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P0045

Disorganized attachment and genetics in the development of borderline personality disorder

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Borderline Personality Disorder (BPD) is a frequent disorder with a pronounced suicidal risk. BPD is characterized by affective instability, intense interpersonal relationships, lack of stable sense of the self, and impulsive behaviour. Early relationships with caregivers frequently include verbal, emotional and physical abuse or neglect. This can set up an approach-avoidance conflict in child.

Attachment is a cognitive and emotional development theory in the context of interpersonal relationships. In BPD, attachment is either unresolved in relation to their parents; fearful or preoccupied in close relationships.

Genetic factors might be implied in some of the main characteristics of BPD: impulsivity and affective instability. Impulsivity might represent a heritable endophenotype link to serotonergic activity. Affective instability seems to be related to cholinergic and noradrenergic systems. These traits constitute a vulnerability to dysfunctions in infancy relationships.

Disorganized attachment in BPD can come from the encounter between genetic factors and a social environment which is both threatening and comforting. Disorganized attachment can be considered as an adaptive strategy to protect against abuse and a disruption in affective communication without correcting. It could give rise to multiple, fragmented and incoherent Internal Working Models and to a deficit in mentalization. This could explain emotional instability, the mutable relational style, the identity disturbance and the self-damaging behaviours in BPD.

Finally, we propose that BPD should be considered as the result of interactions between attachment behavioural system and biological traits during the development of the child. Improved methods to measure fundamental genetic dimensions of BPD are needed.

P0046

Conduct disorder in former USSR immigrant adolescents and the role of parenting style and ego identity

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Objectives: This study assesses Conduct Disorder in Former USSR immigrant adolescents compared with native-born Israeli adolescents. Immigrant adolescents from the Former USSR face the complex task of forming their identity while having to adjust to a new culture. Meanwhile, studies have shown that their parents tend to use control and harsh punishment in their parenting methods. These adolescents are thus at greater risk of psychological distress and more prone to

identify with socially deviant peer-groups, resulting in the dramatic increase in crime level found among them.

Method: 97 adolescents living in residential children's home, including 47 Former USSR immigrants and 50 native Israelis, completed questionnaires assessing level of hostility and sense of guilt (BDHI), ego identity (EIS), and parenting style (GPBS). Objective assessments of Conduct Disorder were obtained by the instructors at the residential children's home using the Child Behavior Checklist (CBCL).

Results: Immigrant adolescents showed higher levels of fused ego identity, and reported more negative and punishing parenting styles (linked to Conduct Disorder), compared with native adolescents. Hierarchic regressions for predicting Conduct Disorder revealed that diffused ego identity has the greatest effect on behavioral disorders, while immigration variables and parenting style have an enhancing effect on levels of behavioral disorder among youths with diffused ego identity.

Conclusions: The high levels of identity fusion among immigrant adolescents, resulting in higher levels of Conduct Disorder, warrant ethnic-sensitive interventions.

P0047

Alopecia areata in female patient suffering from borderline personality disorder (with co-occurring mood disorder, present episode depressive)

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Case report of a 44 years old female patient, highly educated, suffering from Borderline personality disorder with co-occurring mood disorder, present episode depressive who suffered from acute emotional stress for a few months. She was in a process of divorce and losing her children by order of the court. In a two months period she has lost over a 90% of her hair and started treatment for alopecia areata. Dermatologist and psychiatrist treated her simultaneously; she also went on group psychotherapy. The influence of psychological factors in the development, evolution and therapeutic management of alopecia areata is documented in this case. Life events and intrapsychically generated stress played an important role in triggering of the disease. The role of treatment on concomitant psychopathological disorders is a vital one in this case because it positively affected how the patient adapted to her alopecia areata and social setting and led to a better dermatological evolution of the alopecia areata.

P0048

A new strategy for treatment of borderline personality disorder

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Objective: To demonstrate that borderline personality disorder can be predictably overcome through 'Breakthrough Intimacy' - closeness between committed couples far greater than their previous maximum experiences.

Method: Lifetrack therapy works with couples (the patient and his/her partner in life) bringing them far closer than ever before, guided by their own daily self-rating on 41 parameters that allow accurate graphic tracking via Internet of subtle changes in their personalities during each therapy session. Working in three-way teamwork, the therapist actively helps the couple to achieve closeness far greater than their previous maximum level, overcoming waves of symptom spikes (anxiety, anger, physical-symptoms, depression, and