

P14.08

Attachment styles and cognitive functions in eating disorders

D. Sorrentino*, A. Tonni, F. Mancuso, A. Mucci, S. Galderisi, M. Maj. *Department of Psychiatry, University of Naples SUN, Italy*

A poor quality of the patient/parent relationship, as well as the presence of cognitive dysfunctions, have been reported in eating disorders (EDs). However, no study has explored the relationships between attachment style and cognitive functions in EDs. In the present study, neuropsychological indices and attachment style, as well as their relationships, were evaluated in 50 drug-free ED patients (34 bulimics and 16 anorexics) and 49 healthy controls.

The neuropsychological battery included tests exploring executive functions, attention/short term memory and automatic learning. Attachment styles were investigated by means of the Bartholomew Scale, the Attachment Style Questionnaire and the Parental Bonding Instrument.

Compared to controls, ED patients showed: 1) a higher accuracy on tests evaluating executive functions, and a slower performance on the non-verbal automatic learning test; 2) higher levels of insecurity in their relationships with both parents and peers.

In ED patients, a low paternal care was associated with a less accurate execution of the non-verbal automatic learning test. Our results suggest the presence in ED patients of an insecure attachment style associated with a dysfunction of non-verbal automatic learning.

P15. ECT**P15.01**

ECT for patients taking lamotrigine

T.F. Aarre, P. Bugge*. *Nordfjord Psychiatric Centre, Norway*

ECT remains the most powerful antidepressant treatment for many patients with bipolar disorder. Anticonvulsive agents are among the novel mood stabilisers used in long-term prophylaxis. Their anticonvulsive activity complicate ECT administration. Lamotrigine, an antiepileptic drug, may have genuine mood stabilising properties, and is often used in bipolar disorders. Nothing has yet been published on ECT administration for patients on lamotrigine. We present two patients with treatment resistant bipolar depression, who received ECT with the Thymatron DGx apparatus while taking lamotrigine. One had unilateral ECT, the other received bifrontal stimulation. Standard unilateral ECT with stimulus charge set according to the patient's age tended to give unsatisfactory seizures. To achieve generalised seizures of adequate length, maximum charge (504mC) had to be applied. If the dosage of lamotrigine exceeded 300mg a day, stimuli had to be manipulated using the Flex-Dial system. At 0.5ms, 70Hz stimulation at maximum charge we achieved clinically effective ECT with a minimum of side effects in both patients. We conclude that lamotrigine does not preclude effective ECT, but the dosage should be carefully titrated to allow for adequate seizure duration.

P16. Education in psychiatry**P16.01**

Education in families with autistic children in comparison

H. Niederhofer*. *Department of Neurology, University of Salzburg, Austria*

Objectives: Standardized assessment of education is not used routinely although these factors may play an important role in the

course of psychological disorders in children. Thus the aim of the present study was to investigate families of autistic children with regard to differences with regard to education in their families.

Methods: Families of 115 autistic children (aged 6–12y), diagnosed by means of the Mannheim's Parents Interview (Esser et al., 1989) were included for evaluation and compared with a matched, healthy control group. Parents were asked to complete a form assessing education ("Erziehungspraktiken", Schneewind et al., 1985). Group comparison was made by the Mann-Whitney-U-test.

Results: The results show that there are less emotional attention, less material reinforcers and more physical punishment in families whose children belong to the autistic group.

Discussion: It could be shown, that there seems to be a significant influence of autism on education which should make therapists focus their efforts not only on the "index" children as such but also on their families.

P16.02

Evaluating a training course for GPs in the management of depression

C. Dixon*. *University of Manchester, Department of Psychiatry, UK*

Objectives: To assess whether a training intervention leads to health gain for patients, to investigate GPs' understanding of the impact of the intervention on them and how this may explain the effect of training on patient outcome, to explore GPs' understanding and experience of depression and its treatment in practice.

Methods: A randomised controlled trial of 38 GPs, with depressed patients followed-up at 3, 6 and 12 months. In-depth interviews with GPs analysed using a Grounded Theory approach.

Results: Quantitative results showed no overall differences in outcome between intervention and control groups. Qualitative analysis showed that skills and technical knowledge-based training interventions alone are inappropriate to the treatment of depression. The influence and implications of GPs' dispositions, created by their medical training, are significant to the way that depression and its treatment are perceived by GPs in practice.

Conclusions: Depression training programs for GPs do not achieve generic health gain for depressed patients. Improving integration between training and practice would lead to more appropriate dispositions for GPs of the future, and in turn to more effective management of depression.

P16.03

Development of communicative skills and self-knowledge of students

T. Nelubova*, V. Solozhenkin. *Kyrgyz State Medical Academy, Bishkek, Kyrgyz Republic*

Objective: To overcome school stereotypes of education and development of communicative skills and self-knowledge of students.

Methods: 121 ten day trainings of personal growth for groups of first course students (10–12 students in each group) from the department of psychiatry, psychology and clinical psychology of Kyrgyz Russian University, Bishkek, Kyrgyz Republic. Psychotherapeutic technologies have eclectic character, but the eclectic is formulated on compatibility of technologies and bigger effectiveness during main objectives implementation.

