

care and outpatient care was performed. An one-day point prevalence study was performed in 5 of the catchment areas.

Multifold differences existed between the services in treated prevalence, contact rates and patterns of care. The accessibility of the services and the amount and allocation of resources were of minor importance in determining the contact rate and use of services. Rates of outpatient staff was the only service characteristic associated with the contact rates.

The use of services was very skewed, e.g. 10% of the patients accounted for 90% of all inpatient days. High consumption of services was related to older age, living alone, being unemployed, female gender, a diagnosis of psychosis and a history of psychiatric service use. Use of inpatient services was correlated to supply of beds. Highly staffed community services did not reduce the use of inpatient services. An availability of day care services was related to less use of inpatient services for psychosis patients.

S15.04

RCT on discharge planning for high utilisers of psychiatric services I: Background and first results

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Background: Attempts to reduce high utilisation of psychiatric inpatient care by targeting the critical time of hospital discharge have been rare. In Germany, until now no such intervention has been implemented, let alone subjected to a clinical trial.

Method: “Effectiveness and Cost-Effectiveness of Needs-Oriented Discharge Planning and Monitoring for High Utilisers of Psychiatric Services” (NODPAM) is a multicentre RCT conducted in five psychiatric hospitals in Germany (Günzburg, Düsseldorf, Regensburg, Greifswald, and Ravensburg). Subjects asked to provide informed consent to participate have to be of adult age with a primary diagnosis of schizophrenia or affective disorder, and a defined high utilisation of psychiatric care during two years prior to the current admission. Subjects are asked to provide detailed outcome data at four measurement points during a period of 18 months. Recruitment (which started in April 06) is still ongoing. Thus, baseline data of about 350 participants will be presented.

Results: Recruitment has been quite successful and the study has been generally well accepted by participating patients and their clinicians in in- and outpatient treatment settings. Subjects showed substantial initial impairment on outcome measures (e.g. needs, psychopathology, quality of life, and level of functioning) and high utilisation of mental health care. Further results on conduct and feasibility of the trial will be presented.

Conclusions: The first phase of this multicentre trial was promising. The potential of this study to strengthen the integration of mental health care provision in Germany will be discussed.

S15.05

RCT on discharge planning for high utilisers of psychiatric services II. Needs-oriented intervention

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Background: Aim of this contribution is to describe the intervention used in the study “Effectiveness and Cost-Effectiveness of Needs-Oriented Discharge Planning and Monitoring for High Utilisers of Psychiatric Services” (NODPAM). This intervention applies principles of needs-led care and focusses on the inpatient-outpatient transition. The NODPAM intervention manual includes a range of predefined standardised options based on number and type of needs.

Method: For the intervention group, a trained intervention worker provides a coherent package of needs-oriented discharge planning and monitoring focussing on the care process. He or she emphasises continuity of the care process vis-à-vis both patient and clinician (and carers if possible) via providing two manualised intervention sessions: (a) A discharge planning session takes place just before discharge with the patient and responsible clinician at the inpatient service; (b) A monitoring session takes place three months after discharge with the patient and outpatient clinician (office-based or public outpatient mental health service-based). A written treatment plan is signed by and forwarded to all participants after each session.

Results: Acceptance of the intervention by patients and clinicians has been high so far. Further results on duration, participant characteristics, and participants’ appraisal of the NODPAM intervention will be presented.

Conclusion: These first results indicate that the NODPAM intervention is feasible in inpatient mental health services in Germany. Discussion will focus on its applicability in other service systems.

S16. Symposium: WOMEN’S CAREERS IN PSYCHIATRY—DEVELOPMENTS AND DATA (Organised by the AEP Section on Women’s Mental Health)

S16.01

The need for female leadership in international professional organisations

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The proportion of women entering psychiatry is gradually increasing and among psychiatrists in clinical leadership positions women comprise an increasing proportion.

Yet few women are taking up leadership positions in international professional organisations. These organisations aim at e.g.

