif Anil)
Source: COMPREHENSIVE PSYCHIATRY Volume: 93 Pages: 7-13 DOI: 10.1016/j.comppsych.2019.06.003 Published: AUG 2019
Abstract: Background: Formal thought disorder (FTD) is considered to be a fundamental feature of schizophrenia. This study aims to analyze psychometric properties of the Turkish version of 'Thought and Language Disorder Scale (TALD)' and investigate the relationship between FTD and various clinical characteristics in patients with schizophrenia.
Methods: TALD was adapted into Turkish and applied to a total of 149 participants of which 114 had DSM-5 psychiatric diagnoses (schizophrenia N = 70, mania N = 20, depression N 24) and 35 were healthy controls. Positive and Negative Syndrome Scale (PANSS), Hamilton Depression Rating Scale, Young Mania Rating Scale, and Clinical Global Impression were administered to detect illness severity. 
Results: The principal component analyses revealed that the Turkish version of TALD (TALD-TR) consisted of four factors including the Objective Positive (OP), Subjective Negative (SN), Objective Negative (ON) and Subjective Positive (SP) symptom dimensions which were in line with the original TALD factorial structure. It was concluded that TALD-TR shows strong construct validity and high interrater reliability. The correlation analyses with TALD-TR and PANSS showed that there are positive correlations between the TALD-TR total score and the PANSS total and subscale scores. Each diagnostic group showed the distinct pattern of FTD. The mania group exhibited the highest mean total score in the OP, whereas the schizophrenia group exhibited the highest mean total score in the ON factor. In the schizophrenia group, the severity of FTD correlated positively with duration of illness and negatively with age at onset of illness.
Conclusion: Adaptation of TALD into different languages seems to be possible, bringing in an international tool for research on FTD. (C) 2019 The Authors. Published by Elsevier Inc.
Accession Number: WOS:000525755500002
PubMed ID: 31276902
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ISSN: 0033-2720
eISSN: 1573-6709

Record 36 of 104
Title: Turkish adaptation of Kessler Psychological Distress Scale: validity and reliability study
Author(s): Altun, Y (Altun, Yasin); Ozen, M (Ozen, Mehmet); Kuloglu, MM (Kuloglu, Mehmet Murat)
Abstract: Objective: Psychological distress is defined as emotional damage characterized by symptoms of depression and anxiety. Aim of study is to adapt Kessler Psychological Distress Scale (K10-PDS) to Turkish and to determine its validity and reliability and use it in psychological distress screenings. Methods: K10-PDS was translated into Turkish according to WHO World Mental Health Initiative Interview Translation Guidelines. A Sociodemographic Information Questionnaire, Beck Depression Inventory for Primary Care (BDI-PC) and Turkish K10-PDS were applied to 200 volunteers between 18-77 years old in Family Medicine and Psychiatry polyclinics of Antalya Training and Research Hospital. Turkish K10-PDS were given again to 55 participants for reliability study four days later. Results: Mean of participants’ Turkish K10-PDS score was 21.8 +/- 10.7. Reliability (Cronbach's alpha) of the Turkish K10-PDS was 0.95. Based on ROC analysis, the area under the curve was found to be 0.958. Spearman-Brown two-quartile test reliability was 0.93, and test-retest correlation coefficient was 0.89. Item-total score correlations ranged between 0.720 and 0.887. At the cut-off point of >20, the sensitivity was 92.0% and specificity was 90.4%. Conclusion: It has been shown that Turkish K10-PDS can be used as a valid and reliable scale for the detection, screening and treatment of depression and anxiety disorders, especially for psychological distress.

Accession Number: WOS:000480458900003

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ISSN: 1302-6631
Conclusion: Emotional and sexual abuse during childhood and depressive symptoms (BDI) were found to be significant risk factors in terms of impulsive, self-injury and suicidal behaviors in BPD.

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Conference Title: 15th European Congress of Psychology (ECP)
Conference Date: JUL 12-14, 2017
Conference Location: Amsterdam, NETHERLANDS
ISSN: 1302-6631

Record 38 of 104
Title: Nurses attitudes towards death, dying patients and euthanasia: A descriptive study
Author(s): Ay, MA (Ay, Melike Ayca); Oz, F (Oz, Fatma)
Source: NURSING ETHICS Volume: 26 Issue: 5 Pages: 1442-1457 DOI: 10.1177/0969733017748481 Published: AUG 2019
Abstract: Background: Attitudes of nurses towards death and related concepts influence end-of-life care. Determining nurses' views and attitudes towards these concepts and the factors that affect them are necessary to ensure quality end-of-life care. Objectives: The purpose of this study was to determine nurses' views and attitudes about death, dying patient, euthanasia and the relationships between nurses' characteristics. Methods: Participants consist of the nurses who volunteered to take part in this descriptive study from 25 hospitals (n = 340) which has a paediatric or adult intensive care unit and located within the boundaries of Ankara, Turkey. 'Nurse Information Form' and 'Attitude Scale about Euthanasia, Death and Dying Patients (DAS)' were used as data collection tool. Ethical consideration: Written permissions were received from the 'Noninterventional Clinical Researches Ethics Board' of authors' university and education councils of each hospital. Informed consent was obtained from participants. Findings: It is found that there are statistically significant difference among the factors of marital status, having a child, years of experience, bereavement experience, affected by working with dying patient, definition of euthanasia, views about patients who are appropriate for euthanasia, views about patients who desire to die and feeling need for counselling on these concepts according to the mean total score of nurses' attitudes about euthanasia, death and dying patient (p < 0.05). Conclusion: The results indicate that nurses are negatively affected to face the concepts of death, euthanasia and work with dying patient. This is reflected in their attitude. In order to gain positive attitude towards death, dying patient and euthanasia, the implementation of training and consulting services to nurses at appropriate intervals during both education and professional life are required.
Accession Number: WOS:000478627500014
PubMed ID: 29495932
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Record 39 of 104
Title: Prevalence of sarcopenia in patients with geriatric depression diagnosis
Author(s): Yazar, HO (Yazar, Hulya Olgun); Yazar, T (Yazar, Tamer)
Source: IRISH JOURNAL OF MEDICAL SCIENCE Volume: 188 Issue: 3 Pages: 931-938 DOI: 10.1007/s11845-018-01957-7 Published: AUG 2019
Abstract: Aim In this study, the aim was to identify the prevalence of sarcopenia among patients with geriatric depression (GD) diagnosis and to collect data to illuminate precautions to reduce disease load.

Method The study was completed with 116 patients (GD group) aged 65 years or older with possible or definite depression diagnosis according to the Geriatric Depression Scale (GDS) criteria and 301 volunteers aged from 18 to 39 years (control 1) and above 65 years (control 2). Our prospective and cross-sectional study applied the Hamilton Depression Rating Scale (HDRS) to control 1 group and the GDS and Mini Mental Test (MMSE) to control 2 and GD groups. All groups had skeletal muscle mass index (SMMI), muscle strength, and physical performance assessed with sarcopenia diagnosis according to the European Working Group on Sarcopenia in Older People (EWGSOP) diagnostic criteria.

Results In our study, in parallel with the severity of disease in patients with GD diagnosis, the prevalence of sarcopenia (led by severe sarcopenia) was observed to be high compared to the control group. The prevalence of sarcopenia was 12.7%/24.2% among women and 13.8%/44.0% among men and 13.4%/32.8% in total in the control 2 and GD groups, respectively. There was a significant increase observed in the prevalence of sarcopenia, led by severe sarcopenia with a definite depression diagnosis.

Conclusion For GD patients, diagnosis of sarcopenia in the early stages and precautions like improving muscle functions with protein support in diet and resistance exercises will make it possible to contribute to improving clinical results of the disease.

Accession Number: WOS:000475743900029
PubMed ID: 30610679

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ISSN: 0021-1265
eISSN: 1863-4362

Record 40 of 104

Title: The impact of depression and culture on responses to intrusive autobiographical memories: Cognitive appraisals, cognitive avoidance, and brooding rumination

Author(s): Mihailova, S (Mihailova, Stella); Jobson, L (Jobson, Laura)

Source: BRITISH JOURNAL OF CLINICAL PSYCHOLOGY Volume: 59 Issue: 1 Pages: 66-79 DOI: 10.1111/bjc.12232 Early Access Date: JUL 2019 Published: MAR 2020

Abstract: Objectives Those with depression ascribe more negative appraisals to intrusive autobiographical memories and use maladaptive strategies to regulate intrusive memory distress. However, it is unknown whether these patterns extend to East Asian samples. This study investigated the influence of culture and depression on intrusive remembering. Design The study used a 2 (group: European Australian, East Asian) x 2 (depression: depressed, control) cross-sectional design, with an online intrusive memory diary. Methods European Australian (n = 46) and East Asian (n = 45) participants living in Australia, with and without depression, reported two intrusive memories in real-time and completed self-report measures indexing their appraisals of the memories, and their use of cognitive avoidance and brooding rumination in response to the memories. Results East Asian participants reported significantly greater negative, control, and responsibility appraisals than European Australian participants. Regardless of cultural group, depressed participants endorsed greater maladaptive memory appraisals and brooding compared to controls. Additionally, among East Asian participants, those with depression cognitively avoided memories significantly more than controls. When comparing the two depressed groups, East Asians reported significantly greater brooding and avoidance in response to intrusive
memories than Australians. Conclusions The findings suggest that depression may be associated with some similar maladaptive responses to intrusive autobiographical memories across cultural groups. Clinical interventions targeting unhelpful responses may, therefore, be beneficial for those with depression, regardless of cultural background. Practitioner points Across both European Australian and East Asian cultures, depressed participants endorsed higher maladaptive intrusive memory appraisals and brooded more in response to memories. Clinical interventions targeting appraisals and emotion regulation in response to intrusive memories may be beneficial for those with depression across both cultural groups. Language and acculturation may have impacted findings, as measures were administered in English and in Australia. Replication using a cross-country design and larger sample would be beneficial to confirm findings.

Accession Number: WOS:000479647800001
PubMed ID: 31364774

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ISSN: 0144-6657
eISSN: 2044-8260

Record 41 of 104

Title: Reliability and validity study of the Turkish version of the remission from depression questionnaire

Author(s): Kart, A (Kart, Aysegul); Zamki, E (Zamki, Erkut); Orsel, S (Orsel, Sibel); Turkcapar, H (Turkcapar, Hakan)


Abstract: Objective: In current psychiatric practice, the principal goal in the treatment of patients with Major Depressive Disorder (MDD) is to achieve remission. Symptom-based definitions of remission do not adequately reflect the treatment expectations of depressed patients. The "Remission from Depression Questionnaire (RDQ)" evaluates not only symptoms of depression but also patients' other psychiatric symptoms, positive mental health, ability to function in various contexts, sense of well-being, life satisfaction and ability to cope. The first aim of this study is to assess the reliability and validity of the RDQ's Turkish language version. Secondly, it purposes to compare the scale with the Hamilton Depression Rating Scale (HDRS) and the Beck Depression Inventory (BDI) in psychometric terms. Method: 106 outpatients who met MDD diagnosis criteria according to Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV) were included in the study. After the translation and back-translation processes, the RDQ, HDRS, BDI, Beck Anxiety Inventory and World Health Organization Quality of Life survey (short version) were administered. Results: All item-scale correlations were found to be statistically significant, and the median value for correlations was .534. The RDQ Turkish version demonstrated excellent internal consistency with Cronbach's alpha coefficient of .945. The test-retest reliability value for the overall RDQ was .908. The correlations between the RDQ subscales and psychosocial functioning, quality of life areas, anxiety severity and depression severity were evaluated and convergent validity analysis was performed, revealing significant relationships between the RDQ total and subscale scores and the other applied scales. For a discriminant validity assessment, the RDQ scores and subscales of two groups made up of the patients who were in remission and those who were not in remission were compared with the
HDRS score (with a cutoff point of 7 points) or BDI (with a cutoff point of 17 points) score. We conducted a ROC curve analysis to determine the most appropriate cutoff score for the RDQ. When the cutoff value 7 of HDRS were used, sensitivity was found to be 86.7% for a cutoff value of 43 for the RDQ, and specificity was 73.5%. When the cutoff value 17 of BDI were used, the sensitivity was 85.5% and the specificity was 75% for a cutoff value of 43 for the RDQ.

Conclusion: Our findings show that the Turkish version of RDQ is a reliable and valid scale.

Accession Number: WOS:000477532200001

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ISSN: 2475-0573
eISSN: 2475-0581

Record 42 of 104

Title: Serum 15-d-PGJ2 and PPAR gamma levels are reduced in manic episode of bipolar disorder while IL-4 levels are not affected

Author(s): Erzin, G (Erzin, Gamze); Aydemir, MC (Aydemir, Makbule Cigdem); Yuksel, RN (Yuksel, Rabia Nazik); Yaylaci, ET (Yaylaci, Elif Tatlidil); Cakir, B (Cakir, Bagdagul); Sezer, S (Sezer, Sevilay); Goka, E (Goka, Erol)

Source: PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY Volume: 29 Issue: 3 Pages: 298-306 DOI: 10.1080/24750573.2018.1471882 Published: JUL 3 2019

Abstract: Bipolar disorder (BD) carries a high rate of morbidity and mortality, and the clarification of its aetiology continues to be an important field of research. In recent studies, the clinical characteristics of BDs have been explained through a number of underlying factors, including cytokines, steroids, neurotrophins, mitochondrial energy generation, oxidative stress, and neurogenesis. In this study, we aimed to investigate potential associations between BDs and inflammatory processes. METHODS: Patients with mania or in remission who attended outpatient clinics of the Department of Psychiatry of the Ankara Numune Training and Research Hospital, and who were diagnosed with BD according to the DSM-V criteria, were included in the study. IBM SPSS Statistics 23 software was used for statistical analyses of the data. The normality of the distribution of continuous and discrete numerical variables was tested with a Shapiro-Wilk Test. RESULTS: In this study, the measurements and statistical analyses revealed significantly lower 15-deoxy delta12, 14-prostaglandin J2 (15d-PGJ2) and Peroxisome Proliferator-Activated Receptor-Gamma (PPAR gamma) levels in patients with mania in comparison to healthy controls and patients in remission. Group comparisons did not reveal any significant differences between IL-4 levels. CONCLUSIONS: This study was not a longitudinal study evaluating the same patients during both relapse and remission periods; no group of patients in a depressive episode of BD were included in the group comparisons either. Although this evidence is not adequate for a definite conclusion, the available evidence suggests that anti-inflammatory markers such as 15d-PGJ2 and IL-4 and nuclear PPAR gamma receptors are potential biomarkers to clarify the aetiology of BD, and these markers may be included among the therapeutic targets for future pharmacological modulations. Further studies are required in this area.

