= 2025年9月27日(土) 10:40 ~ 12:10 **=** Session Room 7 (Conference Room C) **Oral 14**

[O-14-01]

A scoping review of qualitative studies assessing quality of life among individuals with Obsessive Compulsive Disorder across different cultural contexts.

*Ku Nurul Izzah Ku Seman, Shalisah Sharip, Syahnaz Mohd Hashim, Idayu Badilla Idris (Universiti Kebangsaan Malaysia(Malaysia))

[O-14-02]

Personality Disorder and Culture

*Roger Mulder (University of Otago(New Zealand))

[O-14-03]

Development and Validation of a Perioperative Psychiatric Symptom Worsening Risk Score in Patients with Schizophrenia Spectrum Disorders: A retrospective cohort study

*Yoshihiro Matsumoto¹, Nobutaka John Ayani^{1,2}, Masaki Fujiwara³, Toshiya Funatsuki⁴, Takashi Fukao³, Shinji Ueda³, Ai Takahashi⁴, Nozomu Oya^{1,5}, Riki Kitaoka¹, Shinichiro Inoue⁶, Jin Narumoto¹ (1.Kyoto Prefectural University of Medicine(Japan), 2.Maizuru Medical Center(Japan), 3.Okayama University Hospital(Japan), 4.Kansai Medical University(Japan), 5.Japanese Red Cross Kyoto Daini Hospital (Japan), 6.Nimi University(Japan))

[O-14-04]

36 years in depression treatment ward

*Yuichiro Tokunaga¹, Michihiko Matsushita¹, Reo Goto^{2,1}, Hikaru Hori² (1.Shiranui Hospital(Japan), 2.Department of Psychiatry, Faculty of Medicine, Fukuoka University(Japan))

[O-14-05]

Validation of the Revised Green et al. Paranoid Thoughts Scale (R-GPTS) in Indonesian adolescents

*Dian Caesaria Widyasari^{1,2}, Tom Clark¹, Jessica Kinsgton³, Richard Bentall¹ (1.University of Sheffield(UK), 2.University of Muhammadiyah Malang(Indonesia), 3.Royal Holloway University of London(UK))

[O-14-06]

Cultural Dimensions of Hallucination and Delusion among Psychotic Patients in Java, Indonesia

*Subandi Subandi¹, Carla R. Marchira¹, Nida Ul Hasanat¹, Muhana Sofiati Utami¹, Byron J Good² (1.Universitas Gadjah Mada(Indonesia), 2.Harvard Medical School(United States of America))

童 2025年9月27日(土) 10:40 ~ 12:10 **章** Session Room 7 (Conference Room C) **Oral 14**

[O-14-01] A scoping review of qualitative studies assessing quality of life among individuals with Obsessive Compulsive Disorder across different cultural contexts.

*Ku Nurul Izzah Ku Seman, Shalisah Sharip, Syahnaz Mohd Hashim, Idayu Badilla Idris (Universiti Kebangsaan Malaysia(Malaysia))

キーワード: Obsessive Compulsive Disorder、Quality of Life、scoping review

Introduction: The quality of life of individuals with Obsessive Compulsive Disorder (OCD) (QOL) was typically measured using available generic QOL scales, with the focus on evaluating its impact on their lives or as an intervention outcome. It has been acknowledged that the impact on QOL may vary across different societies and cultures. Some qualitative studies have been conducted to identify the effect of OCD on individuals' daily lives. Thus, this scoping review focused on synthesizing the literature on how QOL was affected in these individuals across different cultures, with a specific interest in extracting the core domains.

Method: A systematic search was conducted on MEDLINE, Web of Science, Science Direct, and Google Scholar databases to find relevant English-written articles published until 11 March 2025. Qualitative studies on adult patients' experiences dealing with OCD symptoms were included. This scoping review was performed following the PRISMA-Scr Checklist. Seven articles were included out of 38 articles screened for the analysis.

Result: Thematic synthesis revealed **five** core domains of QOL that typically affect individuals with OCD: *Psychological domain, Physical domain, Functional Outcomes, Spirituality,* and *Social domain*. The domains were interconnected, highlighting the complex nature of QOL in individuals with OCD. The Spirituality theme emerged, although it was not consistently discussed in different cultures, implying that assessments of QOL can be subjective and sensitive to cultural variations.

Conclusion: These findings highlight the multidimensional nature of QOL in OCD, where domains are interrelated and specific to cultures. This review emphasizes the importance of a holistic and culturally sensitive approach in measuring QOL for individuals with OCD.

