

The finding that below 85% adherence, readmission is significantly more likely suggests that there may be a role for carefully and progressively monitoring depot adherence in community services. Reduction in relapses from enhanced adherence will have clinical, social and economic benefits.

The metabolic syndrome in patients with a prolonged psychotic illness within a community setting: age and gender issues

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Background: To measure the prevalence of the metabolic syndrome among patients with a prolonged psychotic illness being treated within a community setting and to examine gender- and age-stratified trends.

Methods: The study sample consisted of patients receiving treatment in the midwest or northwest mental health regions of Melbourne, Australia, between February 2003 and February 2004. Of the 206 patients aged 18 years and over who were approached, 106 consented to participate, yielding a response rate of 52.7%. Participants were assessed for the presence of metabolic syndrome using the Adult Treatment Panel Guidelines-III).

Results: Prevalence of the metabolic syndrome among patients within this population was 39.4% (an alternate method of determining the denominator, indicates a rate of ~50%). Patients with the metabolic syndrome had a higher body mass index (31.73 vs. 28.82, $P < 0.01$) and increased triglyceride levels (3.49 vs. 1.70, $P < 0.01$) compared with patients without this syndrome. Men with the metabolic syndrome had lower mean high-density lipoprotein cholesterol levels (0.95 vs. 1.24, $P < 0.01$) compared with men without this syndrome. In general, there were distinct gender patterns of abnormality in the metabolic components, and age stratification shows increased relative risks in the young as contrasted with the older patients.

Conclusions: The prevalence of the metabolic syndrome is high among people with a prolonged psychotic illness. Health professionals treating people within this population need to be monitoring their patients' physical health as well as looking after their mental well-being.

Stability of antipsychotic prescribing: description and relationship to readmission

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Background: As showed by the CATIE study, antipsychotic prescribing/switching stability appears to be less than robust. Little is known of longitudinal stability in other treatment cultures. This paper presents Australian data to outline trends in routine clinical practice of CCT-treated patients.

Methods: A cohort abstracted from our large database is described. Prescribing stability and readmission were examined in patients with schizophrenia treated with antipsychotic monotherapy at T1 and T2 (18 months panel data). Of the 817 patients, 302 were on monotherapy at both times.

Results: A matrix of prescribing/switching stability indicating the rate of persistence on one medicine and, if switched, to what antipsychotic will be presented. Eighteen-month monotherapy persistence rates were as follows: clozapine 81.3%, olanzapine 71.0%, FGA depots 65.3%, risperidone 51.4% and FGA orals 34.0%. Numerically, the largest switching traffic occurred from depot to olanzapine and vice versa. Readmission, only 13.4% were readmitted. Being on a depot at T1 was 2.33 times more likely than being on an oral to result in admission in the study period ($P = 0.004$). If clozapine is excluded, there is no difference between depots and SGAs (RR 1.62, $P > 0.05$). Overall readmission was 2.15 times more likely to occur in those in whom antipsychotic switching occurs (direction of causality undetermined).

Conclusions: Stability is somewhat higher in Australia than reported for the United States. However, the general comparative trends in terms of the various antipsychotics are supported. Clozapine and olanzapine appear to have particularly stable use.

Psychostimulant withdrawal: natural history and options for intervention

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Background: Psychostimulant withdrawal is still not well understood. Much of the limited literature has been in the cocaine area and very little with methamphetamine. In particular, the natural history of withdrawal from psychostimulants is not well documented

and an understanding of withdrawal and its natural history is rarely considered from the user's perspective.

Aims/Methods: This presentation will outline the results of a study of 150 dependent psychostimulants users and their experiences of withdrawal treatment and of withdrawal. A detailed retrospective natural history was documented using a structured and semistructured interview format.

Identification of a bipolar disorder susceptibility locus on chromosome 15Q

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Background: Bipolar affective disorder (BP) is a relatively common, severe mood disorder characterized by periods of mania and depression, with estimates of lifetime prevalence up to 4%.

Method: We conducted a 10-cM genome scan on 35 multigenerational pedigrees with 288 genotyped individuals (130 affected according to a broad disease definition). Subsequent fine mapping was conducted on the region with significant linkage results and was assessed using parametric, nonparametric and multipoint linkage analysis methods, as well as haplotype analysis based on pedigree-specific, identical-by-descent allele sharing.

Results: The genome scan identified significant linkage on chromosome 15q25-26 and suggestive evidence on chromosomes 4q, 6q and 13q. Analysis of the 15q25-26 region, including additionally typed chromosome 15q markers, gave significant results with a maximum two-point LOD score of 3.38 and a multipoint LOD score of 4.58 for marker D15S130. A maximum NPL score of 3.38 ($P = 0.0008$) was obtained at 107.16 cM near D15S130. The 95% confidence interval estimation suggested a support interval spanning 17 cM between the markers D15S979 and D15S816. Haplotype analysis supported the 95% confidence interval estimates.

Conclusions: The significant and supporting results from a number of analysis methods performed on chromosome 15q25-26 provide evidence for a BP susceptibility locus in this region. It is further supported by linkage findings from studies on recurrent early-onset major depressive disorder, BP with psychotic features, and a study of schizophrenic and BP subjects, suggesting that the locus might contain a gene conferring susceptibility to both mood and psychotic disorders.

A blinded, placebo-controlled randomized trial of low-dose risperidone, intensive psychological treatment and befriending in young people at risk of psychotic disorder: baseline characteristics of the sample

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Background: Intervention during the prodromal phase of psychotic disorder has become an important focus of early intervention research.

Method: The PACE Clinic, ORYGEN Youth Health, has been conducting a blinded randomized controlled trial (RCT) comparing the effectiveness of low-dose risperidone (0.5–2.0 mg/day) and intensive CBT-based psychological treatment vs. placebo and intensive CBT-based psychological treatment vs. placebo and a control psychological treatment (befriending). The trial consists of a 12-month treatment phase, followed by a 12-month follow-up phase. The primary outcome of interest is the proportion of patients meeting onset of psychosis criteria during the treatment and follow-up phases.

Results: The current presentation will describe baseline characteristics of the sample. About 119 participants (mean age = 18.36 years, men = 41.2%) meeting ultrahigh-risk criteria for psychotic disorder were randomized to the three treatment groups. Baseline characteristics will be compared between 1) the three treatment groups and 2) the treatment groups and a monitoring group ($n = 83$, mean age = 18.45 years, men = 41%), who received 'treatment as usual'.

Conclusion: Pending.

The defensive function of persecutory delusions: an investigation using the Implicit Association Test

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Background: Delusions are first-rank symptoms of schizophrenia. Of all delusional themes, delusions of persecution are the most commonly observed clinically and the most vigorously researched empirically. Bentall et al. claim that persecutory delusions are constructed defensively, for the maintenance of self-esteem. A central prediction of their model is that