Accession Number: WOS:000481832500009

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Record 43 of 104
Title: Serum ceruloplasmin-ferroxidase activity in bipolar disorder is elevated compared to major depressive disorder and schizophrenia: a controlled study
Author(s): Tunc, S (Tunc, Serhat); Atagun, MI (Atagun, Murat Ilhan); Basbug, HS (Basbug, Hamit Serdar); Erel, O (Erel, Ozcan)
Abstract: OBJECTIVE: In this study, we aimed to study copper metabolism in schizophrenia, bipolar disorder, major depression compared with healthy control. METHODS: This is a single-centered cross-sectional study. The patients with schizophrenia (n = 36), bipolar disorder (n = 37), major depression (n = 40), and healthy control (n = 32) were included in the study. All participants were initially evaluated by a clinical psychiatrist to confirm the appropriate diagnosis using the Structured Clinical Interview for Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV) Axis I Disorders (SCID-I). Serum copper level, ceruloplasmin mass, and ceruloplasmin-ferroxidase activity were measured. One-way ANOVA and Kruskal-Wallis Tests were performed for statistical analyses. RESULTS: Serum ceruloplasmin-ferroxidase activity (chi(2) = 9.11, p = 0.028) demonstrated a significant statistical difference in all groups compared with the control group. Serum ceruloplasmin-ferroxidase activity of the bipolar disorder group was significantly higher than the healthy control group (p = 0.012), major depression group (p = 0.027), and the schizophrenia group (p = 0.019). Erythrocyte sedimentation rate (ESR) (p = 0.028) and waist circumference (p = 0.005) in bipolar disorder group, and the C-reactive protein (CRP) (p < 0.001) and cholesterol (p = 0.043) in the schizophrenia group were found as the determinants of ceruloplasmin-ferroxidase activity. CONCLUSION: In this study, ceruloplasmin-ferroxidase activity is higher in all groups in comparison to the healthy control. The significantly higher ceruloplasmin-ferroxidase activity was shown in bipolar disorder followed by the major depression and schizophrenia. The ceruloplasmin-ferroxidase activity was correlated with erythrocyte sedimentation rate in the bipolar disorder group and with C-reactive protein in the schizophrenia group. Therefore, the ceruloplasmin-ferroxidase activity may be an encouraging candidate in the neuro-immune modulation and become a reliable clinical tool for demonstrating the strong association of inflammation in these disorders.
Accession Number: WOS:000481832500010
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eISSN: 2475-0581

Record 44 of 104
Title: Levels of basophils and eosinophils are elevated while lymphocytes are reduced in patients with panic disorder compared to controls: a preliminary study
Abstract: OBJECTIVE: This study evaluates total blood count especially white blood cells (WBCs) in patients with panic disorder, based on the possible association between the immunologic system and panic disorder. METHODS: Whole total blood count parameters were detected by using an auto-analyser in 40 patients with panic disorder and the same number of healthy comparison subjects. To detect the severity of panic disorder and depression, the Hamilton Depression Rating Scale and the Panic Agoraphobia Scales were used. RESULTS: Patients with panic disorder and healthy subjects were not different in regard to red blood cell count and related haematological parameters including haemoglobin, haematocrit, mean corpuscular volume, mean corpuscular haemoglobin, and mean corpuscular haemoglobin concentration and platelet count. As for the WBC parameters, total WBC, neutrophil, and monocyte counts of the patients with panic disorder were similar those of healthy comparisons. However, basophil (0.02 +/- 0.02/mm$^3$) for the control subjects versus 0.05 +/- 0.05/mm$^3$ for the patient group), eosinophil (0.18 +/- 0.13/mm$^3$) for the control subjects versus 0.37 +/- 0.24/mm$^3$ for the patient group), and lymphocyte (2.50 +/- 0.69/mm$^3$) for the control subjects versus 2.06 +/- 0.80/mm$^3$ for the patient group) counts were statistically significantly different in the patient group compared to healthy subjects. CONCLUSION: In summary, this study represents the first published report of total haematological parameters in patients with panic disorder. Though further replication is required to confirm this association, there seems to be a relationship between panic disorder and immunologic system.
Checklist-90-R. The Schedule for Affective Disorders and Schizophrenia for School-Age Children, Present and Lifetime Version was used for psychiatric diagnosis.

Results: The overall depression scores in children and the mothers’ overall symptom severity index were significantly higher in the CKD group: 40.9% of children in the CKD group were diagnosed with a psychiatric disorder, while the corresponding figure for the control group was 16.2%. The in-group comparison of the CKD group failed to detect any significant difference between the three treatment modalities.

Conclusion: The results support the findings of research showing that CKD has high psychiatric morbidity. It is important to include psychosocial and psychiatric assessments in the evaluation processes of different treatment modalities in CKD. (C) 2019 French Society of Pediatrics. Published by Elsevier Masson SAS. All rights reserved.

Accession Number: WOS:000481563300005
PubMed ID: 31278026
ISSN: 0929-693X
eISSN: 1769-664X

Record 46 of 104
Title: The superstitious scholar Paranormal belief within a student population and its relationship to academic ability and discipline
Author(s): Andrews, RAF (Andrews, Robin A. F.); Tyson, P (Tyson, Philip)
Source: JOURNAL OF APPLIED RESEARCH IN HIGHER EDUCATION Volume: 11 Issue: 3 Pages: 415-427 DOI: 10.1108/JARHE-08-2018-0178 Published: JUL 1 2019
Abstract: Purpose The development and application of critical thinking skills are an important component of success at University. Such skills permit students to evaluate the strengths and weaknesses of evidence, argument and theory. However research suggests that many students believe in paranormal phenomena (e.g. telekinesis). Such beliefs defy the basic principles of science and do not stand up to critical scrutiny. The paper aims to discuss these issues.
Design/methodology/approach This study aimed to investigate paranormal beliefs within a student population: differences among gender, academic discipline and academic performance were explored. Findings Findings indicated that females expressed higher levels of paranormal belief than males, "hard" science students (e.g. Biology) and "soft" science students (e.g. Sociology) expressed lower levels of belief than arts students, and a significant negative correlation indicated that high achievers were less likely to endorse paranormal beliefs. Originality/value In light of these results the authors suggest that paranormal phenomena may be a useful tool for teaching critical thinking skills at university.
Accession Number: WOS:000479199300006
ISSN: 2050-7003
eISSN: 1758-1184

Record 47 of 104
Title: Effects of Cognitive Behavioral Therapy, Existential Psychotherapy and Supportive Counselling on Facial Emotion Recognition Among Patients with Mild or Moderate Depression
Author(s): Yilmaz, O (Yilmaz, Onur); Mircik, AB (Mircik, Ali Barlas); Kunduz, M (Kunduz, Merve); Combas, M (Combas, Muge); Ozturk, A (Ozturk, Ahmet); Deveci, E (Deveci, Erdem); Kirpinar, I (Kirpinar, Ismet)
Source: PSYCHIATRY INVESTIGATION Volume: 16 Issue: 7 Pages: 491-503 DOI: 10.30773/pi.2019.03.14 Published: JUL 2019
Abstract: Objective This study compared the effects of cognitive behavioral therapy (CBT), existential psychotherapy (ExP) and supportive counseling (SUP) on facial emotion recognition
among mildly and moderately depressed patients.

Methods: 21 patients were investigated. Eight consecutive weekly sessions and following two monthly boosters were performed. Prior to the sessions, all subjects received Sociodemographic Data Form, the Structured Clinical Interview for DSM-IV Axis I Disorders (SCID-I), and Facial Emotion Recognition Test (FERT). Patients received Hamilton Depression Rating Scale (HDRS) and PERT at the onset and after weekly and booster sessions.

Results: Patient's ability to recognize surprised and neutral emotions were lower than controls. ExP group improved recognition of almost all emotions, CBT group improved only happy emotions and SUP group did not improve any emotions. HDRS scores declined in all patient groups, ExP and CBT groups had lower scores than SUP.

Conclusion: MDD patients recognized surprised and neutral emotions lower than controls. ExP improved ability to recognize almost all emotions, CBT improved only happy emotions, SUP did not improve at all. ExP, CBT and SUP all led to a reduction in MDD. ExP and CBT had comparable effects and both were more helpful than SUP.

Accession Number: WOS:000477735200003
PubMed ID: 31352731

Author Identifiers:

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ISSN: 1738-3684
eISSN: 1976-3026

Record 48 of 104
Title: Relationship of Apathy with Depressive Symptom Severity and Cognitive Functions in Geriatric Depression

Author(s): Sozeri-Varma, G (Sozeri-Varma, Gulfizar); Bingol, C (Bingol, Ceren); Topak, OZ (Topak, Osman Zulkif); Enli, Y (Enli, Yasar); Ozdel, O (Ozdel, Osman)

Source: NOROPSIKIYATRI ARSIVI-ARCHIVES OF NEUROPSYCHIATRY Volume: 56 Issue: 2 Pages: 133-138 DOI: 10.29399/npa.22931 Published: JUN 2019

Abstract: Introduction: Apathy which is known as loss of primary motivation is observed more frequently in elderly depression in comparison with younger adults. It is put forth that apathy is related with depressive symptom severity and cognitive functions, that the existence of apathy may be a predictor of neurocognitive impairment. The objective of this study was to examine the apathy levels in elderly patients with major depression as well as the relationship between depressive symptom severity and cognitive functions.

Methods: The study was carried out with 40 major depressive disorder patients (MDD) aged 60 and above, 40 healthy controls aged 60 and above. Sociodemographic data form, structured psychiatric interview (SCID-I), Hamilton Depression Rating Scale (HAM-D), Hamilton Anxiety Rating Scale (HAM-A), Montgomery-Asberg Depression Rating Scale (MADRS), Standardized Mini Mental State Examination (SMMSE), Montreal Cognitive Assessment Scale (MoCA), Apathy Evaluation Scale (AES) and Sheehan Disability Scale (SDS) were applied to the participants.

Results: In our study, HAM-D, HAM-A and MADRS scale scores of MDD group was determined to be higher in comparison with those of the healthy control group. A positive correlation was determined in the MDD groups between the AES scores and depressive symptom severity, whereas a negative correlation was determined between the AES scores and cognitive functions. The SMMSE and MoCA scores of the geriatric MDD group were determined to be
lower in comparison with healthy control group. Low performance was observed in the geriatric MDD group especially in the fields of orientation, visual/spatial functions, memory and language. Functionality was found to be lower in MDB group than in the control group, and functionality decreased as the level of apathy increased.

Conclusion: Our results indicate that the apathy levels in geriatric depression are higher in comparison with the control group. Cognitive functions are affected adversely in geriatric patients in major depressive disorder, depressive symptom severity, impairment in cognitive functions and functionality are observed to be related with apathy level.

Accession Number: WOS:000503182900011
PubMed ID: 31223247

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ISSN: 1300-0667
eISSN: 1309-4866

Record 49 of 104
Title: Attitudes Toward Euthanasia Among Turkish University Students
Author(s): Karaahmetoglu, GU (Karaahmetoglu, Gulsen Ulas); Kutahyalioglu, NS (Kutahyalioglu, Nesibe Sumeyye)
Source: OMEGA-JOURNAL OF DEATH AND DYING Volume: 79 Issue: 2 Pages: 174-190 DOI: 10.1177/0030222817729616 Published: JUN 2019
Abstract: This study aims to examine perceptions and attitudes toward euthanasia among university students who are pursuing bachelor's degrees. Although the legalization and application of euthanasia are discussed commonly by health-care professionals and partially by lawyers, the ideas of other segments of society, especially university students, are taken place very rarely. The research was conducted descriptively to determine the ideas of 1,170 students at Kastamonu University from six different departments: arts and sciences, theology, tourism, nursing, school of physical education, and sports with using a questionnaire. Findings demonstrated that 73.2% of the students do not approve euthanasia. Also, it was found that there are significant differences depending on age, gender, department of study, income level, place of living, and the loss of kinsmen. This study serves as a resource for future research to understand the effects of sociodemographic characteristics on the decision of euthanasia.

Accession Number: WOS:000476590600004
PubMed ID: 28914147
ISSN: 0030-2228
eISSN: 1541-3764

Record 50 of 104
Title: Is it important to take the co-occurrence of obesity and cigarette smoking into account in brain imaging studies in major depressive disorder?
Author(s): Delibas, DH (Delibas, Dursun Hakan); Zorlu, PK (Zorlu, Pelin Kurtgoz); Baskin, EP (Baskın, Emel Pasa); Bora, E (Bora, Emre); Adibelli, ZH (Adıbelli, Zehra Hilal); Zorlu, N (Zorlu, Nabi)
Abstract: Objective: To date, a small number of studies have investigated cortical thickness, cortical surface area, and subcortical volume abnormalities in first-episode, untreated patients
with Major Depressive Disorder (MDD). The findings of previous studies are not entirely consistent. Previous studies did not match first-episode, untreated patients with MDD to controls regarding body mass index (BMI) and smoking, which could contribute to the inconsistency of results. The aim of the current study was to examine whether morphological abnormalities are present in first-episode and untreated MDD patients in comparison with well-matched controls, particularly concerning BMI and smoking status.

Method: Twenty first-episode, untreated patients with MDD were enrolled in the study along with 20 healthy controls (HC) matched for age, education, sex, BMI and smoking status. Thickness and area of the cortex and subcortical volumes were measured using surface-based morphometry implemented with Freesurfer (v5.3.0).

Results: There were no significant differences in cortical thickness, surface area, and subcortical volumes between the firstepisode, untreated patients with MDD and HC groups.

Conclusion: This study provides evidence that cortical thickness, cortical surface area, and subcortical volumes might be normal in first-episode untreated patients with MDD in comparison with well-matched controls, particularly for BMI and smoking status.