- improving the care for the mentally ill
- promoting parity in the provision of care to the mentally ill
- preserving the rights of these patients and
- protecting the rights of psychiatrists.

All areas where the input of women may contribute significantly to the outcome of any intervention.

Other key domains relate to:

- the development of ethical standards and procedures how to monitor their observance.
- the growth of educational programs to be offered globally
- the mentorship of junior colleagues or colleagues working in professional isolation

The need to develop strategies to overcome the inner as well as outer obstacles preventing women from due representation in these organisations will be discussed and suggestions for strategies to overcome the obstacles outlined.

S16.02

Indication and impact of mentoring models

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Objective: To stimulate the discussion on the implementation of mentoring models for women in psychiatry.

Background: Mentoring is regarded as an important tool in many disciplines and also in medicine to advance the academic careers of young professionals. It has, however, been so far hardly used for supporting young (female) psychiatrists.

Method: Different models of mentoring will be presented, and a short review of different studies on mentoring in academic medicine and its success will be given. The Basel experience with a mentoring programme at the University Hospital will be reported as an example.

Results and Conclusions: Mentoring can positively influence professional medical careers and can be especially helpful for young women to promote their research career. Special mentoring programmes considering gender specific needs should also be implemented in psychiatry.

S16.03

Gender and research trends in psychiatry

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Aims: To describe the characteristics of psychiatric research and their development over one decade with respect to the researchers' gender as captured in the articles published by three high impact general psychiatric journals.

Methods: All articles published in the *American Journal of Psychiatry*, the *British Journal of Psychiatry* and the *Archives of General Psychiatry* in 1994 and 2004 were considered for analysis. Articles were classified as research or non-research articles and further categorised according to a number of variables, including the methodological approach, the field of research, specific topic areas and number of participants studied. For all articles, the gender of the first and all co-authors was assessed as well as the academic degrees of the first and corresponding authors. Descriptive data analysis was performed.

Results: Not surprisingly, first authors were significantly more often male than female. The difference declined markedly between 1994 and 2004 but remained highly significant. At the symposium, detailed data on gender specific differences and changes over time in publication patterns will be presented for the first time. Issues to be discussed will include the relationships between gender and specific research fields, study size, the choice of biological or social outcome variables, the reporting of funding sources and more.

Discussion: This systematic gender specific analysis of publication trends reflects the status of women at the leading-edge of psychiatric research. It may serve to highlight the impact of recent policies supporting women's careers in research and can act as a baseline for future gender specific monitoring.

S16.04

Gender-sensitive data and monitoring of international developments in psychiatry

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Background and Aims: Results of long-term studies show that businesses' scores for promoting women correlate positively with profitability. This might well be the case also in the field of psychiatric practice and research.

Methods: A review of gendered data on psychiatrists and their professional situations in different countries was undertaken.

Results: The data base that would allow to assess the role of women in psychiatry and their impact on the developments of this field is fragmentary. Europe has gender-sensitive data for careers in medical sciences with almost one third of researchers being female, but these data cannot be broken down to the level of specific specialities. In most European countries women receive less research grants altogether, but are as successful with their applications as men. Data from the USA show that women faculty fare better in psychiatry compared to medicine overall. Data on gender and psychiatric consultants' subspecialities from the UK indicate an excess of men in almost all fields. However, for most European countries data on gender ratios regarding clinical psychiatrists, researchers and leadership positions are not published.

Conclusions: An effort of the AEP Section of Women's Mental Health to gather data from European countries on gender ratios of psychiatrists in different parts of the field and leadership positions on national levels is underway in order to allow comparisons and serve as benchmarks for further efforts towards gender parity in psychiatry. The presentation will include design and feasibility issues of this project as well as first feedbacks.

FC01. Free Communications: MOOD DISORDERS

FC01.01

Six-year prospective study of major depressive disorder: Remissions, relapses, and the effects of personality disorders

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