Results: Analysis of work in a group shows that skills, which are strengthened by school education, form stereotype, model of creative

search, attempt to get constant leading of trainer. External position, low level of self-analysis, stereotype of emotional reactions, alexithymia and infantilism are predominated. During the trainings about 1/3 of group make the attempts to overcome characteristics described above. Durable research of psychological features of students in the process of further education shows that these skills are fastened.

Conclusion: Inclusion of psychotherapeutic course of personal growth in the educational process helps 30–45 % of students to overcome unproductive school stereotypes, helps to harmonize personality and personal characteristics, which give possibility for professional growth. Group psychotherapeutic work is an element of educational process of students.

P16.04

Psychoprophylaxis and health promotion in organic psychic disturbances

W. Gruszczynski*, A. Florkowski. *Department of Psychiatry, Military Medical University in Lodz, Poland*

It results from literature, that in over 50% of youth treated due to different psychic disturbances there occur indicators of organic brain injury. This concerns both, the so-called microinjuries mainly perinatal, which clinically assume one of these types of infantile cerebral palsy. Phenomenon of the increase of the percentage of persons with discreet psychic changes being late consequences of organic brain damage during intrauterine life, labor and early childhood, concerns to a significant degree the army, too. Children and youth are from the military point of view pre-draftees and draftees. Yet, as it is known from clinical experience, young people with brain microinjuries are like their healthy peers enlisted into the army. Medical boards, with the present standard of diagnostics, are not able to eliminate these persons from enlisting into the army. Thus, there exists and increases the problem of psychic disturbances (persons clinically manifesting deadaptive syndromes conditioned by brain microinjury with their certification- diagnostic, prophylactic and therapeutic implications. That is why, for many years, it has been postulated that labor period and early childhood should be evaluated within general medical examinations even on the basis of child's health record-book. Individual selection to particular posts, determination of tasks dependently on personality traits and psychic resistance, obeying regulations and order of the day, contacts with the soldiers' families etc., should be an important element of psychoprophylactic activity. Complex psychoprophylactic and health promotion activity aim at eliminating the acute deadaptive syndromes.

P17. EEG

P17.01

Effects of vagus nerve stimulation on sleep in depressed patients

R. Armitage*, M. Husain, R. Hoffmann, A.J. Rush. *University of Texas Southwestern Medical Center, Department of Psychiatry, Dallas, USA*

Objective: Recent studies have demonstrated the efficacy of vagus nerve stimulation (VNS) in patients with treatment-resistant depression. The present study examined the effects of VNS on sleep in patients with treatment-resistance. Sleep EEG studies were conducted at baseline, prior to surgery and after 10 weeks of VNS.

Method: Seven women (44.7±9.7 years) participated in this study. Six were diagnosed with major depressive disorder with nonpsychotic features and one with Bipolar I disorder, currently

depressed. All had at least 3 unsuccessful antidepressant treatment trials in current MDE.

Results: Baseline sleep architecture was more disturbed in treatment-resistant patients. Sleep microarchitecture was particularly abnormal with severely dampened sleep EEG rhythms. After VNS, both sleep macro- and microarchitecture were significantly improved. Stage 1 sleep and awake time were decreased whereas deeper Stage 2 was increased post-VNS. The amplitude of sleep EEG rhythms was significantly increased, to near normal levels. Subjective sleep was also improved after VNS.

Conclusion: These effects are likely to be clinically significant since persistent sleep disturbance is associated with increased risk of relapse and recurrence of depression.

P17.02

Gender differences in spectral EEG analysis during exacerbation of schizophrenia

W. Drozd¹*, A. Araszkievicz¹, J.K. Rybakowski². ¹*Department of Psychiatry, University Medical School, Bydgoszcz;* ²*Department of Adult Psychiatry, University School of Medical Sciences, Poznan, Poland*

Objective: The aim of the study was to compare spectral EEG profile of schizophrenic patients during exacerbation with that of control subjects matched as for sex and age.

Methods: Forty-seven schizophrenic patients: 24 males, 23 females, aged 18–48 years and fifty healthy control subjects: 27 males, 23 females, aged 18–47 years were enrolled into the study. 16-channel resting EEG was performed and minimum 30 seconds epoch with no evident artifacts was chosen for subsequent FFT analysis. Data were log-transformed to obtain gaussianity and then Z-transformed.

Results: Male schizophrenic patients during exacerbation as compared to male control subjects had overall profound alpha 2 power decrease as well as beta 2 power increase. Female schizophrenic patients during exacerbation as compared to female control subjects had overall profound alpha 2 power decrease as well as theta power increase.

Conclusions: Decreased alpha 2 power in schizophrenic patients during exacerbation may indicate thalamo-cortical pathways dysfunction. Increase of beta 2 power in male schizophrenic patients during exacerbation may indicate cortical dysfunction and increase of theta power in female schizophrenic patients may indicate limbic system dysfunction.