Accession Number: WOS:000473653200006

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ISSN: 1018-8681
eISSN: 1309-5749

Record 51 of 104

Title: The Impact of Perceived Social Support on Anxiety, Depression and Severity of Pain and Burnout Among Turkish Females With Fibromyalgia

Author(s): Gunduz, N (Gunduz, Nermin); Usen, A (Usen, Ahmet); Atar, EA (Aydin Atar, Emel)

Source: ARCHIVES OF RHEUMATOLOGY Volume: 34 Issue: 2 Pages: 186-195 DOI: 10.5606/ArchRheumtol.2019.7018 Published: JUN 2019

Abstract: Objectives: This study aims to assess the impact of perceived social support on burnout, severity of pain and comorbid anxiety and depression among Turkish females with fibromyalgia syndrome (FMS).

Patients and methods: A total of 117 females including 65 patients with FMS (mean age 33.5 +/- 8.1 years; range 20 to 60 years) and 52 healthy controls (mean age 33.6 +/- 7.3 years; range 23 to 48 years) were included between January 2017 and May 2017. Following a semi-structured psychiatric interview by a psychiatrist, Sociodemographic Data Form, Mood and Anxiety Disorders Modules of Structured Clinical Interview for Diagnostic and Statistical Manual of Mental Disorders fourth edition Axis I Disorders (SCID-I), Hamilton Depression Rating Scale (HDRS), Hamilton Anxiety Rating Scale (HARS), visual analog scale (VAS), Maslach Burnout Inventory (MBI) and Multidimensional Scale of Perceived Social Support (MSPSS) were applied to participants.

Results: As a result of the semi-structured clinical interview conducted by a psychiatrist, the prevalence of any mood or anxiety disorder was found to be significantly more common in the EMS group. The proportion of patients diagnosed with any mood or anxiety disorder using SCID-I was significantly different among FMS (n=50, 76.92%) and healthy control (n=14, 33.33%) groups (p<0.001). Correlations between these variables were examined within the FMS group. There was a significant negative correlation between VAS and MSPSS. There were significant negative correlations between MSPSS and HDRS, HARS, all subscales of MBI. There were significant positive correlations between VAS and HDRS, HARS, all subscales of MBI.

Conclusion: In conclusion, perceived social support was found to be strongly associated with depression, anxiety, burnout and severity of pain in patients with FMS. Our study provided
support to emphasize the importance of perceived social support among females with FMS. Considering that FMS is associated with many physical and cognitive complaints in addition to pain, it can be considered as a multi-systemic disease requiring a multidisciplinary approach.

**Accession Number:** WOS:000469269200008

**PubMed ID:** 31497765

**ISSN:** 2148-5046

**eISSN:** 1309-0283

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**Record 52 of 104**

**Title:** Relationship between syringe sharing and severity of psychopathology, antisocial personality disorder and novelty seeking in a sample of patients with heroin use disorder

**Author(s):** Alniak, I (Alniak, Izgi); Karabulut, V (Karabulut, Vahap); Evren, C (Evren, Cuneyt); Cetin, T (Cetin, Turan); Umut, G (Umut, Gokhan); Agachanli, R (Agachanli, Ruken); Evren, B (Evren, Bilge)

**Source:** HEROIN ADDICTION AND RELATED CLINICAL PROBLEMS  Volume: 21  Issue: 3  Pages: 7-16  Published: JUN 2019

**Abstract:** Background: Patients with heroin use disorder (PWHUD) were reported to have different clinical features according to the route of heroin administration. People who share syringes may represent a relatively unique type of PWHUD. Aim: To evaluate the clinical characteristics of PWHUD who share syringes while investigating the predictive factors involved in syringe sharing (SS). Methods: A sample of 219 male PWHUD who were currently in opioid maintenance treatment participated in the study. All patients were evaluated using the Symptom Checklist-90-R (SCL-90-R) and Novelty Seeking (NS) subscale of the Temperament and Character Inventory (TCI). Antisocial personality disorder (APD) was assessed by holding a Structured Clinical Interview for DSM-III-R-Personality Disorders (SCID-II). Logistic regression analysis was conducted to evaluate variables that predict the presence of SS. Results: The prevalence of SS in our sample was 24.7%. The total scores assigned according to the rating scales were significantly higher in the SS (+) group than in the SS (-) group. SS (+) group members were more likely to have a criminal record, as well as a history of incarceration and probation. Multiple substance use, Hepatitis C virus seropositivity, history of suicide attempts and self-mutilation were significantly more common in the SS (+) group. Extravagance, interpersonal sensitivity and APD were found to be the main predictors of the presence of SS. Conclusions: Presence of APD, extravagant personality trait and interpersonal sensitivity appear to have a probable impact in discriminating SS (+) patients from the others among PWHUD. Knowledge of the predictive risk factors for SS might help to prevent SS from happening, so reducing the potential burden of SS both on patients and society.

**Accession Number:** WOS:000467948800001

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**ISSN:** 1592-1638

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**Record 53 of 104**

**Title:** Effects of comorbid personality disorders in bipolar type I disorder patients to disease course

**Author(s):** Tan, RE (Tan, Recep Emre); Erim, BR (Erim, Burcu Rahsan); Ustun, N (Ustun, Nese); Uney, R (Uney, Ridvan)
Objective: It was planned to compare bipolar I patients (BP-I) with personality disorder (PD) and without any personality disorder in terms of variables such as disease characteristics, disease course, suicide risk, alcohol and substance use. Methods: This cross-sectional study 99 patients with BP-I according to DSM-IV TR and gave to informed consent were included. Sociodemographic Data Form, Hamilton Depression Scale, Young Mania Scale, and DSM-IV-TR-SCID-II were administered to participants. Results: At least one PD was detected in 38 (38.4%) patients with BP-I. Histrionic type (18%) PD was the most common in patients. Two types of PD were found in 21.2% and three types of PD were found in 6.1% of the participants. In patients without personality disorder, the mean number of hospitalizations and the total number of manic episodes were high while the total number of depressive episodes was low. The incidence of atypical depression, attempted suicide, and alcohol-substance abuse were statistically higher in patients with multiple PD than non-PD group. Conclusion: BP-I patients with multiple PD have more depressive episodes than non-PD patients; this group of patients should be considered as a special subgroup that should be followed carefully because of the atypical nature of these attacks, more suicide rates and the use of more alcohol and substance. In addition, these patients lower hospitalization times may need to be interpreted in favor of not being able to complete the treatment. For this reason, it may be important to monitor these patients outpatientsly.

Accession Number: WOS:000466904700002

ISSN: 1302-6631

Title: Sexual functions in male patients with bipolar disorder and their healthy spouses

Author(s): Arslan, M (Arslan, Mehmet); Caliskan, AM (Caliskan, Ali Metehan); Goktas, D (Goktas, Duygu); Inanli, I (Inanli, Ikbal); Calisir, S (Calisir, Saliha); Eren, I (Eren, Ibrahim)

Source: ANADOLU PSIKIYATRI DERGISI-ANATOLIAN JOURNAL OF PSYCHIATRY Volume: 20 Issue: 3 Pages: 245-252 DOI: 10.5455/apd.5397 Published: JUN 2019

Abstract: Objective: Only a limited number of studies have evaluated sexual functions in patients with bipolar disorder (BD) and their spouses. The aim of the present study was to compare the sexual functions of male patients with BD and their healthy spouses with those of healthy couples and to investigate potential factors that predict sexual problems. Methods: Sixty male outpatients with BD in remission and their healthy female spouses were included in the study. All patients were under medication. Randomly selected forty healthy couples were included as the control group. All participants were assessed with sociodemographic data form, Golombok Rust Inventory of Sexual Satisfaction (GRISS), Hamilton Depression Rating Scale (HDRS) and Marital Adjustment Scale (MAS). Results: Problem rates according to GRISS total, communication, frequency and impotence scores were higher for patients than male controls. Problem rates according to GRISS communication and frequency scores were higher for patients' spouses than female controls. Logistic regression analyses for males revealed that sexual problems were associated with depressive symptoms and marital adjustment, but were not associated with the presence of BD. Analyses for females showed that sexual problems were associated with marital adjustment and age, whereas no association was found with being spouse of a patient. Conclusions: Treating the subsyndromal depressive symptoms of patients and interventions to increase marital adjustment may improve sexual functions of patients and their spouses. After controlling confounding factors, presence of sexual problem was not associated with having BD for males and being a spouse of a patient for females.

Accession Number: WOS:000466904700003
Comparisons of measures that evaluate oral and general health quality of life in patients with temporomandibular disorder and chronic pain

**Objective:** To analyze the oral and general health related quality of life (HRQOL) measures, and to establish their ability to categorize chronic temporomandibular disorders (TMD).

**Methods:** Data were collected from 104 patients through a questionnaire with detailed socio-demographic information, the Oral Health Impact Profile (OHIP-14), the Short Form-36 (SF-36), the Revised Symptom Checklist-90-R (SCL-90-R), and the Research Diagnostic Criteria for Temporomandibular Disorders (RDC/TMD) Axis I and II. Descriptive statistics were computed. Results: Better self-rated health and having no muscle pain were the key predictors for better physical HRQOL, whereas higher levels of depression, worse self-rated health and mandibular functioning were highly associated with worse mental HRQOL. The oral HRQOL were significantly lower in TMD patients with higher pain-related disability and worse oral health rating. Discussion: The use of the OHIP-14 in chronic TMD patients may provide valuable clinical information for better assessing the pain-related disability when compared to SF-36.

**Record 55 of 104**

**Title:** Evaluation of depression comorbidity in obstructive sleep apnea syndrome

**Author(s):** Berk, SS (Berk, Sule Sirin); Baykara, S (Baykara, Sema)

**Source:** PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY Volume: 29 Issue: 4 Pages: 730-736 DOI: 10.1080/24750573.2019.1609642 Early Access Date: APR 2019 Published: OCT 2 2019

**Abstract:** BACKGROUND: Diagnosis and treatment of the comorbid depression in patients with obstructive sleep apnea syndrome could be effective on the reduction of morbidity and mortality. OBJECTIVES: The present study aimed to investigate the depression comorbidity in OSAS patients grouped by Apnea-Hypopnea Index (AHI). However, the previous studies on the presence of depression in OSAS reported inconsistent findings. It was considered that the differences between the findings could be due to methodological differences and it was planned...
to investigate the presence of depression with two methodologies in the same patient group and to compare the findings. METHODS: The study group included 101 individuals who were admitted to the neurology outpatient clinic with the complaints of snoring, diaphoresis history, daytime somnolence, fatigue, and headache and were hospitalized overnight to conduct polysomnography and diagnosed with obstructive sleep apnea syndrome (OSAS). Cases were grouped based on Apnea-Hypopnea Index (AHI) scores. Sociodemographic and Clinical Data Form Hamilton Rating Scale for Depression (HAM-D), Beck Depression Inventory (BDI), Pittsburg Sleep Quality Index (PSQI) and Epworth Somnolence Scale (ESS) were applied to all cases. RESULTS: Patients with lower than 5 AHI score were considered as the simple snoring group (n = 20), those with an AHI score of 5-14.99 (n = 27) were considered as the patients with moderate OSAS and those with an AHI score of equal to or greater than 30 (n = 34) were considered as severe OSAS patients. The cases included in the study had a wide age range (between 22-61 years) and were mostly male (65.4% male; 34.65% female). Rates of the major depressive disorder according to HAM-D and BDI were 60.4% and 36.6%; respectively. The depression rates were higher in the moderate OSAS group according to the both evaluation methods (HAM-D and BDI), although this was not significant via BDI. Analysis of the ESS scores demonstrated that experienced severe daytime somnolence was seen in 52.5%, and analysis of the PSQI demonstrated that poor sleep quality was seen in 87.1% of the patients. According to the linear regression analysis only PSQI total score (p = 0.029) was found to be significant in determining BDI while ESS (p = 0.44) and PSQI total scores (p = 0.003) were found to be significant in determining HAM-D when ESS, AHI and PSQI were evaluated together. CONCLUSION: In patients with obstructive sleep apnea syndrome, comorbid depression should be identified in order to achieve better results in treatment. However, the scales used to determine depression in OSAS patients could result in different findings due to methodological differences or the distribution of the tested symptoms. Considering this fact in the diagnosis of comorbid depression in OSAS is important to achieve an accurate diagnosis and commence an effective treatment.

Accession Number: WOS:000470380400001

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ISSN: 2475-0573
eISSN: 2475-0581
significantly higher in the bipolar group. YMRS (Young Mania Rating Scale) scores were not correlated with BT. Conclusions: This study is the first clinical study to assess the jumping to conclusions bias in patients with bipolar disorder. No JTC bias was detected in bipolar disorder. Further studies may assess JTC in larger samples to determine the effects of clinical state changes, psychotic symptoms, medication and impulsivity.

**Accession Number:** WOS:000466015700001  
**PubMed ID:** 30987559  
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**ISSN:** 1354-6805  
**eISSN:** 1464-0619

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**Record 58 of 104**

**Title:** Ischemia-modified albumin: a unique marker of global metabolic risk in schizophrenia and mood disorders  
**Author(s):** Tunc, S (Tunc, Serhat); Atagun, MI (Atagun, Murat Ilhan); Neselioglu, S (Neselioglu, Salim); Bilgin, YY (Bilgin, Yelda Yenilmez); Basbug, HS (Basbug, Hamit Serdar); Erel, O (Erel, Ozcan)  
**Source:** PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY  
**Volume:** 29  
**Issue:** 2  
**Pages:** 123-129  
**DOI:** 10.1080/24750573.2018.1517466  
**Published:** APR 3 2019  

**Abstract:** OBJECTIVE: Conformational change in the last four amino acid of the albumin's N-terminus is called ischemia-modified albumin (IMA). Metabolic stress factors such as ischemia, hypoxia, acidosis or endothelial injury may cause these conformational modifications. In this study, we hypothesized that the plasma IMA level changes might help to determine the global metabolic risk in bipolar disorder (BD), unipolar depression (UD), and schizophrenia (SZ). Therefore, it was aimed to investigate metabolic risk factors affecting IMA levels in this study. Modification of the albumin molecule might be a marker of global metabolic risk in schizophrenia and mood disorders.  
**METHOD:** The study included 32 patients with BD, 32 patients with UD, 28 patients with SZ and 34 healthy individuals. For determining the IMA levels, standard amounts of cobalt ions were added to the serums, and the quantity of disengaged cobalt ions was measured by colorimetric assay. RESULTS: IMA (F = 3.04, p = 0.032) levels differed between the groups. IMA levels of the BD group were significantly higher than the healthy control group (p = 0.048). White blood cell count in the BD group (p = 0.034) and total oxidant status (TOS) in the SZ group (p < 0.001) were the determinants of IMA levels with linear regression analysis. CONCLUSION: Elevation of IMA levels may indicate a global metabolic risk, and IMA levels are elevated in the BD group in this study. Determinants of IMA levels may indicate the significant metabolic risk in patient groups. Oxidative stress (OS) was the determinant of IMA levels in the SZ, and white blood cell count was the determinant of IMA levels in the BD group. Although the IMA levels were higher in all patient groups, the statistical significance appeared only in the BD group. Elevated IMA level was due to elevated OS in the SZ group, whereas the immunity in the BD group.

