
PR03. AEP/APA PRESIDENTIAL SYMPOSIUM: EUROPEAN AND AMERICAN PERSPECTIVES IN PSYCHIATRY

PR03.01

USA psychiatric educational perspectives

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During the last decade, major changes have taken place in the United States with respect to psychiatric educational perspectives. Among them, the design, development and implementation of the “Core Competency Model” in the training of medical students, graduate students and postgraduate students. This emphasis evolved out of the vision and efforts of the American Board of Medical Specialties (ABMS) and the Accreditation Council on Graduate Medical Education (ACGME). Currently, all medical specialties are already following this new didactic model of training. In this respect the American Psychiatric Association (APA) is playing a major role via special continuing medical education courses, educationally-oriented publications and professional leadership in the field of psychiatry.

In this presentation, a review of this new educational model will be made, with emphasis on its applications in the clinical setting.

Educational Objectives:

At the end of this presentation, the learners should be able to:

1. Understand the basis of the Core Competency Model of Training.
2. Be able to apply this model in the clinical setting.
3. Utilize this model in the classroom with psychiatric residents.

Literature References

- 1 Ruiz P. Recent Advances in Graduate Psychiatric Training. *World Psychiatry* 2003;2(1):57–60.
- 2 Matorin AA, Guynn RW, Sexson G, Kapoor V, Ruiz P. Current and Future Psychotherapy Trends in the United States Graduate Training. *Rivista di Psiquiatria* 2005;40(1):26–30.
- 3 Ruiz P. WPA Scientific Meetings: The Link Between Sciences and Quality of Care. *World Psychiatry*, 5(2): 12.

PR03.02

CME courses system and accreditation process for CME

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Abstract not available at the time of printing.

PR03.03

European psychiatry. Perspectives on training and organisation

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Development in European psychiatry is closely linked to scientific and societal developments. The Union of European Medical Specialties - UEMS - has for a number of years closely followed this development and influenced training by creating standards for training. The

presentation will follow a course of 10 years and describe the development from an organisational and training perspective.

S28. Symposium: THE FRINGES OF PSYCHOSIS

S28.01

Explaining transitions over the psychosis continuum

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Background and Aims: General population studies have found that the positive symptoms of psychosis are prevalent in the general population. The majority of the individuals experiencing these “symptoms” are not in need of care. However, longitudinal studies indicate that they may nevertheless have an increased risk of developing a clinical disorder. The aim of this study is to elucidate the mechanisms that mediate transition from having one or two psychotic symptoms to becoming a patient with a psychotic disorder.

Methods: Data from two large longitudinal general population studies (the NEMESIS study and the EDSP study) were analysed in order to investigate the risk-increasing effect of three important environmental risk factors, namely cannabis, urbanicity, and childhood trauma, as well as their interaction with pre-existing liability to psychosis.

Results: Based on these studies, cannabis not only survives as a risk factor for psychosis, but the evidence is showing concrete synergistic effects between cannabis and pre-existing psychosis liability. The urban environment is, in terms of attributable risk, the most important proxy environmental risk factor and there is emerging evidence that it interacts with genetic risk. Early trauma is another important aspect of the environment that can be linked prospectively to psychosis, particularly for those with a pre-existing liability.

Conclusions: The mechanism by which the environment is likely to impact on risk is through cognitive and emotional pathways on the one hand, and biological pathways, possibly involving dopamine sensitisation, on the other.

S28.02

Mapping silent spectrum predisposition: anomalous subjective experiences and schizotypy in unaffected genetic high-risk subjects

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Background: Contemporary psychopathology, together with the conceptual reappraisal of the notions of schizotaxia, schizotypy and schizotropic liability (i.e. anomalous subjective experiences), is witnessing the rebirth of attention to attenuated (subclinical) trait phenotypes that may indicative of latent vulnerability to spectrum conditions.

Objective: To extract heuristic, clinically-useful, target dimensions indicative of enhanced, genetically mediated, schizotaxic risk.

Methods: Schizotypal traits and anomalous subjective experiences were assessed in a sample of unaffected siblings of