disregard our medical background or they "do not let themselves be colonised".

Those who work in the field of psychopathology are confronted to systems of thought different from the system of thought studied by Western psychopathologists. This makes to think that the right way to consider "psychopathology" is as a "cultural psychopathology".

Symposium: Self-injurious behavior and suicidal behavior in adolescents

S24.01

The neurobiology and genetics of suicidal behavior in adolescence

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Gene-environment interactions (GEI) were recently found to contribute to the etiology of mood disorders and suicidal behavior in children adolescents and young adults. Childhood adversity may produce a biological and clinical diathesis for mood disorder and suicidality that endures into adulthood. Life events predict depression and suicidal ideation or a suicide attempt in children, adolescent and young adult carriers of the S allele of the 5-HTTLPR polymorphism. This finding was replicated in children, adolescents and young adults. We reported on a third functional allele in the serotonin transporter gene (A trialleleic polymorphism) that may give a new clue to the GEI in depression and suicide. Some new biological data supporting the validity of this interaction will be presented.

S24.02

Epidemiology and psychological correlates of deliberate self-harm in adolescents

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Aims: The primary aim of our study was to determine the prevalence of deliberate self-harm in adolescents using an exact definition of DSH (intentional self-mutilative acts like cutting, burning and suicidal ideation, plans and attempts). Our second aim was to evaluate a wide range of internalizing (withdrawn, somatic complaints, anxiety/depression) and externalizing behavior problems (delinquency, aggression), as well as possible gender differences which may be associated with DSH.

Methods: Self-report cross-sectional survey. A representative sample of school students of the 9th grade (n = 5759, mean age = 14.98 (SD=0.73), 49,8% female adolescents) from the Rhein-Neckar-District in Germany has been investigated.

Results: Moderate forms of intentional self-mutilative acts in the previous year was reported by 630 of 5759 (10.9%) school students. Additional 229 (4.0%) students reported repetitive forms of self-mutilation. With regard to suicidal behaviour 14.4% of the adolescents reported suicidal ideas and 7.9% one or more suicidal attempts during their life time. Compared with participants without a history of DSH, adolescents with DSH scored significantly higher on the YSR-subscales of somatic complaints, anxiety and depressive symptoms and delinquent behaviour.

Conclusions: Moderate forms of intentional self-mutilative acts and severe forms as well as suicidal behaviour were found to be associated with pronounced emotional and behavioral problems. In particular female adolescents are at higher risk for DSH in comparison to male adolescents. A better understanding of the associated psychiatric and psychosocial concomitants of deliberate self-harm is an important contribution for the development of prevention and intervention programs.

S24.03

Emotion regulation; Temperament and self-injurious behaviour in female adolescent with borderline personality disorder

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Aims: The primary aim of our study was to investigate the capacity for emotion regulation and personality factors and its relationship with in female adolescents with borderline personality disorder (BPD).

Methods: A consecutive sample of adolescent psychiatric patients has been studied in comparison to 29 adolescents patients with other psychiatric diagnoses, and to a control group of 30 healthy subjects. Axis I diagnoses were surveyed with the German version (Delmo et al., 2000) of the semistructured diagnostic interview of the Schedule for Affective Disorders and Schizophrenia for School-Age Children—Present and Lifetime Version (K-SADS-PL; Kaufman et al., 1997). Axis II diagnoses were assessed by using the German version (Fydrich et al., 1997) of the Structured Clinical Interview for DSM-IV Axis II Personality Disorders (SCID-II; First et al., 1996). To measure emotion regulation the emotion control questionnaire (ECQ; Roger & Nesshoever, 1987) has been used. To investigate the personality factors the German version (Schmeck et al., 2001) of the Junior Temperament and Character Inventory (JTCI, Cloninger et al., 1994) was used.

Results: A lower degree of capacity for emotion regulation, high degree of impulsivity and novelty seeking as well as more character problems were related to the group of patient with a diagnosis of BPD and self-injurious behaviour in comparison to the control groups.

Conclusions: The investigation of personality factors and its relation to distinct psychiatric symptoms in BPD may lead to a better understanding to different subtypes of BPD in adolescents.