**Accession Number:** WOS:000480592800001  
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Title: Effect of exercise on therapeutic response in depression treatment

Author(s): Tasci, G (Tasci, Gulay); Baykara, S (Baykara, Sema); Gurok, MG (Gurok, M. Gurkan); Atmaca, M (Atmaca, Murad)

Source: PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY Volume: 29 Issue: 2 Pages: 137-143 DOI: 10.1080/24750573.2018.1426159 Published: APR 3 2019

Abstract: OBJECTIVES: The aim of this study is to investigate the effect of exercise on therapeutic response in depression treatment. METHODS: Thirty-three patients admitted to the Psychiatry Department of Firat University Hospital and diagnosed with major depressive disorder according to DSM-IV criteria and met the study criteria were included in the study. The patients in Group 1 were treated with antidepressant medication and were asked for brisk walking for at least 30 minutes a day, at least 4 days a week, for 12 weeks. Only antidepressant medication was given to the patients in Group 2. The Hamilton Depression Rating Scale, the Hamilton Anxiety Rating Scale, and the Clinical Global Impression Scale were applied to both groups at baseline and at the end of 6 weeks and 12 weeks. RESULTS: Anxiety and depression levels decreased in both groups. The decrease in anxiety and depression scores with antidepressant use is an expected outcome. However, there was a statistically more decrease in the average-scaled scores in the Group treated with antidepressant and exercise than the Group treated with only antidepressant. CONCLUSIONS: Exercise had a positive effect on the therapeutic response in depression treatment. However, long-term studies in larger sample groups are needed.

Accession Number: WOS:000480592800003

Author Identifiers:

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Title: Oxidative parameters, oxidative DNA damage, and urotensin-II in schizoaffective disorder patients

Author(s): Kilic, OHT (Kilic, Osman Hasan Tahsin); Aksoy, I (Aksoy, Ilhsan); Elboga, GC (Elboga, Gulcin Cinpoltai); Bulbul, F (Bulbul, Feridun)

Source: PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY Volume: 29 Issue: 2 Pages: 151-157 DOI: 10.1080/24750573.2018.1468637 Published: APR 3 2019

Abstract: OBJECTIVE: Complexity of schizoaffective disorder makes the identification of its pathophysiology a great challenge and there are very limited published data about the role of oxidative stress. Oxidative DNA damage has not been investigated in schizoaffective disorder. Therefore, we aimed to evaluate oxidative DNA damage together with oxidative stress and urotensin-II in patients with schizoaffective disorder. METHODS: Fifty-four patients who were
diagnosed as schizoaffective disorder bipolar type (27 of them were in symptomatic remission and 27 of them were not) and 27 healthy volunteers were included in the study. Total antioxidant status (TAS), total oxidant status (TOS), oxidative stress index (OSI), serum 8-hydroxy-2'-deoxyguanosine (8-OHdG), and urotensin-II (U-II) levels were calculated and evaluated.

RESULTS: TAS and U-II levels were found to be lower in the patient group with and without remission when compared with the control group separately. There were no significant differences in terms of TOS, OSI, and 8-OHdG. Similar results were obtained when those in symptomatic remission and non-remission patient groups were combined and compared with the control group. CONCLUSION: TAS levels in schizoaffective disorder patients were lower than controls, which may mean a vulnerability to the oxidative stress but there were no differences in terms of oxidative DNA damage. U-II levels in schizoaffective disorder patients were significantly lower than controls in contrast with our previous study.

**Accession Number:** WOS:000480592800005

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**ISSN:** 2475-0573

**eISSN:** 2475-0581

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**Title:** Predictive Roles of Self-Efficacy and Coping Strategies in Cognitive Flexibility among University Students

**Author(s):** Lacin, BGD (Dogan Lacin, Betul Gokcen); Yalcin, I (Yalcin, Ilhan)

**Source:** HACETTEPE UNIVERSITESI EGITIM FAKULTESI DERGISI-HACETTEPE UNIVERSITY JOURNAL OF EDUCATION  Volume: 34  Issue: 2  Pages: 358-371  DOI: 10.16986/HUJE.2018037424  Published: APR 2019

**Abstract:** The main purpose of this study was to investigate the predictive role of self-efficacy and coping strategies on university students' cognitive flexibility levels. In addition to this, another aim was to examine whether there were significant differences in the level of the university students' cognitive flexibility in terms of gender. The study was carried out with 549 university students. The data used in this study was collected from Cognitive Flexibility Inventory, General Self-Efficacy Scale, and Coping Styles Scale. T-Test was used to examine whether there were differences on Cognitive Flexibility Inventory total scores in terms of gender. The Multiple Regression Analysis was utilized to analyze whether self-efficacy and coping strategies significantly predict the level of cognitive flexibility. Multiple Regression Analysis results revealed that the participants' self-efficacy level and coping strategies' sub-dimensions of self-confidence, submissive, helpless style and seeking of social support significantly predict participants' cognitive flexibility. The participants' self-efficacy level and coping strategies' sub-dimensions of self-confidence, submissive, helpless style and seeking of social support explains %52 of the total variance. Gender does not affect the level of cognitive flexibility.

**Accession Number:** WOS:000466168300003

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**ISSN:** 2536-4758
Record 62 of 104
Title: Direct and Indirect Relationships between Personality Types and Problem-Focused Coping Style in Adolescents: Mediation Role of Cognitive Flexibility
Author(s): Celikkaleli, O (Celikkaleli, Oner); Gunduz, B (Gunduz, Bulent)
Source: CUKUROVA UNIVERSITY FACULTY OF EDUCATION JOURNAL Volume: 48 Issue: 1 Pages: 73-99 DOI: 10.14812/cufej.483079 Published: APR 2019
Abstract: The first aim of this research is to examine the relationship between personality types, problem-focused stress coping style, and cognitive flexibility in adolescents. The second aim is to determine whether cognitive flexibility plays a mediating role in relationship between personality types and problem-oriented coping styles. For this purpose, data were collected from 465 adolescents (293 (63%) women and 172 (37%) men). Five Factor Personality Scale, Coping Style Scale and Cognitive Flexibility Scale were used as data collection tools. Correlation coefficient and path analysis were used in the analysis of the data. According to the findings obtained from the research, positive personality types such as extraversion, agreeableness, conscientiousness and openness of the adolescents have significant positive relationships between problem-focused coping style and cognitive flexibility. On the other hand, there was a significant negative correlation between neuroticism personality type and problem-focused coping style and cognitive flexibility. When the findings of mediation analysis are examined, it has been found that cognitive flexibility has partially mediation role in relationships between personality types and problem-focused coping style. In other words, both direct relationships between personality types and problem-focused coping are meaningful, as well as indirect implications through cognitive flexibility. The findings were discussed and interpreted in light of the literature.
Accession Number: WOS:000466499700003
ISSN: 1302-9967

Record 63 of 104
Title: Influence of locus of control, perceived career barriers, negative affect, and hopelessness on career decision-making self-efficacy among Turkish university students
Author(s): Ulas, O (Ulas, Ozlem); Yildirim, I (Yildirim, Ibrahim)
Abstract: The variables affecting final-year undergraduate students' career decision-making self-efficacy were explored in a group of 729 students across various departments of an urban university. A structural equation model was used to determine the variables that predicted students' self-efficacy in decision making, with results indicating that perceived career barriers exerted a significant and direct effect. The relationship between career barriers and career decision-making self-efficacy was significantly and partially mediated by hopelessness. The relationship between locus of control and career decision-making self-efficacy was significantly and fully mediated by hopelessness.
Accession Number: WOS:000463679200005
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ISSN: 0251-2513
eISSN: 1573-1782

Record 64 of 104
Title: An open/pilot trial of cognitive behavioral therapy in Turkish patients with refractory chronic migraine

Author(s): Onur, OS (Onur, Ozge Sahmelikoglu); Ertem, DH (Ertem, Devrimsel Harika); Karsidag, C (Karsidag, Cagatay); Uluduz, D (Uluduz, Derya); Ozge, A (Ozge, Aynur); Siva, A (Siva, Aksel); Guru, M (Guru, Meltem)

Source: COGNITIVE NEURODYNAMICS Volume: 13 Issue: 2 Pages: 183-189 DOI: 10.1007/s11571-019-09519-y Published: APR 2019

Abstract: Cognitive behavioral therapy (CBT) for pain management is a therapy that aims to modify thoughts and behavior to be more realistic and balanced. There are limited number of studies to assess the efficacy of CBT for patients with pharmacotherapy-resistant chronic migraine in our population. We aimed to investigate the effects of CBT for patients with refractory chronic migraine on pain attack frequency, disability, severity, anxiety and depression. Fourteen patients with refractory chronic migraine who were referred from the headache clinic to the psychiatry department and regularly attended CBT sessions at least once every 2weeks for at least 6months, were included in the study. After 2 sessions of psychiatric evaluation, the subjects had 12 40-min CBT sessions and were given relaxation exercises. The Hamilton depression and anxiety inventories, visual analogue scale for assessing the severity of pain, and the Migraine disability assessment (MIDAS) test were used before and after CBT. The mean Hamilton depression scores before and after CBT were 29.07 +/- 7.74 and 14.21 +/- 7.7, respectively (p<0.0001). The mean Hamilton anxiety scores before and after CBT were 26.8 +/- 11.7 and 11.7 +/- 2.6, respectively (p<0.0001). The mean VAS scores before and after CBT were 8.07 +/- 0.91 and 3.71 +/- 1.32, respectively (p<0.0001). The mean MIDAS scores before and after CBT were 55.5 +/- 20.4 and 20.12 +/- 16.6, respectively (p<0.0001). Our results showed that CBT had made a statistically significant difference on pain severity, number of migraine attacks and disability in patients with refractory chronic migraine. CBT should be considered in this patient group.

Accession Number: WOS:000462200200005
PubMed ID: 30956722

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ISSN: 1871-4080
eISSN: 1871-4099

Record 65 of 104

Title: The depressive effects of androgen deprivation therapy in locally advanced or metastatic prostate cancer: a comparative study

Author(s): Ceylan, Y (Ceylan, Yasin); Gunlusoy, B (Gunlusoy, Bulent); Koskderebioglu, A (Koskderebioglu, Asli); Gedizlioglu, M (Gedizlioglu, Muhtesem); Degirmenci, T (Degirmenci, Tansu)

Source: AGING MALE DOI: 10.1080/13685538.2019.1586869 Early Access Date: MAR 2019

Abstract: Aim: To investigate association of androgen deprivation therapy (ADT) with depression and the effect of depression on cognitive functions in men with locally advanced or metastatic prostate cancer. Methods: A total of 144 patients were evaluated in a prospective, comparative study. Group1 consisted of 72 patients with locally advanced or metastatic prostate cancer who received complete ADT treatment continuously for 12 months and group2 (control group) consisted of 72 patients who underwent radical prostatectomy without any additional treatment. MoCA (The Montreal Cognitive Assessment) and HAM-D (Hamilton depression rating scale) tests were used to assess the effects of ADT on depression and cognitive functions.
Results: According to post-treatment results of MoCA test, patients had lower mean total scores in both the groups. The deficits were especially prominent in the areas of language ability and short-term memory capacity. In the comparison of two groups according to HAM-D tests, the scores were significantly higher in group 1 at baseline-6 month, at baseline-12 month and at 6-12 month follow-up period (p = .003, p < .001, p = .023). There was a relationship between depression and deterioration of language and memory functions at 6th (p < .001, p = .002) and 12th months (p < .001, p = .046). Attention function was deteriorated in these patients at 6th (p < .001) and 12th months (p < .001). Conclusions: ADT causes increase in depression and the deterioration of cognitive functions. ADT should be given carefully to these older group of patients with concomitant morbidities.

Accession Number: WOS:000464634300001
PubMed ID: 30924381

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ISSN: 1368-5538
eISSN: 1473-0790

Record 66 of 104
Title: Persistent Genital Arousal Disorder Treated with Duloxetine: A Case Report
Authors: Gunduz, N (Gunduz, Nermin); Polat, A (Polat, Aslihan); Turan, H (Turan, Hatice)
Source: TURK PSI KIYATRI DERGISI Volume: 30 Issue: 1 Pages: 67-70
DOI: 10.5080/u23441
Published: SPR 2019
Abstract: Persistent Genital Arousal Disorder is characterized with unwanted, uncontrollable and persistent genital arousal symptoms that occur spontaneously in the absence of simultaneous sexual fantasy, sexual desire or sexual stimulation. The condition may last for hours or days. Patients often find it difficult to share this condition with their health care providers because they are afraid of being diagnosed with hypersexuality and they often get different psychiatric diagnoses such as Obsessive Compulsive Disorder and Major Depressive Disorder. Therefore, little is known about the real prevalence, pathophysiology or etiology of Persistent Genital Arousal Disorder. In addition, since there is no study conducted in this field, our information in this area is limited to case reports. Although there is no consensus about the treatment of Persistent Genital Arousal Disorder in the psychiatric literature, there are some case reports about the use of pregabaline, clomipramine, duloxetine, clonazepam, varenicline, olanzapine, risperidone in addition to the case reports on treatment with hypnotherapy, pelvic floor physiotherapy and electroconvulsive therapy (ECT). In this case report, we aimed to present the detailed description of a successful treatment procedure with duloxetine in a forty two years old female patient diagnosed with Persistent Genital Arousal Disorder. She had been using various antidepressants, antipsychotics, anxiolytics and mood stabilizers for sixteen years with different psychiatric misdiagnoses like Bipolar Disorder, Obsessive Compulsive Disorder, Anxiety Disorder and Major Depressive Disorder and yet, had not shared her symptoms of genital arousal with any psychiatrist previously.
Accession Number: WOS:000496714200009
PubMed ID: 31170309
ISSN: 1300-2163

Record 67 of 104
Title: Use of the Hamilton anxiety scale to assess mothers of pediatric patients on mechanical ventilation
Author(s): Yakut, MN (Yakut, Muhammed Nurullah); Dag, H (Dag, Huseyin); Karakurt, Y (Karakurt, Yakup); Turkkan, E (Turkkan, Emine)

Source: ANAESTHESIA PAIN & INTENSIVE CARE Volume: 23 Issue: 1 Pages: 47-51 Published: MAR 2019

Abstract: Introduction: The risk of complications is higher in intensive care units (ICU) than in other units. As children with severe conditions are hospitalized, many drugs are used concomitantly, and invasive interventions are more frequently required. Therefore, pediatric ICUs are medical settings which cause traumatic stress to both children and their parents. Knowing the extent to which anxiety levels are affected in a parent whose child is hospitalized in the intensive care unit is important. This study investigated the anxiety levels of mothers with a child in the ICU and compared the levels of anxiety of mothers of children on mechanical ventilation (MV) with mothers of children not on MV.