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[O-14-02] Personality Disorder and Culture

*Roger Mulder (University of Otago(New Zealand)) キーワード:Personality Disorder、ICD 11 classification、Culture

A review of the relationship between the new ICD 11 personality disorder classification system and the study of cultural influences on behaviour will be presented. The ICD 11 system offers significant advantages over previous classifications and aligns with models of normal personality such as the Five Factor model, which are widely used in cultural psychiatry. A new brief screening instrument for ICD 11 personality will be presented, which has been used in population studies. The author helped develop the measure and was also on the WHO ICD 11 Personality Disorder committee.

童 2025年9月27日(土) 10:40~12:10 **逾** Session Room 7 (Conference Room C) **Oral 14**

[O-14-03] Development and Validation of a Perioperative Psychiatric Symptom Worsening Risk Score in Patients with Schizophrenia Spectrum Disorders: A retrospective cohort study

*Yoshihiro Matsumoto¹, Nobutaka John Ayani^{1,2}, Masaki Fujiwara³, Toshiya Funatsuki⁴, Takashi Fukao³, Shinji Ueda³, Ai Takahashi⁴, Nozomu Oya^{1,5}, Riki Kitaoka¹, Shinichiro Inoue⁶, Jin Narumoto¹ (1.Kyoto Prefectural University of Medicine(Japan), 2.Maizuru Medical Center(Japan), 3.Okayama University Hospital(Japan), 4.Kansai Medical University(Japan), 5.Japanese Red Cross Kyoto Daini Hospital (Japan), 6.Nimi University(Japan)) $+ - \nabla - F : schizophrenia spectrum disorders, Risk Score, Administrative psychiatry$

Background

Some patients with schizophrenia spectrum disorders (SSDs) may experience a worsening of psychiatric symptoms during the perioperative period, even if their psychiatric symptoms are stable at the time of admission, requiring intervention by psychiatrists or transfer to a psychiatric ward. In Japan, the number of general hospitals with full-time psychiatrists or psychiatric beds is declining, highlighting the need for assessment tools to select the appropriate medical institution based on the risk of worsening psychiatric symptoms in patients. However, no objective tool currently exists to meet this need.

Objective

To develop and internally validate a simple scoring model to predict the risk of perioperative psychiatric symptom worsening in patients with SSDs.

Methods

We retrospectively analyzed medical records from three Japanese hospitals over five years (2017–2022). Eligible patients had SSDs and were admitted to non-psychiatric wards for surgery. Psychiatric symptom worsening was defined as: (1) changes in psychotropic medications for ≥ 4 consecutive days, (2) use of physical restraints due to psychiatric symptoms, or (3) transfer to a psychiatric ward. Three predictors were selected based on our previous research: (1) surgery duration >180 minutes, (2) emergency surgery, and (3) admission from a location other than home. Each factor was assigned 1 point. Logistic regression confirmed all predictors as significant.

Results

Among 200 patients, 25 (12.5%) experienced psychiatric deterioration. The model demonstrated good discrimination (AUC = 0.743; bootstrap-adjusted AUC = 0.744, 95% CI: 0.632–0.841). A cutoff of \ge 1 yielded high sensitivity (88.0%) and low specificity (37.1%); a score of 3 yielded high specificity (98.9%) and low sensitivity (24.0%). Patients were classified into three risk groups: low (0), medium (1–2), and high (3).

Conclusion

This model may support clinicians in assessing perioperative psychiatric risk and selecting appropriate care settings, and requires external validation.

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[O-14-04] 36years in depression treatment ward

*Yuichiro Tokunaga¹, Michihiko Matsushita¹, Reo Goto^{2,1}, Hikaru Hori² (1.Shiranui Hospital(Japan), 2.Department of Psychiatry, Faculty of Medicine, Fukuoka University(Japan)) $\pm - \nabla - \mathcal{F}$: ward for mood disorders, patient assessment, ambivalence of dependence

Introduction

Since 1989, the fully open ward for mood disorders at Shiranui Hospital has admitted 6,544 patients. The ward's design incorporates natural sensory stimuli to activate the five senses and promote healing. I would like to report on the results so far.

1. Method

Treatment is not only medication, but also All 90 minutes of each week staff meeting, personal and group psychotherapy, family therapy, mindfulness, and so on.

2. results

2023 1 year, mean HAM-D scores improved from 24.7 at admission to 10.4 after one month, and 7.7 at discharge. These results were almost identical to those previously presented at APA .78% of patients had suicidal ideation at the time of hospitalization and it drops to 13% in one month. 15 persons committed suicide out of 6,544 people.

3. patient assessment

We conducted a comparative study of medical evaluations of inpatients in 2003 and 2022. The results were As for whether received the treatment you wanted, "Yes" it rose from 65% to 94%. As for treatment with guaranteed quality, "yes" it rose from 68% to 87%.

consideratoin

We believe that the following factors are responsible for the rapid recovery of symptoms and constant patient evaluation.

