

than patients with cluster C personality disorder. The personality disorder does not predict the response to interventions targeted at eating disorder specific behaviors. There are very few studies examining the comorbidity of specific personality disorders and eating disorders. Precise data are only available for borderline personality disorders. Approximately 50 to 70% of these patients suffer from a specific eating disorder. The presence of an eating disorder is associated with decreased social function and increased comorbidity with other axis I disorders, in particular depressive disorders. Open questions relate to the hierarchy of therapeutic interventions in patients with high comorbidity. Potential algorithms for treatment planning are presented.

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## W04. Workshop: PARENTAL PERINATAL PSYCHOPATHOLOGY AND INFANT DEVELOPMENT (Organised by the AEP Section on Women's Mental Health)

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### W04.01

Parental perinatal psychopathology and infant development

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The emotional and intellectual development of children is modelled, inter alia, by early experiments and emotional climate provided by interpersonal environment, through mother-infants interactions. It is now proven that, for example, a mother or a father presenting a post-natal depression (PND) can interfere with the correct operation of those processes, with, as a consequence, a possible impairment of child's development.

The interactive patterns which develops between a mother and her baby begin during pregnancy, continue developing and become more and more structured during the first months postpartum.

This symposium will go through different aspects of parental psychopathology which can occur during pregnancy and post-partum. Different models for the study of mother-infant interactions will be as well presented and discussed.

### W04.02

Comparison of mother-baby interactions of manic mothers and community mothers

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**Background:** Very little is known about the impact of manic postpartum episodes (MPPE) and mother-baby interactions.

**Aim:** The objective of this preliminary work was to compare mother-baby interactions of mothers hospitalized for MPPE with the baby, and mother-baby interactions of mothers recruited in the community.

**Methods:** Interactions between 20 MPPE mothers and their babies aged between 2-6 months, and 13 community mothers and

their babies (2-6 months), were evaluated with the «Global Rating Scales of Mother-Infant Interaction».

**Results:** MPPE mothers were more intrusive than community mothers. The MPPE babies were more withdrawn than community babies.

**Discussion:** More research is needed to evaluate the long term impact of such pattern of early interactions.

### W04.03

Physical and psychosocial disturbances of the partners of women with severe postpartum psychiatric disorders

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Postpartum psychiatric disorders in women have been more often discussed than postpartum psychiatric disorders in men. However, psychiatric disorders (especially depression) after birth are also experienced by men independently of a maternal disorder. Partners of women with postpartum disorders often exhibit physical or mental health problems. These problems could, in turn, affect the course of the mother's disease and could influence the recovery process.

In this study we examined the psychosomatic problems and symptoms of psychopathology (SCL-90) showed by the partners of a group of severely ill postpartum depressive and psychotic mothers, who were inpatients of the mother-baby unit at the department of psychiatry and psychotherapy in Wiesloch, Germany, and participated in a longitudinal therapy study. Results show a correlation between paternal well-being and the improvement of the maternal mental health. It could be concluded that a routine screening and treatment of the partners of women with postpartum psychiatric disorders may benefit not only the men but also their spouses.

### W04.04

Interactive regulation of affect in postpartum depressed mothers and their infants in the course of depression

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Specific patterns of interaction emerging in the first months of life are related to processes regulating mutual affects in the mother-child dyad. Particularly important in this respect are the processes of 'matching' and 'interactive repair'. According to previous research results, these interaction processes are significantly impaired in mothers with postpartum depression, exerting a detrimental influence on the infant's emotional and cognitive development as well as on the course of the mother's illness. It is not yet clear, however, whether a recovery from depression is also connected to a favourable development of these interactional behaviour patterns. The study will correlate patterns of interactive affect regulation in the first months of life with the course of the mother's depressive illness. To achieve this, interactions of mothers with postpartum depression and their infants will be evaluated using the Still Face Design at two assessment times (T1: acute phase of depression, T2: remission). Results will be compared to a control group of healthy mothers with age- and sex-matched children. Clinical and theoretical implications will be discussed.

### W04.05

To be advised

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