Methodology: Hamilton Anxiety Rating Scale (HAM-A) forms were filled during face-to-face interviews with the mothers after their children's admission to the ICU. The mothers details were recorded in case report forms. Basic demographic data were collected for the children involved.

Results: In total, 128 patients were enrolled; 64 each on MV (patient group) and not on MV (control group) and their mothers. There was no significant difference in the mean ages of the patient and the control groups (73.9 +/- 38.4 months vs. 75.7 +/- 48.6 months; p = 0.815). The mean HAM-A scores of the patient group and the control group were found to be 23.7 +/- 2.2 and 7.9 +/- 1.8, respectively (p = 0.001). The age of the mothers was not correlated with the HAM-A score in either the patient or control group. No difference was found between the HAM-A scores in terms of educational level in the patient and control groups (p> 0.05).

Conclusion: The anxiety levels of the mothers whose children were admitted to the intensive care unit were high and these levels further increased with the possibility of their children being connected to mechanical ventilators.

Accession Number: WOS:000474920300010
ISSN: 1607-8322
eISSN: 2220-5799

Record 68 of 104
Title: Plasma Neuropeptide-S Levels in Populations Diagnosed with Generalized Anxiety Disorder: A Controlled Study
Author(s): Baykan, H (Baykan, Hayriye); Baykan, O (Baykan, Ozgur); Durmaz, O (Durmaz, Onur); Kara, H (Kara, Hayrettin); Hismiogullari, AA (Hismiogullari, Adnan Adil); Karlidere, T (Karlidere, Tunay)
Source: NOROPSIYATRI ARSIVI-ARCHIVES OF NEUROPSYCHIATRY Volume: 56 Issue: 1 Pages: 52-56 DOI: 10.29399/npa.22907 Published: MAR 2019

Abstract: Introduction: Neuropeptide S (NPS) is a novel neuropeptide reported to be involved in fear- and stress-related conditions and their corresponding neuroendocrine processes. The aim of this study was to compare the plasma NPS levels in patients suffering from generalized anxiety disorder (GAD) and those of healthy controls.

Methods: A total of 40 subjects diagnosed with GAD and 40 healthy controls were recruited in the study. The Hamilton Anxiety Scale (HAM-A), Generalized Anxiety Disorder-7 (GAD-7), and Hamilton Depression Scale (HAM-D) were administered to all participants to determine the severity of participants' anxiety and concomitant depressive symptoms. The plasma NPS levels were measured from the fasting venous blood samples obtained from each participant.

Results: The median plasma NPS level was found to be significantly higher in the GAD group in comparison to the control group (28.8 pg/mL as against 19.1 pg/mL, p=0.01). A significant positive correlation was observed between the plasma NPS levels and HAM-A scores (r=0.23, p=0.04) as well as the GAD-7 scores (r=0.28, p=0.01). The p-value obtained from the
correlation analysis between the plasma NPS levels and HAM-D scores was 0.052. A receiver operating characteristic (ROC) analysis revealed that the plasma NPS levels could enable the identification of GAD with 67.5% sensitivity and 62.5% specificity, when the cut-off value was determined as 25.06 pg/mL.

Conclusions: Our results support the view that plasma NPS levels, which has demonstrated anxiolytic effects on the central nervous system, is related to the severity of anxiety in GAD and could be considered as a candidate marker for the identification of GAD.

**Accession Number:** WOS:000468130500011
**PubMed ID:** 30911238
**ISSN:** 1300-0667
**eISSN:** 1309-4866

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**Record 69 of 104**

**Title:** Psychiatric symptom rate of patients with Diabetes Mellitus: A case control study

**Author(s):** Dogan, B (Dogan, Burcu); Oner, C (Oner, Can); Akalin, AA (Akalin, Ayse Arzu); Ilhan, B (Ilhan, Burcu); Caklili, OT (Caklili, Ozge Telci); Oguz, A (Oguz, Aytekin)

**Source:** DIABETES & METABOLIC SYNDROME-CLINICAL RESEARCH & REVIEWS **Volume:** 13 **Issue:** 2 **Pages:** 1059-1063 **DOI:** 10.1016/j.dsx.2019.01.045 **Published:** MAR-APR 2019

**Abstract:** Aims: The aim of the study is comparing the psychiatric symptom in Type1 DM, Type 2 DM and controls.

Methods: The study was designed as case control study and conducted between September 2011 and April 2012 to the Diabetes Clinic. Age, gender and education level matched 70 type 1 diabetics, 68 type 2 diabetics and 70 controls included to the study. SCL-90-R [Symptom Check List-90 (Revised)] test is used for determining the psychiatric symptom rates.

Results: It was found that the rate of somatization, interpersonal sensitivity, anger-hostility and additional scales were significantly different in type 1, type 2 diabetics and controls ((p = 0.023, p = 0.008, p = 0.018 and p = 0.039, respectively). Compared to control group, being a patient with type 1 or type 2 Diabetes found as a risk factor for somatization, depression, anger-hostility and additional scales. Moreover being a patient with type 1 DM was found as a risk factor for having OBS symptoms (p = 0.039) and type 1 DM was protective against having interpersonal sensitivity symptoms (p = 0.006).

Conclusion: In diabetic patient groups, an increase in the rate of psychiatric symptoms was observed. Therefore a careful psychiatric examination is required in DM. (c) 2019 Diabetes India. Published by Elsevier Ltd. All rights reserved.

**Accession Number:** WOS:000466549300027
**PubMed ID:** 31336444

**Author Identifiers:**

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**ISSN:** 1871-4021
**eISSN:** 1878-0334

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**Record 70 of 104**

**Title:** Study of decision-making styles of managers according to their locus of control and learning styles

**Author(s):** Akyurek, S (Akyurek, Salim); Bastas, M (Bastas, Mert)
The objective of this research is to specify how the decision-making styles of managers change according to their learning styles and control approach. Three scales were used in this research: "Decision-Making Styles Scale (DMSS)", "Locus of Control Scale (LOCS)", and "Learning Styles Inventory (LSI)". This study involved managers, assistant principals and deputy managers of state secondary schools of the Ministry of National Education, Izmir. The result of the investigation revealed that managers preferred the decision-making styles in their majority, their focal point was the internal audit and the abstract adaptation that conceptualized the learning styles. It was observed that their decision-making styles differed proportionally in comparison with the learning styles and control approach.

Record 71 of 104
Title: Intrinsic oscillations of auditory networks in schizophrenia and bipolar disorder
Author(s): Atagun, MI (Atagun, Murat Ilhan); Akin, B (Akin, Burak); Algin, O (Algin, Oktay); Sikoglu, EM (Sikoglu, Elif Muazzez); Can, SS (Can, Serdar Suleyman); Kaymak, SU (Kaymak, Semra Ulusoy); Caykoylu, A (Caykoylu, Ali); Moores, C (Moores, Constance); Phillips, M (Phillips, Mary); Ongur, D (Ongur, Dost)
Source: DUSUNEN ADAM-JOURNAL OF PSYCHIATRY AND NEUROLOGICAL SCIENCES Volume: 32 Issue: 1 Pages: 4-13 DOI: 10.14744/DAJPNS.2019.00002 Published: MAR 2019
Abstract: Objective: Several types of evidence have shown that auditory networks are dysfunctional in schizophrenia (Sch) and bipolar disorders (BD). Auditory cortices show abnormalities in hallucinations or during remission. This study aimed to assess resting-state connectivity of auditory cortices in Sch and BD. Method: Patients with BD-1 (n= 28), BD-2 (n= 21), Sch (n= 30), and healthy controls (HC, n= 30) were enrolled into the study. A 3 Tesla whole-body magnetic resonance imaging (MRI) system with a 32-channel phase-array head coil was used to acquire the MRI data. T1-weighted anatomical and gradient-echo based Echoplanar Imaging sequences were used. MATLAB and Freesurfer software packages were used for data analyses. Connectivity alterations within the auditory network guided our further seed-based connectivity analysis. Results: The left angular gyrus volume was decreased in Sch and BD-2 groups. The supramarginal gyrus had hyperconnectivity with the medial prefrontal cortices and decreased connectivity with the medial superior temporal gyrus (STG) in the BD-1 and BD-2 groups. The left superior temporal sulcus (STS) had increased connectivity with the bilateral posterior cingulate cortex in BD-1 and BD-2 and increased connectivity with the dorsal prefrontal cortices in the Sch group. The STS had increased connectivity with the medial STG in the BD-1 and Sch groups, whereas connectivity decreased in the BD-2 group. Conclusion: These findings suggest that functional connectivity of resting-state networks are altered in BD and Sch. Auditory network alterations may predispose to dysfunctional auditory information processing. Further studies are needed to determine the relationship between symptoms and auditory network dysfunction.

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ISSN: 1018-8681
Record 72 of 104
Title: Evaluation of serum inflammatory markers in treatment-resistant manic patients and adequate responder manic patients
Author(s): Bulut, M (Bulut, Mahmut); Cati, S (Cati, Songul); Gunes, M (Gunes, Mehmet); Kaya, MC (Kaya, Mehmet Cemal); Kaplan, I (Kaplan, Ibrahim); Ozkan, M (Ozkan, Mustafa)
Abstract: Mania is accompanied with immune activation as indicated by increased pro-inflammatory cytokines, acute phase proteins; and carcinoembryonic antigen (CEA) is known to accompany signs of immune-inflammatory responses in bipolar disorder (BD) and medical disorders. In this study, it was aimed to compare high sensitivity C-reactive protein (hsCRP), CEA levels and white blood cells (WBCs) counts in the treatment-resistant BD (Group 3), the treatment-responsive BD patients (Group 2), and the healthy control group (Group 1). The sociodemographic data form, the Young Mania Rating Scale (YMRS), the Hamilton Depression Rating Scale (HDRS), and the Clinical Global Impression Severity of Illness (CGI-S) Scale were applied to the patients. In Group 3, the WBCs counts, and CEA levels were significantly higher than the other two groups. There was a positive correlation between WBCs counts and YMRS and CGI-S scores in all manic patients. There was a positive correlation between CEA levels and YMRS, HDRS and CGI-S in manic patients. This study shows that there is an activation of the immune-inflammatory response system in treatment resistant manic patients; and, WBCs counts and CEA levels are associated with severity of disease in manic patients.
Accession Number: WOS:000460094400011
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ISSN: 0165-1781

Record 73 of 104
Title: Who Believes in ESP: Cognitive and Motivational Determinants of the Belief in Extra-Sensory Perception
Author(s): Brankovic, M (Brankovic, Marija)
Source: EUROPEAN JOURNAL OF PSYCHOLOGY Volume: 15 Issue: 1 Special Issue: SI Pages: 120-139 DOI: 10.5964/ejop.v15i1.1689 Published: FEB 2019
Abstract: Many people believe in extra-sensory perception, e.g. the ability to communicate with thoughts, to sense future events or locate radiation with the help of a V-shaped piece of wood. Addressing a gap in research specifically focused on ESP beliefs, we investigated cognitive styles and basic motivations related to these beliefs in two survey studies. The findings suggest that a propensity to use intuition is the best predictor of ESP beliefs in terms of cognitive style. ESP belief is positively related to fear of death, and this relation is partly mediated by fatalism, i.e. the belief that chance controls one's life. ESP beliefs do not seem to be perceived as irreconcilable with a rational view of reality however, they do not necessarily provide psychological protection from existential concerns. The implications of the findings in terms of costs and benefits of these beliefs and the possibility to change them are discussed.
Accession Number: WOS:000460019900009
PubMed ID: 30915177
Author Identifiers:
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**ISSN:** 1841-0413

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**Record 74 of 104**  
**Title:** The Moderating Effect of Mental Toughness: Perception of Risk and Belief in the Paranormal  
**Author(s):** Drinkwater, K (Drinkwater, Kenneth); Dagnall, N (Dagnall, Neil); Denovan, A (Denovan, Andrew); Parker, A (Parker, Andrew)  
**Source:** PSYCHOLOGICAL REPORTS  
**Volume:** 122  
**Issue:** 1  
**Pages:** 268-287  
**DOI:** 10.1177/0033294118756600  
**Published:** FEB 2019  
**Abstract:** This research demonstrates that higher levels of mental toughness provide cognitive-perceptual processing advantages when evaluating risk. No previous research, however, has examined mental toughness in relation to perception of risk and paranormal belief (a variable associated with distorted perception of causality and elevated levels of perceived risk). Accordingly, the present paper investigated relationships between these factors. A sample of 174 participants completed self-report measures assessing mental toughness, general perception of risk, and paranormal belief. Responses were analyzed via correlations and moderation analyses. Results revealed that mental toughness correlated negatively with perception of risk and paranormal belief, whereas paranormal belief correlated positively with perception of risk. For the moderation effects, simple slopes analyses indicated that high levels of MT and subfactors of commitment and confidence reduced the strength of association between paranormal belief and perceived risk. Therefore, MT potentially acts as a protective factor among individuals who believe in the paranormal, reducing the tendency to perceive elevated levels of risk.  
**Accession Number:** WOS:000456528000016  
**PubMed ID:** 29402179  
**ISSN:** 0033-2941  
**eISSN:** 1558-691X

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**Record 75 of 104**  
**Title:** Prevalence of sarcopenia according to decade  
**Author(s):** Yazar, T (Yazar, Tamer); Yazar, HO (Yazar, Hulya Olgun)  
**Source:** CLINICAL NUTRITION ESPEN  
**Volume:** 29  
**Pages:** 137-141  
**DOI:** 10.1016/j.clnesp.2018.11.005  
**Published:** FEB 2019  
**Abstract:** Aim: Our study aimed to identify Skeletal Muscle Mass Index (SMMI) cut-off values for sarcopenia diagnosis in our population and determine the prevalence of sarcopenia, and to collect data about reducing the disease load.  
**Method:** The study was completed with 515 volunteers divided into groups based on ages of 18-39 years, 40-49 years, 50-59 years, 60-69 years, 70-79 years and 80 years and older. All groups had SMMI, muscle strength physical performance assessed, with sarcopenia diagnosis made using the European Working Group on Sarcopenia in Older People (EWGSOP) diagnostic criteria.  
**Results:** Together with advancing decades, there were significant reductions observed in SMMI, hand grip test (HGT) and 4-m walking test (4MWT) values. For females and males, the reduction in HGT and 4MWT values began after 50 years of age, while the reduction in SMMI began after 70 years for males and after 60 years for females. The prevalence of sarcopenia in the 40-49, 50-59, 60-69, 70-79 and 80 years plus age intervals were identified as 7%, 10.6%, 15.4%, 21.2% and 36.5%, respectively.  
**Conclusion:** Identification of sarcopenia prevalence in our population is important due to
Limitations of treatment administered after diagnosis is made. (C) 2018 European Society for Clinical Nutrition and Metabolism. Published by Elsevier Ltd. All rights reserved.

