However, the real nature of this association is still unknown. The objective of the present study was to determine the prevalence of SAD in patients with a diagnosis of PD.

**Methods:** Eighty-seven consecutive patients with a diagnosis of PD and no associated dementia were evaluated at a movement disorder outpatient clinic. The patients were independently interviewed using the SCID-IV for DSM-IV.

**Results:** Patient age ranged from 24 to 85 years (mean: 60.7 years) (+13.2). Forty-five patients (51.7%) were women and 42 (48.3%) were men. The lifelong prevalence of SAD was 32.2%. However, only 16.1% presented this anxiety disorder before the beginning of PD. The prevalence of SAD with onset after PD, i.e., secondary to a movement disorder, was 16.1%, with no sex differences in SAD prevalence among PD patients.

Conclusions: The high rate of SAD among PD patients detected in the present study (32.1%) is comparable to those reported in other countries. However, the prevalence of patients who presented SAD before the onset of PD (16.1%) was similar to that reported for the general population. Thus, the present results suggest that the high rates of SAD among PD patients reported in the literature are due to afraid to be judged in a negative manner in public due to their tremors and other aspects of PD, rather than being related to a specific neurobiological process occurring in this movement disorder.

## P0004

Evaluation of apathy using reaction time task in neurodegenerative diseases

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**Background:** Apathy, defined as a lack of motivation, is common in neurodegenerative diseases. Specific scales are available for the evaluation of apathy but it lacks objective evaluation methods.

**Aim:** To evaluate the changes in reaction time task according to the presence or absence of reward stimulation and to assess the relation between these performances and apathy scales.

**Methods:** 13 patients with Mild Cognitive Impairment, 15 patients with Alzheimer's disease and 91 elderly healthy subjects were enrolled. A computerized test using the experiment software E-prime<sup>®</sup> was designed to assess reaction times in different experimental conditions after a training trial (neutral, stimulation, stress, stimulation after stress, extinction) and relation between the performances to the test and the Apathy Inventory (AI) scores were observed.

**Results:** Patients reaction times were significantly higher than control. Reactions times were lower in stimulation conditions and maximum during the stress condition. In the patients population, apathetic subjects (AI total score >2) had significantly higher reaction times than non apathetic subjects (p<0,05). We found significant positive correlation between AI dimensions lack of initiative and lack of interest, and reaction times in the following conditions: lack of interest and neutral condition (p<0,01), stimulation condition (p<0,05), lack of initiative and stress condition (p<0,05). Furthermore, AI total score was correlated with both stimulation and extinction conditions (p<0,05). There was no significant correlation with the emotional blunting.

**Conclusion:** the reaction time task may be a promising tool for an objective evaluation of the initiative and interest dimensions of apathy in neurodegenerative diseases.

## P0005

Study of the prevalence of depression among patients with Parkinson

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**Background and Aims:** Depression is the psychiatric co-morbidity most commonly associated with Parkinson's disease (PD). However, depression is often under-diagnosed and under-recognized and the affected patients seldom receive treatment for this psychiatric disorder. The objective of the present study was to determine the prevalence of major depression among Brazilian patients with a diagnosis of PD.

**Methods:** The study was conducted at the movement disorders outpatient clinic of the University Hospital, Faculty of Medicine of Ribeirão Preto. A total of 111 consecutive patients with a diagnosis of PD were selected and independently interviewed using the SCID-IV-CV (DSM-IV). Patients with dementia associated with PD were excluded.

**Results:** Patient age ranged from 24 to 85 years (mean: 61.2 + 12.7 years). Fifty-eight of the 102 patients (52.3%) were females and 53 (47.7%) were males. The current prevalence of depression was 26.1% (29) and the lifetime was 57.7% (64). Regarding gender, the current prevalence of depression was 15.1% (9) for males and 36.2% (21) for females, with the difference being statistically significant (p<0.01). The lifetime prevalence of depression was 33.4% (23) for males and 70.7% (41) for females (p<0.01).

Conclusions: The high prevalence of major depression among patients with PD and the predominance of women detected in this study are comparable to the rates observed in studies conducted in other countries. Strategies for an early diagnosis and adequate treatment appear to be necessary and opportune in order to improve the quality of life of the patients and to prevent possible complications such as suicide.

## P0006

Sexual behaviour and psychiatric disorders - A clinical case

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**Objectives:** The authors have as a goal to conduct a reflection about an important public health problem that is the influence of neuro-psychiatric disease in a patient sexual behaviour. Thus, a case study is described of a patient, of 49 years old, hospitalized with bipolar affective disorder diagnosis — depressive phase, in which unprotected sexual intercourse was predominant with several partners.

**Methods:** Clinical observation, conducted during three months of hospitalization, showed a sexual behavioural inadequacy, which was not justified by decompensation of the psychiatric feature previously referred. We also verified a cognitive dysfunction.

**Results:** The results of this clinical evaluation, including neuropsychological evaluation and organic complementary study (ACT-CE and SPECT), suggest the diagnosis of front-temporal dementia.

Conclusion: The authors finish emphasising the existence of psychiatric disorders, functional and organic, with sexual risk