The Level of Service Inventory-Revised (LSI-R) was developed by Andrews and Bonta in 2001. It consists of static and dynamic variables and provides information about an offender's risk of recidivism and about the need for treatment and supervision.

In the past, most validation studies analyzed rather short follow-up periods and focused on non-violent offenders serving short sentences. Studies that investigated the predictive validity for offenders serving long-term sentences found a moderate performance.

The purpose of the present study was to show whether the LSI-R is predictive for recidivism of offenders in Switzerland and whether it qualifies for short-term prognosis (one year) as well as long-term prognosis (seven years).

The sample consisted of 107 violent and sex offenders. Follow-up time was seven years.

The ROC-analyses showed a moderate predictive validity for recidivism within one year (AUC=0.66) and a good predictive validity for recidivism within seven years (AUC=0.78).

The results suggest that the inclusion of dynamic items does not necessarily limit the predictive validity of an instrument to short follow-up periods or to specific criminal justice systems or cultural settings.

## P0118

Pharmacogenetic of DTNBP1 and HSP70 variations in the bipolar acute treatment with mood stabilizers

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We previously reported an association of Dysbindin gene (DTNBP1) variants with Bipolar Disorder I (BPI) patients (Pae, C. U., A. Serretti, et al. (2006)). This paper extends previous results investigating the possible role of DTNBP1 variants on response to acute mood stabilizer treatment. Moreover, we recently reported positive association results of heat-shock -70 family proteins (HSP70) and genetic variations and antidepressant response (Pae, C. U., A. Serretti, et al. (2007)). Since evidence stands for a possible involvement of chaperone activity in Bipolar Disorder pathophysiology, a pharmacogenetic approach was used to investigate the role of HSP70 on acute antimanic effect. A sample of 45 BPI were treated for an average of 36.52 (±19.87) days with mood stabilizers (lithium, valproate, carbamazepine), evaluated using the Clinical Global Impression (CGI) scale and the Young Mania Rating Scale (YMRS) and genotyped for their DTNBP1 variants (rs3213207 A/G, rs1011313 C/T, rs2005976 G/A, rs760761 C/T and rs2619522 A/C) and HSP70 variants (rs2227956 C/T, rs2075799 A/G, rs1043618 C/G, rs562047 C/G, rs539689 C/G). No association was found between the investigated variations and response to mood stabilizer treatment even considering possible stratification factors. The small number of subjects is an important limitation to our study, nonetheless, Dysbindin and HSP 70 seem not to be involved in acute antimanic efficacy.

## P0119

Parricide in the region of Belgrade: Descriptive analysis

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**Objective:** The aim of the study was to describe sociodemographic and psychopathological characteristics of committers and victims and to investigate the act itself.

**Method:** All homicide autopsy records from1991-2005, performed on Institute of Forensic Medicine, Medical School, University of Belgrade, were examined (948 cases). Only cases of parricide (33) were included in further analyses. Study was retrospective and descriptive statistic was used.

**Results:** In the region of Belgrade, rate of parricide in all homicides was 3.5% (0-9 cases per year). In average, parricide committers were:  $31.2\pm11.9$  years old, 87.8% male, 60.6% with psychiatric symptoms (most common schizophrenia, alcohol dependence, personality disorder etc), while victims were:  $63.7\pm11.9$  years old, 54.5% male, 21.2% with diagnosis of mental illness. Most used tools were: 48.5% edgeless object, 30.3% weapon, 15.2% knife. Although clear motives were difficult to obtain, we recorded possible motives: in 42.4% parental abuse, 30.3% child abuse; 9.1% benefit and 18.2% unknown.

**Conclusion:** Subjects with severe mental illness are more likely to be parricide committers. Specific features of their psychopathology, differences in the course of the illness, compliance and many other risk factors should be explored further on in order to recognize and prevent fatal outcome.

## P0120

The concept of judgment in medico-legal context

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Assessment of judgment in mentally ill patients has a central role in court appointed evaluation, especially when criminal responsibly is in debate.

Psychiatry and law view judgment differently. The law system aims to reach clear conclusions of right or wrong, guilty versus non-guilty. This leads to restriction of judgment concept, converting it to the investigation of social knowledge.

In psychiatry, judgment is not a bipolar issue, but a wider and more complex concept, involving analytic thinking, social- ethical action tendencies and insight. In clinical practice these components are inter-related and dynamically effect each other. Impairment of judgment can be expressed by insult of each of these mental groups.

**Method:** Clinical vignettes illustrate the dynamic inter-relation between the different components of judgment and the importance of judgment evaluation in criminal law.

**Results:** Clinical material confirmed our basic hypothesis, that judgment can be considered as preserved when all three components are intact or when only one is impaired, though not sufficient to effect the other two. When two components are impaired, it inevitably leads to insult of the third component and to judgment impairment as a whole, resulting in criminal irresponsibility. In cases of severely ill mental patients, where all three components of judgment are impaired, the individual lacks criminal responsibility even when no clear connection between psychotic production and behavior can be proved.