**Accession Number:** WOS:000456061800021

**PubMed ID:** 30661677

**Author Identifiers:**

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**ISSN:** 2405-4577

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**Title:** Sexual functions in women with bipolar disorder and their healthy spouses

**Author(s):** Caliskan, AM (Caliskan, Ali Metehan); Goktas, D (Goktas, Duygu); Arslan, M (Arslan, Mehmet); Inanli, I (Inanli, Ilkbal); Calisir, S (Calisir, Salia); Eren, I (Eren, Ibrahim)

**Source:** ANADOLU PSIKIYATRI DERGISI-ANATOLIAN JOURNAL OF PSYCHIATRY  **Volume:** 20  **Issue:** 1  **Pages:** 68-75  **DOI:** 10.5455/apd.299185  **Published:** FEB 2019

**Abstract:** Objective: The aim of this study was to compare the sexual problem levels of female patients with bipolar disorder (BD) and their healthy spouses with those of healthy couples and to investigate potential factors that predict sexual problems. Methods: Sixty female outpatients with BD in remission and their healthy spouses were included in the study. All patients were under medication. Forty-five healthy couples comprised the control group. All participants were examined on a variety of clinical measures, including depression, marital adjustment, and sexual satisfaction. Results: Sexual satisfaction, communication and anorgasmia problems were higher for patients than for female controls. Sexual intercourse frequency, communication and total sexual problems were higher for patients' spouses than for male controls. Logistic regression analyses for females revealed that sexual satisfaction was associated with age, depressive symptoms, and marital adjustment rather than presence of disorder. The sexual satisfaction was associated with marital adjustment rather than being spouse of a patient for males. Conclusions: After controlling for confounding factors, sexual problems of patients and their spouses are similar to those of controls. Treating the subsyndromal depressive symptoms of patients and using interventions to increase marital adjustment may improve the sexual functions of both patients and their spouses.

**Accession Number:** WOS:000455891800009

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**ISSN:** 1302-6631

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**Title:** Blood levels of agouti-related peptide (AgRP), obestatin, corticosteroid-binding globulin (CBG), and cortisol in patients with bipolar disorder (BD): a case-control study

**Author(s):** Karaguzel, EO (Karaguzel, Evrim Ozkorumak); Kural, BV (Kural, Birgul Vanizor); Tiryaki, A (Tiryaki, Ahmet); Altun, IK (Altun, Ilkay Keles); Ozer, SY (Ozer, Serap Yaman); Arslan, FC (Arslan, Filiz Civil)

**Source:** PSYCHIATRY AND CLINICAL PSYCHOPHARMACOLOGY  **Volume:** 29  **Issue:** 1  **Pages:** 14-20  **DOI:** 10.1080/24750573.2018.1487649  **Published:** JAN 2 2019
Abstract: OBJECTIVES: Bipolar disorder (BD) is a chronic psychiatric disorder with a high prevalence of obesity. There are a number of hypotheses regarding the association between obesity and BD. One involves common neurobiological abnormalities, such as dysfunction in the hypothalamic pituitary adrenal axis and changes in secretions of orexigenic and anorectic peptides. The purpose of this study was to evaluate the blood levels of agouti-related peptide (AgRP), obestatin cortisol, and corticosteroid-binding globulin (CBG) and metabolic parameters in patients with euthymic BD, and to compare these to those of healthy controls. METHODS: Twenty-nine outpatients with BD type I admitted to the psychiatric clinic were consecutively enrolled and compared with 25 sex- and body mass index (BMI)-matched controls. RESULTS: There was a significant difference in AgRP, cortisol, and CBG levels between patients and the controls (p = .005, .021, and .034, respectively). AgRP and CBG did not correlate with any parameter in BD patients, but cortisol correlated with BMI. CONCLUSIONS: We conclude that BD patients have higher levels of AgRP, cortisol, and CBG than healthy controls with similar BMIs. This may represent a new insight into the neurobiology of BD.

Accession Number: WOS:000461499800003

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ISSN: 2475-0573
eISSN: 2475-0581

Record 78 of 104
Title: The Role of Interpersonal Problem Solving in Using the Immature Defense Mechanisms in Adolescents
Author(s): Bedel, A (Bedel, Ahmet)
Source: UNIVERSITAS PSYCHOLOGICA Volume: 18 Issue: 5 DOI: 10.11144/Javeriana.upsy18-5.rips Published: 2019
Abstract: The purpose of this study was to examine associations between interpersonal problem solving and immature defense mechanisms in addition to whether interpersonal problem solving are predictors of immature defense mechanisms. The participants of the study consists of 428 high schools students (184 of the students were females). Interpersonal Problem Solving Inventory and Defense Style Questionnaire were applied. Results of multiple regression analyses indicated that all variables of interpersonal problem solving skills together accounted for 32% of the variance in defense mechanisms. Specifically, significant predictors of immature defense mechanisms levels were lack of self-confidence, negative approach to the problems, constructive problem solving respectively. Generally, the levels of adolescents resort to immature defense mechanisms, lack of self-confidence and negative approach to the problem of the increase, a decrease in constructive problem-solving skills are seen to be effective. The results of the study was discussd within the results of the previous studies.
Accession Number: WOS:000517823600008
ISSN: 1657-9267

Record 79 of 104
Title: The investigation of learned resourcefulness in terms of locus of control, sociotropy-autonomy personality traits, and demographic and professional variables in nurses
Author(s): Akgun, BM (Akgun, Bahanur Malak); Hicdurmaz, D (Hicdurmaz, Duygu); Oz, F (Oz, Fatma)
Abstract: Objectives: In this study, we aimed to investigate learned resourcefulness in terms of locus of control, sociotropy-autonomy personality traits, and demographic and professional characteristics in nurses.

Methods: The participants of the study comprised 339 volunteering nurses working at Hacettepe Adult, Pediatric, and Oncology Hospitals. Study data were collected with Nurse Data Form, the Sociotropy-Autonomy Scale, the Locus of Control Scale, and Rosenbaum's Learned Resourcefulness Scale (RLRS).

Results: Nurses working at the institution for more than 25 years and working only the day shift had higher learned resourcefulness scores than their counterparts. There was a positive correlation between learned resourcefulness and autonomy. Among the sub-dimensions of locus of control, the only variable to have a significant relationship with learned resourcefulness was determined to be "self-control". Additionally, autonomous personality type, self-control, and belief in an unfair world were predictors of learned resourcefulness in nurses.

Conclusion: Nurses with low levels of learned resourcefulness are relatively younger and inexperienced. Thus, psychoeducation and group counseling might improve their autonomy, self-control, and cognitive coping strategies. Autonomous personality traits and self-control were the basic predictors of learned resourcefulness.

Accession Number: WOS:000511400800002

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ISSN: 2149-374X
Title: The Relationships among Harm Avoidance, Repetitive Thinking, Locus of Control and Depressive Symptoms: A Moderated Mediation Model

Author(s): Kacar-Basaran, S (Kacar-Basaran, Servet); Ozyagci, B (Ozyagci, Baran); Arkar, H (Arkar, Haluk)

Source: TURK PSIKOLOJI DERGISI Volume: 34 Issue: 83 Pages: 57-73 DOI: 10.31828/101300443320180516m000004 Published: 2019

Abstract: Although the relationships between depressive symptoms and harm avoidance, locus of control, and repetitive thinking have been studied in many studies, there is no research including these variables together in the literature. In this study, a moderated mediation model proposed by Hayes (2013) was tested to examine the mediating effect of repetitive thinking between harm avoidance and depressive symptoms, and to examine the moderating effect of the locus of control on this mediation model. The sample consists of 359 university students in Ege University. Temperament Character Inventory-Harm Avoidance Subscale, Repetitive Thinking Questionnaire, Locus of Control Scale, Beck Depression Inventory were used as data collection tools. According to the results, repetitive thinking had a partial mediating effect on the relationships between harm avoidance and depressive symptoms. Moreover, locus of control had a moderating effect on the relationship between harm avoidance and depressive symptoms which was mediated by repetitive thinking. It has been found that this mediation is stronger as the external locus of control increases. While supporting the importance of cognitive behavioral therapy in reducing depressive symptoms, these findings emphasize that rumination-focused techniques may also contribute to the treatment.

Accession Number: WOS:000505264700004

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ISSN: 1300-4433
of Literature (N:100, 24.6 %), Faculty of Business Administration and Economics (N: 103, 25.3 %), Faculty of Fine Arts (N: 46, 11.3 %) and other faculties (N: 58, 14.3 %) of Kahramanmaras Sutcu Imam University regarding witching, magic and supernatural powers by conducting a quantitative research. In the research Frequency and Chi-Square test has been used and in the evaluation of data and finding of calculated values, SPSS 16.0 statistical package program has been used. As a conclusion in the study it has been determined that gender, faculty type, academic success level, and religiosity were influential in the attitudes had against witching, magic and supernatural powers.

**Accession Number:** WOS:000504861600007

**eISSN:** 2148-5860

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**Record 83 of 104**

**Title:** Psychache and Suicidal History in Patients with Obsessive-Compulsive Disorder

**Author(s):** Demirkol, ME (Demirkol, Mehmet Emin); Namli, Z (Namli, Zeynep); Davul, OE (Davul, Ozge Eris); Karaytug, MO (Karaytug, Mahmut Onur); Tamam, L (Tamam, Lut); Yilmaz, H (Yilmaz, Hamdi)

**Source:** NEUROPSYCHIATRIC DISEASE AND TREATMENT

**Volume:** 15  
**Pages:** 3531-3539  
**DOI:** 10.2147/NDT.S237369  
**Published:** 2019

**Abstract:** Purpose: Suicide is an important cause of death in patients diagnosed with obsessive-compulsive disorder (OCD) as well as other psychiatric disorders. Early determining of risk factors provides an opportunity for intervention. The mediating effect of psychological pain (also known as psychache) on suicide has been shown in various disorders but has not been investigated in patients with OCD. In this study, we aimed to show the relationship between psychological pain and other clinical variables and suicide in OCD patients.

Patients and methods: This cross-sectional study consisted of 67 patients diagnosed with OCD according to DSM-5 criteria with no comorbid psychiatric diagnosis who applied to the psychiatric outpatient clinic of Cukurova University Faculty of Medicine and 63 healthy controls. Among the OCD patients, 12 had previous suicide attempts. In addition to the sociodemographic data form, participants filled out the Yale-Brown Obsessive Compulsive Scale (YBOCS), the Psychache Scale (PS), the Beck Scale for Suicidal Ideation (BSIS), and the Hamilton Depression Scale (HDS).

Results: OCD group's median obsession, compulsion, and the total scores of YBOCS, and the mean PS scores were higher than the control group. There was no difference between the sociodemographic variables of OCD patients with and without previous suicide attempts such as age, gender, years of education, place of residence, marital, and occupational status. The median scores of obsession, avoidance, global severity, and indecisiveness subdimensions of YBOCS, the mean BSIS and PS scores, the rates of current aggressive, current contamination, and the past religious obsessions were higher in the suicidal group. There were moderately significant relationships in the same direction between the PS, BSIS, and total YBOCS scores. Multivariate regression analysis demonstrated that only the PS scores predicted previous suicide attempts.

Conclusion: Our results demonstrated that current aggressive, current contamination, past religious obsessions, and the higher psychological pain are related to previous suicide attempts in OCD patients. Our regression analysis supports Shneidman's hypothesis: there would be no suicide without psychache. Relieving psychache in OCD patients may reduce suicide attempts even if there is no diagnosis of comorbid depression.

