

revealed significant decrease of mRNAs for two splicing variants of the CCK<sub>B</sub> receptor in specific layers of the frontal cortex.

This study demonstrates a highly preserved CCK system in brains of human and non-human primates displaying similarities with rodent data. New evidence is added for CCK involvement in schizophrenia. Thus CCKB receptor ligands should be studied more for implications in the treatment of schizophrenia.

---

### ML03. Main Lecture 3

*Chair:* C.B. Pull (LUX)

---

#### ML03.01

MALIGNANT SADNESS – THE EVOLUTIONARY PSYCHOLOGY OF DEPRESSION

L. Wolpert. *University College London, London, UK*

There is a growing consensus that evolutionary theory can throw light on illness. For example sickle cell anaemia has not been eliminated because it can protect against malaria. The same approach can be applied to mental illness by drawing on the insights of evolutionary psychology, which tries to account for the adaptive basis of our various brain functions and behaviours. Can evolutionary theory account for why depression is so common? One theory suggests that it is adaptive in relation to the social hierarchy, its function being to inhibit aggressive behaviour to rivals and superiors when one's status is low. However this theory does not fit with the fact that depression is an illness that has so many negative consequences. An alternative is to consider depression as a pathological form of sadness, a basic emotion whose adaptive function is to maintain attachment and restore loss: grief following bereavement in the cost of that commitment. It is essential to understand grief in order to understand depression. While there may be a continuum of emotional states between normal sadness and severe clinical depression the feelings of those in severe depression bear no relation to feelings in normal life. Severe depression may develop from a pathological interaction between the biological basis of sadness and negative cognition which are mutually reinforcing. How these lead to somatization is not clear.

---

### PS03. Treatment update 2000 – Cognitive disorders

*Chair:* S. Lovestone (UK)

---

#### PS03.01

TREATMENT OF ALZHEIMER'S DISEASE

J.T. O'Brien

No abstract was available at the time of printing.

#### PS03.02

TREATMENT OF BEHAVIOURAL SYMPTOMS IN DEMENTIA

H. Förstl

No abstract was available at the time of printing.

#### PS03.03

TREATMENT OF THE DEMENTIA DISEASE PROCESS

S. Lovestone

No abstract was available at the time of printing.

---

### SES13. AEP Section "Child Psychiatry": Developmental perspectives in child and adolescent psychiatry

*Chairs:* D. Bailly (F), V. Delvenne (B)

---

#### SES13.01

POSSIBILITIES AND LIMITATIONS IN UNIFICATION OF STANDARDS – THE CHALLENGE IN CHILD AND ADOLESCENT PSYCHIATRY

M. Dabkowski

No abstract was available at the time of printing.

#### SES13.02

OUTCOME OF CHILDHOOD SEPARATION ANXIETY DISORDER

D. Bailly

No abstract was available at the time of printing.

#### SES13.03

GRIEF WORK AND ADOLESCENT DEVELOPMENT

A. Barbosa

No abstract was available at the time of printing.

#### SES13.04

QUALITY OF ATTACHMENT IN ADOLESCENTS HOSPITALIZED IN CRISIS UNIT

V. Delvenne

No abstract was available at the time of printing.

#### SES13.05

THE TRAUMA OF SEPARATION FOR ANOREXIC PATIENTS: AN ETIOPATHOGENIC AGENT AND A SUPPORT FOR TREATMENT

J.L. Venisse

No abstract was available at the time of printing.