

In this the presentation we discuss data suggesting an association between the A-1438G (rs6311) polymorphism of the 5-HT<sub>2A</sub> receptor gene and the impulsivity of the suicidal behaviour. However, we found an excess of the -1438A allele in non-impulsive suicide attempts as compared with impulsive suicide attempts and with a healthy control group. These findings agree prior report by Giegling et al (2006) and suggest that this functional polymorphism may modify the phenotype of suicidal behaviour and could be related to the impulsivity of the attempt.

### S30.04

Interplay of environment, genes and cognitions in the vulnerability to suicide attempts

P. Courtet. *Université Montpellier, Inserm U888, Montpellier, France*

Suicidal individuals are constantly submitted to the influence of psychosocial life events that may act as triggers as well as vulnerability factors to the suicidal behaviour. On the other hand, suicidal persons nearly always suffer from psychiatric disorders, and growing evidence suggest that they carry vulnerability traits related to psychological traits and genetic factors. In recent studies we shown that decision making was involved in the vulnerability to suicidal behaviour independently from the psychiatric disorders of the patients. We reported that decision making was influenced by several serotonergic genotypes associated with the vulnerability to suicidal behaviour.

First, we will examine the nature of the interactions between candidate genes and environmental factors in the susceptibility to suicide attempts. Some data suggest that the genes coding for 5HTT and BDNF influence role of childhood maltreatment on suicidal risk. Moreover, we investigated the existence of such interactions on the risk of severity of the suicidal behaviour. We created an index of suicidal severity by assessing various characteristics of the suicidal act. We investigated whether this suicidality index was influenced by 5HTT genotypes, history of childhood maltreatment and their combination.

Second, by assessing several cognitive functions including decision making, in suicide attempters, we reported the influence of cognitive functioning on the risk of occurrence of some specific stressful life events and a correlation with childhood early maltreatment.

In conclusion, the data presented here suggest that the relationship between environmental factors, genes and cognitive functioning in suicide attempters are of both interactive and correlative natures.

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## Symposium: Predictors of the longitudinal course of mood and anxiety disorders

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### S18.01

Predictors of the longitudinal course of mood and anxiety disorders in children and adolescents

M. Preisig<sup>1</sup>, S. Rothen<sup>1,2</sup>, O. Halfon<sup>1</sup>, D. Fornerod<sup>1</sup>, C.L. Vandelour<sup>2</sup>, F. Ferrero<sup>2</sup>. <sup>1</sup>Department of Psychiatry, University Hospital Center of Lausanne, Lausanne, Switzerland <sup>2</sup>Department of Psychiatry, University Hospital of Geneva, Geneva, Switzerland

**Background and Aims:** Follow-up studies on the offspring of parents with psychiatric disorders offer the opportunity to study the influence of parental disorders on both the incidence and course of psychopathology in their children. Using this study design, we are

examining the impact of parental psychopathology and potential individual risk factors on the course of depression in childhood and adolescence.

**Methods:** As part of a family study, we have collected extensive clinical information on 59 probands with bipolar disorder, 50 probands with major depressive disorder, 29 probands with alcohol or heroin dependence and 45 medical controls with children in the age range from 7 to 17 years (N=283). Probands and their spouses have been interviewed using the DIGS, offspring using the K-SADS. Parents have also provided diagnostic information on their children using the FH-RDC. Both offspring and parents have been followed up every three years, which will make it possible to prospectively test predictors of course in children.

**Results:** Collection of follow-up data is ongoing. The main results regarding the impact of parental and individual risk factors on the course of depression in children in terms of long-term social impairment and the presence of episodes at later follow-up exams will be presented at the conference. The individual risk factors examined will include the sex, birth weight and personality of children, the age of onset of depression, the presence of comorbid disorders, parenting attitudes and familial functioning.

**Conclusions:** clinical and research implications of the results will be discussed.

### S18.02

Childhood adversity as a risk factor for the early onset and chronicity of depression and anxiety disorders

J. Angst, A. Gamma, V. Ajdacic-Gross, W. Roessler. *Zurich University Psychiatric Hospital, Zurich, Switzerland*

**Background:** Multiple genes and environmental factors, especially childhood adversity, play a role in the genesis of vulnerabilities for depression and anxiety.

**Method:** In the Zurich Study of young adults, childhood adversity and childhood problems were assessed in retrospect. A factor analysis revealed two factors 1) 'family problems' and 2) 'behavioural problems'. Major depressive episodes (MDE) were defined by DSM-III-R criteria and generalised anxiety disorder (GAD) by DSM-III criteria (duration one month). An anxious personality in childhood or adolescence was defined subjectively as having been more anxious than peers with a negative impact on development. Chronicity was defined by a daily or at least weekly occurrence of the syndrome during the previous twelve months; six interviews were carried out from age 20/21 to 40/41. We compared 87 chronic and 105 non-chronic MDE cases and 62 chronic and 43 non-chronic GAD cases.

**Results:** Higher family problem scores, earlier onset and chronicity, and an anxious personality in childhood or adolescence were all associated with each other; with a few exceptions this was true for both MDE and GAD.

**Conclusions:** As hypothesised childhood adversity was a risk factor for the earlier onset and chronicity of MDE and GAD.

### S18.03

Predictors of the longitudinal course of depression and quality of life in depressed patients

C.H. Kuehner, S. Huffziger. *Central Institute of Mental Health, Research Group Longitudinal and Intervention Research, Mannheim, Germany*

**Background and Aims:** Depressive disorders are characterized by high rates of recurrence and chronic developments, particularly in treated