**Accession Number:** WOS:000505023300001

**PubMed ID:** 31920313

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<td>Tamam, Lut</td>
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Title: Cognitive Control and Cognitive Flexibility in the Context of Stress: A Scale Adaptation

Author(s): Demirtas, AS (Demirtas, Ayse Sibel)

Source: STUDIES IN PSYCHOLOGY-PSIKOLOJI CALISMALARI
DERGISI Volume: 39 Issue: 2 Pages: 345-368 DOI: 10.26650/SP2019-0028 Published: 2019

Abstract: The purpose of the current research study is to adapt The Cognitive Control and Flexibility Questionnaire (CCFQ; Gabrys, Tabri, Anisman, & Matheson, 2018), which aims to measure the levels of cognitive control over emotions, appraisal and coping flexibility of individuals, into Turkish. The psychometric properties of the scale were tested in three stages in which the participants were university students. The first stage of the research, aimed to test the linguistic equivalence of the instrument, was conducted with 47 participants (66% female, 34% male), the second stage, aimed to test the construct validity and reliability of the measuring instrument, was conducted with 241 participants (65% female, 35% male), the third stage, aimed at examining the relationship of the measuring instrument with other structures, internal consistency, substance validity and reliability values, was conducted with 352 participants (45% female, 55% male). The psychometric properties of the scale were investigated by linguistic equivalence, item analysis, construct validity and Cronbach's alpha reliability. The Cognitive Flexibility Inventory, The Dispositional Hope Scale and The Perceived Stress Scale were used to test the validity. The results of the confirmatory factor analysis showed that the two-factor structure of the scale, Cognitive Control over Emotion and Appraisal and Coping Flexibility, has adequate fit values. As expected, it was found that the scale has positive and significant relationships with cognitive flexibility and dispositional hope, and negative and significant relationship with perceived stress. In the second and the third phases of the study, Cronbach's Alpha reliability coefficients were found to range from .85 to .91. In conclusion, the research findings indicate that the Turkish Form of CCFQ is a valid and reliable tool for the measurement of cognitive control over emotion and appraisal, and the coping flexibility of the Turkish university students in the context of stress.
applied to evaluate the executive functions; Reading the Mind in the Eyes Test, Hinting Task and Faux Pas Test were applied to evaluate the theory of mind skills. Results: There was not any significant difference between the groups in terms of theory of mind, although total scores were seen from bad to good in bipolar patients, first degree relatives and controls respectively. Patient group had significantly lower performance in Trail Making Test A, and DigitSpan Test inverse number scores. As the severity of disease increased, cognitive functions and the theory of mind were seen to be worsened. The theory of mind was related to executive functions. Discussion: In conclusion, we did not find significant losses in terms of theory of mind in bipolar patients and their first degree relatives. But bipolar patients had a deficiency in attention, psychomotor speed and verbal working memory; and theory of mind was related to executive functions.

Accession Number: WOS:000504064500004
ISSN: 1302-0099
eISSN: 2146-7153
Source: SARCOIDOSIS VASCULITIS AND DIFFUSE LUNG DISEASES  Volume: 36  Issue: 4  Pages: 294-301  DOI: 10.36141/svdld.v36i4.8418  Published: 2019

Abstract: Background and aim: Idiopathic pulmonary fibrosis (IPF) is a chronic, progressive interstitial lung disease (ILD) with unknown etiology that occurs primarily in older adults with a median survival time of 2.5 +/- 3.5 years. Since there is no curative treatment for IPF, patients with IPF may have symptoms of depression and anxiety more than those of other interstitial lung diseases. There is a few studies about comparison of anxiety depression with other interstitial lung disease and IPF. In this study, we investigated whether anxiety depression in IPF was more frequent than other ILDs and its effect on quality of life. Methods: The study was designed as a prospective study. Age, sex, smoking status, respiratory symptoms, comorbidities, pulmonary function tests, diffusion capacity of the lungs for carbon monoxide (TLCO), SF-36, and depression/anxiety levels, radiological findings, erythrocyte sedimentation rate (ESR), CRP level, blood gas analysis, complete blood count parameters were recorded. Results: The mean age of 50 IPF and 42 non-IPF interstitial lung disease patients were 67.4 +/- 7.1 and 64.9 +/- 7.2, respectively. Compared with the non-IPF group, SF-36 total, SF-36 physical function and SF-36 physical role severity were significantly lower in the IPF group, while the GAP score was significantly higher. There was no significant difference between the two groups in HAM-Anxiety and HAM-depression for total scores. But mild anxiety was present in most of non-IPF group. No severe anxiety was observed in this group. Forty-nine of 50 patients with IPF patients had moderate-severe anxiety and the difference was statistically significant compared to non-IPF patients. Conclusions: This is one of the first studies of anxiety and depression symptoms are also important in non IPF ILD like IPF. Patients with non-IPF ILD have similar anxiety depression with IPF patients in this study. This study led to the conclusion that anxiety depression should also be evaluated in non IPF ILD patients.

Accession Number: WOS:000503461600005
PubMed ID: 32476965

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ISSN: 1124-0490
linear regression analyzes show a significant effect of insecure attachment and external locus of control on the dimensions of anxiety, depression, obsessive-compulsive symptoms, eating disorders and somatic disorders. Aggressive behavior, on the other hand, is more influenced only by insecure attachment. In particular, in the comparison between subjects who have no disorder and those who present internalizing, externalizing or both types of disorder, a preponderance of ambivalent mental models emerges.

Record 89 of 104
Title: An exploration of the associations among cognitive flexibility, attachment styles and life satisfaction
Author(s): Odaci, H (Odaci, Hatice); Cikrikci, O (Cikrikci, Ozkan); Cikrikci, N (Cikrikci, Neslihan); Aydin, F (Aydin, Fatih)
Source: INTERNATIONAL JOURNAL OF HAPPINESS AND DEVELOPMENT Volume: 5 Issue: 3 Pages: 242-256 DOI: 10.1504/IJHD.2019.103401 Published: 2019
Abstract: This research aimed to investigate the correlation between life satisfaction of university students in the young adult period with cognitive flexibility and attachment styles. The research group comprised 633 university students. The results of data analysis found a positive significant correlation between life satisfaction of students and cognitive flexibility (r = .25, p < .01; 95% CI [0.17, 0.33]) and secure attachment style (r = .17, p < .01; 95% CI [0.08, 0.25]), while there was a negative significant correlation between life satisfaction and the dismissive attachment style (r = -.12, p < .01; 95% CI [-0.21, -0.04]). Among the results obtained in the study, the dependent variable of life satisfaction did not differ according to the sex (t((628)) = 1.49, p > .05) and grade variables (F(5,F(617) = 1.54, p > 0.05).

Record 90 of 104
Title: THE PREVALENCE AND SIGNIFICANCE OF CHILDHOOD TRAUMA IN ALCOHOL-DEPENDENT PATIENTS
Author(s): Zaorska, J (Zaorska, Justyna); Jakubczyk, A (Jakubczyk, Andrzej)
Abstract: Introduction: The long-term consequences of childhood traumatic events have been a subject of multiple studies. These studies revealed that people, who were maltreated in childhood, suffered frequently from mental disorders, including alcohol related problems. The aim of this review was to analyse the significance of childhood trauma (CT) in alcohol dependence. Medline database and Google were searched for this purpose.
Literature review: Childhood maltreatment (physical or emotional abuse and neglect, sexual abuse) or other adverse life events such as household dysfunctions are important risk factors of using alcohol. It is a contributor to early drinking initiation, alcohol abuse and alcohol dependence in adulthood. Current research confirms that the course of alcohol dependence in individuals who experienced traumatic life events might be severe and outcomes of treatment might be poor. Alcohol-dependent patients who were maltreated in childhood more commonly suffer from comorbid mental disorders, such as mood or anxiety disorder and posttraumatic stress
disorder. There is also an increased risk of self-destructive behaviours (self-aggression). Alcohol-dependent patients with a history of a suicide attempt or self-injuries significantly more often report being maltreated in childhood than patients without history of self-aggression. Conclusions: Childhood trauma significantly impairs course and prognosis of alcohol dependence. Taking into consideration the significance and consequences of childhood maltreatment, it seems very important to address this issue in the alcohol treatment process. However, in further investigation, it is important to develop knowledge on how childhood trauma affects alcohol use.

Accession Number: WOS:000485807900005
ISSN: 0867-4361

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**Record 91 of 104**

**Title:** Assessment of suicidal behavior in bipolar disorder

**Author(s):** Ugur, K (Ugur, Kerim); Tamam, L (Tamam, Lut); Ozpoyraz, N (Ozpoyraz, Nurgul); Demirkol, ME (Demirkol, Mehmet Emin)

**Source:** CUKUROVA MEDICAL JOURNAL  Volume: 44  Issue: 2  Pages: 659-668  DOI: 10.17826/cumj.503328  Published: 2019

**Abstract:** Purpose: In this study, the relationship between suicidal behavior and sociodemographic, clinical characteristics, impulsivity and childhood traumas of patients were investigated in bipolar disorder. The study sample was composed of patients with bipolar disorder who were followed in the Bipolar Disorder Unit of the Department of Psychiatry of the Medical Faculty of Cukurova University.

Material and Methods: The study included 91 patients who were admitted to our outpatient clinic with the diagnosis of Bipolar Disorder. The study data were collected by using the Mood Disorders Form, SCID-I, SCID-II, Young Mania Rating Scale, Hamilton Depression Rating Scale, Suicide Behavior Scale, Childhood Trauma Questionnaire and Barratt Impulsivity Scale. All diagnostic procedures and interviews were performed by the same psychiatrist.

Results: Of the 91 patients included in the study, 52 were female and 39 were male. There were history of suicide attempt in 40 of 91 bipolar disorder patients. In the group attempting suicide, the depressive and mixed episodes were more often and the functionality was partially affected during the inter-episode period and the frequency of psychotic features was higher. In addition, we could not find any statistically significant relationship between the two groups for childhood trauma and impulsivity.

Conclusion: Bipolar Disorder is a lifelong disease that significantly disrupts functionality. Bipolar disorder is associated with high rates of suicide attempt and completed suicide. In this respect, the investigation of sociodemographic, clinical and other variables among patients with suicidal behavior and the detection of possible risk factors will be effective in preventing possible suicidal behavior.

Accession Number: WOS:000480626400047

**Author Identifiers:**

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ISSN: 2602-3032
eISSN: 2602-3040

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**Record 92 of 104**

**Title:** Psychiatric Symptoms of Patients with Epilepsy
Author(s): Unal, Y (Unal, Yasemin); Inanc, L (Inanc, Leman); Semiz, UB (Semiz, Umit Basar); Kutlu, G (Kutlu, Gulnihal)


Abstract: Objectives: Psychiatric symptoms such as anxiety, depressive symptoms, psychotic symptoms, and mental retardation are much more common among patients with epilepsy (PWE) than the general population. This study aimed to evaluate psychiatric symptoms in patients with epilepsy.

Methods: Symptom Checklist 90-R Revised (SCL-90-R) was given to all consecutive patients with epilepsy in outpatient Epilepsy Department. Participants completed the SCL-90-R questionnaire. One neurologist and one psychiatrist evaluated these forms. Subscales of somatization, obsessive-compulsive thoughts, interpersonal sensitivity, depression, anxiety, phobic anxiety, psychoticism, paranoid ideation, and hostility were evaluated.

Results: A total of 111 PWE and 92 sex- and age- matched control subjects were included. The mean age of the patient group was 34.05 +/- 10.90 years. Of the patients, 43 were male and 68 were female. Fourteen (12.61%) patients were diagnosed with mental retardation. Based on our results of mean SCL-90-R score for each item, somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, phobic anxiety, paranoid ideation, and psychoticism were significantly higher in the patient group than the control subjects.

Conclusion: SCL-90-R is an easy test to evaluate psychiatric symptoms. It can be used for PWE to raise awareness of psychiatric symptoms. Once the clinicians become more aware of such symptoms, more accurate approach to the patients will be possible. In terms of follow-up of PWE, not only seizure frequency and severity but also other psychiatric symptoms are important.

Accession Number: WOS:000474456600009

ISSN: 1300-7157

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Record 93 of 104
Title: Chitinase-3-like protein 1 levels in bipolar disorder

Author(s): Sahin, B (Sahin, Basak); Inanli, I (Inanli, Ikbal); Caliskan, AM (Caliskan, Ali M.); Uysal, S (Uysal, Sema)

Source: SAUDI MEDICAL JOURNAL Volume: 40 Issue: 1 Pages: 26-32 DOI: 10.15537/smj.2019.1.23396 Published: JAN 2019

Abstract: Objectives: To evaluate the relationship between the expression level and biologic role of YKL-40 in bipolar disorder (BD).

Methods: This case-control study was conducted in the Faculty of Medicine, Canakkale Onsekiz Mart University, Canakkale, Turkey in 2015. One hundred and four patients diagnosed as having bipolar disorder (DSM5 criteria), and 96 participants were included as healthy controls in this study. A human YKL-40 enzyme-linked immunosorbent assay (ELISA) kit was used to measure the serum YKL-40 levels. As independent variables, we collected data on C-reactive protein (CRP), demographic variables, and medications.

Results: The mean YLK-40 levels for the BD was 2723.5 +/- 543.8 pg/ml and control groups was 2132.5 +/- 576.3 pg/ml (t=7.42, p<0.001). The mean CRP levels for the BD was 0.4 +/- 0.6 mg/dl and control groups was 0.4 +/- 0.7 mg/dl (t=0.02, p=0.985). The receiver operating characteristics (ROC) analysis revealed an area under the curve (AUC) of YKL-40 in the diagnosis of BD as 0.79 (95% confidence interval [CI]: 0.72-0.85) with a sensitivity of 82.7% and specificity of 68.1% at a cutoff level of 2307.1 pg/ml. The use of antidepressants, antipsychotics, mood modifiers, and the presence of any comorbidity was not related to the YKL-40 levels (p>0.05).

Conclusion: With acceptable sensitivity and specificity levels, the YKL-40 can be utilized as a marker in the diagnosis and follow-up of BD.

Accession Number: WOS:000472227100003
PubMed ID: 30617377
Record 94 of 104

Title: Critical professional skills of MIS graduates: Practitioner vs. Academician perspectives
Author(s): Ugur, NG (Ugur, Naciye Guliz); Turan, AH (Turan, Aykut Hamit)
Source: JOURNAL OF EDUCATION FOR BUSINESS Volume: 94 Issue: 4 Pages: 251-258 DOI: 10.1080/08832323.2018.1522291 Published: 2019
Abstract: Since enterprises have become aware of technological developments; they have started to give significant importance to information technology investments. As in all university departments, also management information systems (MIS) and business informatics programs analyze the change in the industry and aim to graduate students that fit the current needs. The authors aim to evaluate the critical skills of MIS graduates and industry based on industry demand. Providing information systems support, knowledge on latest systems, managerial knowledge, systems development, project management, and teamwork comprise the six critical factors for becoming a successful MIS professional.

