

SES03.02**NEUROBIOLOGICAL FUNCTIONING IN FAMILIES WITH PERSONALITY DISORDERS AND AXIS-I-DISORDERS**

W. Maier

No abstract was available at the time of printing.

SES03.03**HOW DOES 5-HT FUNCTION RELATE TO IMPULSIVITY AND AGGRESSION IN HIGHLY AGGRESSIVE PERSONALITY DISORDERED MALE OFFENDERS?**M. Dolan*, I. Anderson, B. Deakin. *Edenfield Centre, Prestwich Hospital, Bury New Road, Prestwich, Manchester, UK*

Objective: We examined categorical and dimensional relationships between indices of impulsivity and aggression, and 5-HT function and testosterone in a forensic sample of aggressive personality disordered offenders and healthy controls.

Method: Sixty personality disordered offenders and 27 healthy controls were recruited from patients and staff in maximum security hospital settings and characterised using the Special Hospital Assessment of Personality and Socialisation (SHAPS), DSM-III-R criteria, and psychometric measures of impulsivity and aggression. Subjects underwent dynamic assessment of 5-HT function (prolactin response to fenfluramine challenge) and assessment of plasma testosterone and cortisol levels. Group comparisons were conducted and correlations between dimensional measures examined.

Results: Psychopathic offenders (diagnosed on the SHAPS) and healthy controls had significantly reduced 5-HT function compared with SHAPS non-psychopathic offenders. Compared with healthy controls, offenders with DSM-III-R borderline personality disorder had significantly reduced 5-HT function, while those with schizoid personality disorder had significantly enhanced 5-HT function. Reduced 5-HT function was seen in offenders with repeated self-harm or alcohol abuse. Impulsivity and aggression correlated significantly with each other and negatively with 5-HT function, however, the association with impulsivity appeared to be stronger. Aggressive acts correlated positively with plasma testosterone concentration. SHAPS primary psychopaths had significantly lower initial cortisol and significantly higher testosterone concentrations than controls.

Conclusion: This study confirms an association between 5-HT function and impulsivity in aggressive offenders and suggests that testosterone may also contribute to aggressive acts. The relatively weak associations however indicate the need for future studies to consider differences in regional brain 5-HT function together with the relationship between biological and other determinants of impulsive and aggressive behaviour.

Declaration: Funded By Wellcome Trust

SES03.04**COGNITIVE AND NEUROPSYCHOLOGICAL INVESTIGATIONS IN BPD**A. Andreoli*, E. Mayer, Y. Burnand, J.M. Annoni, Th. Landis. *Department of Psychiatry and Department of Neurology, University of Geneva Medical School, Hospital Center, Switzerland*

Significance: Since BPD may result from independent ethiopathogenetic lines including neurological alterations. Furthermore cognitive impairment, impulse discontrol and attention disorder were reported to be a correlate of this syndrome. We therefore conducted

a number of studies aimed to test the hypothesis that BPD subjects have specific cognitive and neuropsychological disturbances.

Methods: Two samples were investigated. The first included 40 DIB BPD patients with and without MD, 13 MD patients without PD and 20 healthy subjects without any DSM IV Axis I and Axis II Disorders. Each subject had reliable assessment on a battery of clinical measures and piagetian tasks. The second was directed to assess 30 IPDE BPD subjects with and without MD on a number of clinical, neurological and neuropsychological instruments. The presence of Bipolar Disorder, moderate to severe Substance Dependence and current psychotic symptoms were exclusion criteria.

Results: While solving piagetian tasks, BPD patients reached a lower stage of mental operations, and had a poorer performance and less capacity to learn from their cognitive errors. These findings correlated with the severity of the BPD, but were independent from the severity of depressive symptoms. In addition BPD patients showed reduced performance at the copy of the Rey's complex figure, more than expected neurological symptoms and a trend towards a significant correlation between BPD severity and instability of performance on executive neuropsychological tasks.

Comment: While the present data confirm that both specific neuropsychological and cognitive alterations may be a significant correlate of BPD syndrome, further studies should begin to clarify the neurological processes involved in these findings as well as develop a model of the relationships between these findings and the clinical course of this disorder.

C05. Cognitive psychotherapy*Chair: S. Moorey (UK)*

C05.01**COGNITIVE PSYCHOTHERAPY**S. Moorey. *UK*

Cognitive Therapy is establishing itself in psychiatry as a powerful treatment for a variety of psychological disorders, including anxiety, depression, eating disorders and schizophrenia. In less severe conditions it can prove as effective as psychotropic medication, while in more severe conditions it can complement drug treatment. It is a brief, structured, problem focused approach that aims to alleviate symptoms and solve problems, teach coping strategies and prevent relapse through changing underlying beliefs and assumptions. Patients learn to identify and modify unhelpful thoughts and behaviours within a collaborative relationship with the therapist.

The workshop will use a mixture of presentation, video and group discussion. Participants will learn:

1. The basic cognitive model as applied to common psychiatric conditions.
2. To conceptualise a case using the cognitive model.
3. The format of a typical course of therapy.
4. The basic cognitive and behavioural techniques used in therapy.