- 1. Emphasis on the treatment environment.
- 2. 90minutes weekly conferences.
- 3. Understanding the ambivalence of dependence of depressed people and the lack of security in relationships.

When patients expressed their repressed emotions, we accepted them as a team, even if they were aggressive.

童 2025年9月27日(土) 10:40~12:10 **章** Session Room 7 (Conference Room C) **Oral 14**

[O-14-05] Validation of the Revised Green et al. Paranoid Thoughts Scale (R-GPTS) in Indonesian adolescents

*Dian Caesaria Widyasari^{1,2}, Tom Clark¹, Jessica Kinsgton³, Richard Bentall¹ (1.University of Sheffield(UK), 2.University of Muhammadiyah Malang(Indonesia), 3.Royal Holloway University of London(UK))

キーワード: Adolescent、Paranoia、R-GPTS

Background: Brief self-reports can enhance the early detection of paranoia in adolescents, but such tools are often limited for non-English speaking populations. The Revised Green et al. Paranoid Thoughts Scale (R-GPTS) assesses paranoia through two subscales: Part A - ideas of reference (8 items), and Part B - ideas of persecution (10 items). This study examines the psychometric properties of the Indonesian translation of the R-GPTS, providing a concise self-report measure for Indonesian adolescents. **Method:** A convenience sample of 247 adolescents aged 14 to 18 from three secondary schools completed the R-GPTS, along with the Social Phobia Inventory (SPIN), the Rosenberg Self-Esteem Scale (RSES), the Inventory of Parent and Peer Attachment (IPPA), and the Brief Self-Report Measure of Adolescent Bullying. To evaluate model fit, confirmatory factor analysis was conducted using the Weighted Least Squares Mean and Variance adjusted (WLSMV) estimator. **Results:** Most participants were 16 (29.4%) and female (55.6%). The model showed adequate-to-good fit: CFI = .924, TLI = .913, RMSEA = .089, and SRMR = .070, confirming the two-factor structure. Internal consistency was acceptable for Part A (α = .78) and good for Part B (α = .87). Construct validity was demonstrated by significant positive relationships between bullying victimization and social anxiety with paranoia, while self-esteem and maternal attachment exhibited negative correlations with paranoia. The Indonesian version of the scale has been subsequently used in a 12-month longitudinal study with around 1,200 adolescents aged 15 to 18, exploring factors related to the development of paranoia symptoms over time. The baseline data from this cohort has confirmed the factor structure and properties of the scale. **Conclusions:** The Indonesian R-GPTS demonstrated satisfactory psychometric properties, supporting its use as a reliable tool for assessing paranoia in Indonesian adolescents.

童 2025年9月27日(土) 10:40~12:10 **章** Session Room 7 (Conference Room C) **Oral 14**

[O-14-06] Cultural Dimensions of Hallucination and Delusion among Psychotic Patients in Java, Indonesia

*Subandi Subandi¹, Carla R. Marchira¹, Nida Ul Hasanat¹, Muhana Sofiati Utami¹, Byron J Good² (1.Universitas Gadjah Mada(Indonesia), 2.Harvard Medical School(United States of America))

キーワード:Hallucination、Delusion、Cultural dimension、Psychosis、Java、Indonesia

Hallucination and delusion are culturally and socially constructed. They are not only the manifestation of the internal world of psychotic patients, but also the reflection of their external world. This research aims to explore the varieties of hallucinations and delusions experienced by Javanese psychotic patients and their relation to their sociocultural environments. We employed a case study method by involving 15 psychotic patients recruited from the local hospitals. We conducted interviews with participants and their family members in their home settings, allowing us to observe their everyday lives. The thematic analysis identified six themes describing participants' experiences. First, Javanese mythology, in which some participants believed in meeting Nyai Loro Kidul, the beautiful and powerful spirit gueen of the South Sea, who was always depicted as dressed in green. Second, some reported seeing Javanese spiritual beings, such as buto ijo, genderuwo, and pocong, which threatened them. Third, Islamic religious beliefs, in which some participants saw angels, were influenced by the archangel Gabriel and Jin, or involved experiencing the *padhang mahsyar*, a gathering place of final judgment after the Day of Doom. Fourth, participants mentioned national political issues such as the 1965 massacre of communist party members and the corruption trial of the son of former president Suharto. Finally, the fifth is the global issues, such as the 9/11 tragedy, and the figures of Osama bin Laden, Lady Diana, and were part of participants' delusional experiences. The study concludes that the hallucinations and delusions of psychotic patients are the pseudo-reality that the patient constructs as a reflection of the real-life of contemporary Javanese culture, incorporating traditional, religious, and modern cultures in a local, national, and global world.