9 April 2008 Symposium: EPOS - further results of the completed study

S55.01

Course of psychopathology in putatively prodromal subjects in the EPOS study

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Background: One aim of the European prediction of psychosis study (EPOS) has been to evaluate the clinical course of putatively prodromal patients in terms of psychopathology.

Methods: 245 patients at risk for psychosis defined by attenuated positive symptoms, brief limited psychotic symptoms, a state/ trait combination or cognitive-perceptive basic symptoms was recruited in six centres in four countries. The Structured Interview for Prodromal Syndromes (SIPS) and the Bonn Scale for the Assessment of Basic Symptoms − Prediction List (BSABS-P) were employed. Follow-up was scheduled after 9 months (t1) and 18 months.

Results: In total, 40 patients developed a psychosis (P). Compared to those without a transition (NP), P showed significantly higher SIPS scores at baseline. The same applied to the BSABS-P sub-scores 'cognitive perception disturbances' and 'cognitive motor disturbances'. The P sub-group developing psychosis after t1 showed no significant change of the SIPS positive (SIPS-P) sub-score or of any BSABS-P score from baseline to t1, whereas all scores improved in the NP group. At t1, SIPS-P and BSABS-P sub-score 'cognitive thought disturbances' were significantly lower in those later becoming psychotic.

Conclusion: Patients at risk showing a transition to psychosis during exhibited a pronounced psychopathology at baseline. Also, the positive symptom scores did not significantly improve during 1st follow-up, whereas those patients with no transition during the complete follow-up showed an improvement of all scores. As EPOS is a naturalistic study, different treatments have been performed in a considerable portion of the patients and association with course awaits further analysis.

S55.02

Subjective quality of life and its changes in patients at risk of psychosis

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Objectives: The European Prediction of Psychosis Study (EPOS) aimed to study a large sample of young patients who are at risk of psychosis and to estimate their conversion rate to psychosis during 18 months follow-up. This presentation describes quality of life and its changes in patients at risk of psychosis.

Methods: In six European centres, 16 to 35 year old psychiatric patients were examined. Risk of psychosis was defined by occurrence of basic symptoms, attenuated psychotic symptoms, brief, limited or

intermittent psychotic symptoms or familial risk plus reduced functioning. Quality of life (QoL), measured by the Modular System for Quality of Life, was assessed at baseline and at 9 and 18 months' follow-ups. Psychiatric patients without prodromal symptoms and healthy subjects were comparison groups.

Results: In all, 245 risk patients were included. At baseline, they reported lower QoL than non-risk patients and healthy controls. Basic symptoms associated negatively with QoL, and there were differences between the study centres. During the follow-up, QoL raised less in risk patients than in non-risk patients. Baseline QoL did not predict transition to psychosis. However, its development was poorer in patients with than in those without transition to psychosis.

Conclusions: Those of the psychiatric patients who are at risk of psychosis have lower QoL than other psychiatric patients or healthy controls. QoL does not predict transition to psychosis, but its changes correlates with changes in clinical state. The results indicate that there is a need for comprehensive intervention with the patients at risk of psychosis.

S55.03

Transition to psychosis: Neuropsychological test results of the epos study

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Introduction: Both schizophrenia and ultra high risk (UHR) patients show reduced neurocognitive performance compared to matched healthy control subjects. In the current study we compared neurocognitive performance at baseline and follow up between UHR patients who made the transition to psychosis and patients who did not.

Method: Patients were eligible for the study when they met criteria for one or more of the following groups: Attenuated symptoms or brief limited intermitted psychotic symptoms or a first degree family member with a psychotic disorder and reduced functioning or basic symptoms. We assessed 216 UHR patients (166 males, mean age: 22,6 SD 5,2) with a neuropsychological test battery composed of the National adult reading test (premorbid IQ), California verbal memory test (verbal memory), spatial working memory test, verbal fluency first letter and categories (executive functioning), finger tapping test (motor speed) and continuous performance test (sustained attention). Data were collected in 7 participating centres of EPOS. Follow up was at 9 months.

Results: 37 UHR patients made the transition to psychosis (25 males, mean age 21,5 SD 4,8). The only test that showed a significant difference between the transition and non transition group at baseline was verbal fluency categories (t= 2.79, p = 0.006).

Conclusion: Patients who later make the transition to psychosis perform significantly worse on verbal fluency categories than patients