

showed that it was a high planned suicide case. Conclusion: In this paper, we aimed to draw attention to the cases that are in the risk of high-planned suicide attempts and the precautions that should be taken. Key words: High Planned Suicide, SIS,

PP-90**TRAUMATIC PSYCHOLOGICAL EFFECTS OF SEXUAL DYSFUNCTION ASSESSMENT IN DIVORCING**

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Background: Sexual dysfunctions (SD) have a negative impact on marriages and social relationships. It's known that couples must have physical, psychological and social compatibility for healthy sexual life. SD might be a reason for dissolution of marriage. Expert opinion is needed and couples could be sent to forensic medicine units for examination in SD claims. Besides to the psychological affects of divorcing, experience during the procedures of medico-legal assessments of sexual dysfunctions, couples could face additional psychological trauma. We aimed to emphasize the psychological trauma in medico-legal assessment procedures of SD and to discuss problems arise during these evaluations. Methods: We selected three couples applied to our forensic medicine department who were sent from courts for medico-legal evaluation of sexual dysfunctions for discussing the subject at issue. Results: The age of men was higher than women in all three couples. The duration of marriage was maximum two years. It could be not found any physical or psychiatric disorder in couples except one of female patient diagnosed as female sexual pain disorder (vaginismus). Although it is inappropriate two couples were sent together to our department for SD examination. Couples were examined more than one time because of consultations and several laboratory examinations and diagnostic tests was performed. All of the couples found this process confusing and insulting. Conclusion: Judgment considers sexual dysfunctions from the point of physical or anatomical disorders. Evaluation of physical and anatomical disorders could not be sufficient to diagnose SD between couples. Involved physicians must notice in their medical opinions that sexual life is affected from medical, social, cultural and

psychological influences. Key Words: Sexual dysfunction assessment, psychological trauma

PP-91**EFFECTS OF PHYSICAL TRAUMA AND SEXUAL ASSAULT ON ADULT MENTAL HEALTH**

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Background: In individuals who are injured due to different kinds of physical trauma, contrary to physical impacts, psychological symptoms can be more evident and they can preserve their presence for a long time. In this study, assuming the fact that psychiatric assessment are not taken into consideration in the physical trauma cases; we have planned to bring up the presence of psychological trauma in our medicolegally evaluated patients due to different types of traumas. Methods : The hospital records of patients, age ≥ 18 who applied to the Department of Forensic Medicine for medico-legal evaluation between 1999 and 2009, were retrospectively analyzed. Psychiatric assessment was performed in 142 patients by Consultation and Liaison Psychiatry Section of our University hospital. The psychiatric diagnoses were performed according to DSM-IV. Social and demographic characteristics of the cases and the severity of the injuries were also considered in evaluation. Results : 80 (56.3%) of the 142 patients were female and their average age was $40,30 \pm 17,17$ years. The most frequent traumatic incidents were traffic accidents (29.6%) and violence related blunt force trauma (28.2%) which were followed by sexual assault (14.1%) and domestic violence (13.4%) respectively. The distribution of foremost psychiatric diagnoses were anxiety disorder (48 %), adjustment disorder (11,3 %), mood disorder (8.5 %). In all psychiatric diagnoses, acute stress disorder was the most frequent disorder (27.5 %). In 27 cases of the 142 it was determined that psychiatric symptoms and findings did not cover the diagnostic criteria. The most frequent diagnosis as a consequence of violence related to blunt force trauma and traffic accidents were anxiety disorders (respectively 57.5 % and 59.5 %). 25 % of the sexual assault victims did not fulfill any psychiatric diagnosis. Conclusion : Although the distribution of psychiatric diagnoses were