Record 95 of 104

Title: Increased serum levels of NMDA receptor antibodies in female patients with bipolar disorder
Author(s): Ceylan, D (Ceylan, Deniz); Akan, P (Akan, Pinar); Doyuran, K (Doyuran, Kerim); Can, G (Can, Gunes); Erson, A (Erson, Ayca); Misir, E (Misir, Emre); Ozerdem, A (Ozerdem, Aysegul)
Abstract: Objective: Glutamatergic/GABAergic imbalance due to autoimmune antibodies targeting N-methyl-D-aspartate receptors (NMDA-R) is considered to be one of the shared pathways between bipolar disorder (BD) and autoimmune diseases. Evidence shows female vulnerability to autoimmune disorders, and suggests a sex-specific approach in autoimmunity research in BD. We aimed to assess serum concentrations of NMDA-R antibodies and density of NMDA and GABA receptors on platelets in euthymic patients with BD in comparison to healthy individuals; and to determine the impact of sex on serum concentrations of NMDA-R antibodies and the density of NMDA and GABA receptors on platelets. Method: NMDA antibody IgG were detected in serum samples of 27 DSM IV euthymic patients with bipolar disorder (16 females, 11 males) and 33 healthy individuals (17 females, 16 males), using ELISA method. The densities of NMDA and GABA receptors on platelets were investigated using immunocytochemical methods. Results: Patients with BD presented higher serum levels of NMDA-R antibodies in comparison...
to healthy individuals ($p < 0.001$). The densities of NMDA and GABA receptor on platelets were similar in both groups. The NMDA-R antibody levels were influenced by both diagnosis and sex ($F = 5.813, df = 1, p = 0.020$). Serum lithium levels showed a significant linear association with the serum NMDA-R antibody levels even adjusting for age, sex, body mass index ($F = -56.26, t = -2.52, p = 0.015, CI: -101.12/-11.40$). Discussion: Our findings support a potential role of NMDA-R antibodies in the underlying pathophysiology of BD, particularly for females.

**Accession Number:** WOS:000468583500002

**Author Identifiers:**

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**ISSN:** 1302-0099

eISSN: 2146-7153

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**Record 96 of 104**

**Title:** Effects of Childhood Abuse on Major Depressive Disorder

**Author(s):** Baykan, H (Baykan, Hayriye); Esen, EC (Esen, Emre Cem); Kul, M (Kul, Muslum); Can, MS (Can, Merve Sahin); Tirak, A (Tirak, Ayfer); Karlidere, T (Karlidere, Tunay)

**Source:** CLINICAL AND EXPERIMENTAL HEALTH SCIENCES Volume: 9 Issue: 1 Pages: 58-63 DOI: 10.5152/clinexphealthsci.2018.1007 **Published:** 2019

**Abstract:** Objective: Childhood trauma is a significant risk factor for major depressive disorder, which has a multifactorial etiology. We investigated the effects of childhood trauma, especially physical and sexual abuse, on depression later in adult life.

Methods: The study included 87 patients with depression and 87 healthy volunteers. Participants were asked to fill out the Childhood Trauma Questionnaire (CTQ) and Hamilton Rating Scale for Depression and Anxiety. We have used the three childhood trauma pattern groups by their CTQ scores. The first group consisted participants who did not report any childhood abuse. The second group comprised participants who had experienced emotional abuse and emotional or physical neglect. The third group included participants who reported physical and sexual abuse.

Results: Approximately half of pattern groups 1 and 2 consisted of healthy controls. However, all of the participants who were in pattern group 3 had major depressive disorder. Anxiety and depression levels both had positive correlations with emotional, physical, and sexual abuse.

There was a statistically significant difference between pattern groups 2 and 3 in all of the five categories of CTQ.

Conclusion: In our study, we found that incidences of physical and sexual abuse increase the risk of depression. Furthermore, they indicate an increased risk for a relationship that consists of emotional neglect and abuse, which is an independent risk factor for major depressive disorder. Therefore, we should not only focus on the individual traumas on childhood trauma cases but also consider if there is a defective pattern of relationship.

**Accession Number:** WOS:000462818200010

**ISSN:** 2459-1459

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**Record 97 of 104**

**Title:** DOUBLE BLIND CONTROLLED STUDY OF ADDING FOLIC ACID TO FLUOXETINE IN THE TREATMENT OF OCD

**Author(s):** Tural, U (Tural, Umit); Corapcioğlu, A (Corapcioğlu, Aytul); Bosgelmez, S (Bosgelmez, Sukriye); Koroglu, G (Koroglu, Gulturk); Unver, H (Unver, Hatice); Duman, C (Duman, Can); Onder, E (Onder, Emin)
Abstract: Background: Folate is important for the synthesis of serotonin the neurotransmitter which plays a main role in OCD. We, therefore, explored the efficacy of folic acid as add on treatment to fluoxetine in a double blind study among patients with OCD.

Subjects and methods: A double blind, 12-week study comparing the efficacy of folic acid as add on treatment and placebo in patients with OCD was conducted on thirty six (36) patients. Patients were randomly assigned to folic acid (5 mg/day) or placebo group in addition to fluoxetine (40 mg/day). After the baseline assessment, on week 2, 4, 6, 8 and 12 assessments were performed by using YBOCS, HAM-D, HAM-A and CGI-S. Serum folate, erythrocyte folate, serum homocysteine and B-12 levels were measured both baseline and the end of study.

Results: A mixed model repeated measures ANCOVA on Y-BOCS scores were used to determine the difference between folic acid and placebo groups. No significant differences were found in the ratios of gender or in the mean age, serum folic acid level, erythrocyte folate level, serum homocysteine level and serum B-12 level between the treatment groups at the baseline. Consecutively scores collected over six measurements on YBOCS, HAM-D, HAM-A and CGI showed non-significant differences between folic acid and placebo groups.

Conclusion: None of the biological markers of one carbon metabolism were associated with the change in YBOCS scores. It may be assumed that there is no beneficial effect of folic acid addition to fluoxetine in the treatment of OCD.

Accession Number: WOS:000463356100009
PubMed ID: 30948692

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ISSN: 0353-5053
Title: Analysis of psychological factors and sexual life in postmenopausal women: A cross-sectional study

Author(s): Akman, S (Akman, Seren); Cakici, M (Cakici, Mehmet); Keskindag, B (Keskindag, Buse); Karaaziz, M (Karaaziz, Meryem)


Abstract: Objective: The aim of this study was to analyze the psychological and sexual experiences of postmenopausal women. Method: This cross-sectional study included 100 females (50 postmenopausal and 50 non-menopausal women). The symptoms of menopause were assessed by the Menopausal Symptoms Scale (MRS), psychological symptoms were assessed by the Symptoms Check List (SCL-R 90), and sexual functions were evaluated by the Arizona Sexual Experience Scale (ASEX) and the Golombok Rust Inventory of Sexual Satisfaction (GRISS). Results: The findings indicated that mean scores of all subscales of the SCL-R 90 were significantly higher among postmenopausal women in comparison with non-menopausal women. No significant differences were found between postmenopausal and non-menopausal women in terms of sexual satisfaction. However, mean scores of vaginimus and anorgasmia subscales of the GRISS were significantly higher in postmenopausal women than non-menopausal women. Discussion: This study showed that menopause may affect women's mental health because of its psychological consequences. Although menopause can influence sexuality because of physical consequences, findings indicated that menopausal women tend to report they still have sexual satisfaction. Multidimensional health care including psychological support could be efficient for menopausal women.

Accession Number: WOS:000459376000004

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ISSN: 1302-0099
eISSN: 2146-7153

Record 99 of 104

Title: Sexual functions and prolactin levels in patients with bipolar disorder

Author(s): Yuksel, RN (Yuksel, Rabia Nazik); Yaylaci, ET (Yaylaci, Elif Tatlıdil); Kaya, H (Kaya, Hasan); Erzin, G (Erzin, Gamze); Akdag, EM (Akdag, Emine Merve); Demirci, A (Demirci, Adem); Aydemir, C (Aydemir, Cigdem); Gaoka, E (Gaoka, Erol)
Abstract: Objective: Mood stabilizers and antipsychotic drugs are known to have adverse effects on sexual function. However, patients often refrain from speaking about sexual complaints that may cause dose reduction and discontinuation of the drug without medical supervision. In this study we aimed to evaluate sexual functions of patients with bipolar disorder in remission period, considering prolactin levels and medications. Method: We recruited 52 patients with bipolar disorder in remission according to DSM-IV diagnostic criteria. Prolactin levels were measured in all patients. The Golombok Rust Inventory of Sexual Satisfaction (GRISS) was used to assess sexual dysfunction. Results: Mean prolactin levels were 24.71 +/- 4.25 and 19.96 +/- 5.52 ng/ml respectively for females and males. Patients taking mood stabilizer (MS) and mood stabilizer plus antipsychotic (AP) treatment had different prolactin levels (p<0.001). Total GRISS scores were not different for MS and MS+AP treatment groups. We didn't find a correlation between Total GRISS scores and prolactin levels. There was a significant deterioration in female non-sensuality, female dissatisfaction and anorgasmia subscales of female patients and significant deterioration in premature ejaculation, impotence and male dissatisfaction subscales of male patients.

Discussion: In our sample, both men and women patients with bipolar disorder in remission have sexual dysfunctions. Our results suggest that prolactin levels are not sufficient to demonstrate the sexual dysfunction. To enhance patient compliance it is necessary to focus more on sexual symptoms of patients receiving MS and AP treatment.

Accession Number: WOS:000459376000006

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ISSN: 1302-0099
eISSN: 2146-7153

Record 101 of 104

Title: Turkish adaptation of emotion regulation skills questionnaire-emotion specific: The study of reliability and validity

Author(s): Vatan, S (Vatan, Sevginar)


Abstract: Objective: The aim of this study was to bring one of the emotional regulation measurements to Turkish Language. For this, we evaluated validity and reliability of the Emotion Regulation Skills Questionnaire-Emotion Specific in a Turkish sample. Method: In total 514 university students (295 female and 219 male) participated and completed Emotion Regulation Skills Questionnaire-Emotion Specific, Emotion Regulation Skills Questionnaire, and SCL-90. Results: In the reliability study, the Cronbach alphas for different emotions sub-scales were between .86 and .92. Most of the item total correlations were higher than .30. Additionally, in the validity study the whole scale and subscales were revealed high correlations with each other and variables used for criterion validity. Discussion: To sum up, the results suggest that the validity and reliability of the Turkish form of Emotion Regulation Skills Questionnaire -Emotion Specific was at a satisfactory level.

Accession Number: WOS:000459376000008

ISSN: 1302-0099
eISSN: 2146-7153
Record 102 of 104
Title: Theory of mind abilities and its relationship with clinical features in euthymic bipolar patients
Author(s): Budak, EA (Budak, Elif Ates); Kucukgoncu, S (Kucukgoncu, Suat); Bestepe, EE (Bestepe, Engin Emrem)
Source: CUKUROVA MEDICAL JOURNAL Volume: 44 Issue: 1 Pages: 176-182 DOI: 10.17826/cumj.497219 Published: 2019
Abstract: Purpose: The term of 'Theory of mind' (ToM), is the ability to understand one's own others' mental states, is an important capacity for social cognition and there is increasing data that theory of mind is compromised in bipolar patients even in euthymic periods. The aim of this study was to investigate theory of mind deficits in euthymic bipolar disorder patients and its relation to the clinical features.
Materials and Methods: Fiftytwo euthymic patients with bipolar I disorder according to DSM IV-TR and 60 matched healthy control subjects were involved in this study. ToM was assessed by Reading the Mind in the Eyes test and the Dokuz Eylul Theory of Mind Scale.
Results: The patient group had significantly lower performance on both of the ToM tests. We observed significant correlation between age of onset, the number of hospitalizations, the number of manic/mixed episodes and theory of mind performance.
Conclusion: The result we showed is that ToM is impaired in euthymic bipolar I patients, which is consistent with the studies suggesting that ToM might be a trait marker for bipolar disorder.
Accession Number: WOS:000458742100023
ISSN: 2602-3032
eISSN: 2602-3040

Record 103 of 104
Title: Cross-Cultural Psychometric Properties of the Hamilton Depression Rating Scale
Author(s): Vindbjerg, E (Vindbjerg, Erik); Makransky, G (Makransky, Guido); Mortensen, EL (Mortensen, Erik Lykke); Carlsson, J (Carlsson, Jessica)
Abstract: Objective: The Hamilton Depression Rating Scale (HDRS) is considered the gold standard measure of depression. The factor structure of the HDRS is generally unstable, but 4 to 8 items appear to form a general depression factor. As transcultural studies of the HDRS have received little attention, and as most of the studies have taken a data-driven approach with a tendency to yield fragmented results, it is not clear if an HDRS general depression factor can also be found in non-Western populations. This is an important issue in deciding on the appropriateness of the scale as a gold standard in transcultural psychiatry. Method: A systematic review was carried out to compare previously reported factor structures of the HDRS in non-Western cultures. Overlapping clusters across studies were identified and subsequently tested with confirmatory factor analysis (CFA) of responses from an independent sample. Results: Fourteen relevant studies were identified, 12 of which were obtained. A general depression factor was identified, consisting of the following symptoms: depressed mood, guilt, loss of interests, retardation, suicide, and psychological anxiety. The subsequent CFA analysis supported the fit of this model. Conclusions: This study indicates that a general depression cluster is manifest in responses to the HDRS across cultures. While psychometric properties of the full-length HDRS are still debated, the general depression cluster appears pertinent to the assessment of depression across cultures. We recommend that cross-cultural clinicians and researchers focus on the use of unidimensional depression scales, which are in agreement with this cluster.
Accession Number: WOS:000458189500005
PubMed ID: 29719964
Gender-Role Attitudes Mediate the Effects of Adult ADHD on Marriage and Relationships

Objective: Adult ADHD has dramatic impacts on various aspects of life and relationships. This study investigates how "gender roles" mediate the effects of ADHD on marriage. Method: Sixty-two heterosexual couples were included in the study. The Marital Impact Checklist is used to assess the effects of ADHD on marriage. The Gender Roles Attitude Scale is used to measure gender roles in both the patient and the spouse. Results: The Turkish version of the Marital Impact Checklist is found to have good internal consistency and utility in research and clinical work with ADHD couples. The female non-ADHD partners reported feeling of "Unloved" and "Negative Impact" more than their male counterparts. Some subdomains of the gender roles of both the patient and their non-ADHD spouse seem to mediate the effect of adult ADHD's impact on marriage. Conclusion: Sex and gender roles diversify how ADHD affects marriage.

Accession Number: WOS:000453435900005
PubMed ID: 26689937
ISSN: 1087-0547
eISSN: 1557-1246