

after the promulgation of the Projects Objective 1994–96 and 1998–2000 on the cultural, professional, organizational and technical ground, with meaningful repercussions on the behavior and on the same professional identity of the operators, particularly of the psychiatrist. Some aspects became more important, as the definition of homogeneous minimal levels in assistance, individualization of the priorities of intervention in relation to the totality of the question (the problem of the severe patients), standardization of the procedures of operation of the services (when and how to effect a performance), analysis of the loads of the job, evaluation of the services and the performances in relationship to the levels of structure/process/activity, introduction of guidelines for a better technical appropriateness of the interventions, definition of packets of indicators for monitoring activity, introduction of specific managing techniques, planning of the objectives, negotiation of the budget, etc.

Our contribute, departing from an analysis of the impact of these elements on culture and on the territorial psychiatric practice will face particularly some aspects:

the organization of our job for objectives;
the disease management for the taking care of the serious mental troubles;
the objectives and the tools of psychotherapy in the public services;
the procedures and the indicators for the evaluation of the assistance on the territory.

Such problematics will be faced on the base of experience matured in the Mental health Department of Genoa, Italy, through a critical analysis of potentialities and difficulties.

P26.08

The increasing importance of psychology in the determination of the ecological problems

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At the present time the problem of the human health in the interaction of man and environment reaches global dimensions. Scientific and technological progress brings big pressure on population, which is conditioned by physical factors, chemical illness, new technological trends and psychological factors too. They have serious repercussions/after effects/for a beginning/genesis/of the civilised diseases/disorders. For the future will be determined by progress in biology and especially in psychology and ecology. It will be continued development trend of genesis of frontier academic disciplines, among which is included the genesis of an ecological psychiatry too. It is in line with a primary sending of department of the psychiatry – prevention, diagnostics and therapeutics of the mental disorders.

P27. Mental retardation

P27.01

Early detection of psychosis in mentally retarded: particularities

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Contradicting Kraepelin's notion of a 'Pffropfschizophrenie', studies indicate that mental retardation and schizophrenia are distinct entities, yet there is broad consensus on an increased risk of schizophrenic disorders among the mentally retarded of about 3% point prevalence.

For schizophrenia, it was shown that it can be identified by subtle self-experienced deficits especially of information processing and perception – as assessed with the 'Bonn Scale for the Assessment of Basic Symptoms – BSABS'.

Comparing persons with schizophrenia, mild mental retardation, both diagnoses and controls for BSABS subsyndromes, schizophrenics with and without mental retardation did not differ, but reported more information processing, perception and proprioception disturbances than mentally retarded and controls. Stepwise logistic regression showed that information processing and perception disturbances separated schizophrenics from controls, but not from mentally retarded that were separated best by disturbances of body perception and feelings of alienation.

The results support the prior notion that the basic course of schizophrenia in mentally retarded indeed is not altered, but indicate that for an early detection in this group different disturbances than in intellectually undisturbed persons should be focused.

P27.02

The psychopathological phenotype of Velo-Cardio-Facial Syndrome

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Velo-Cardio-Facial Syndrome (VCFS) is a common genetic disorder associated with deletions on the long arm of chromosome 22, denoted as del22q11. VCFS was originally described in 1978 and its clinical phenotype is characterized by a variable degree of intellectual disability, cardiac anomalies, pharyngeal hypotonia and cleft palate, abnormal facies, thymic hypoplasia and hypoparathyroidism.

The behavioural phenotype in childhood and adolescence comprises social withdrawal, a special attachment to mother or other caregivers, poor social skills, emotional instability, affective problems, anxieties and attention deficits. In patients after adolescence a high prevalence of psychiatric illness is reported including psychotic disorders especially schizophrenia-like psychoses and bipolar spectrum disorders.

The patients included in the present study were referred for psychotic deterioration and recruited from the outpatient VCFS clinic of the Center of Human Genetics, Leuven, Belgium (n=8) or from the consultation department of the first author (n=8).

The behavioural phenotype was characterized by oppositional behaviours, clinging to mother or caregiver, social withdrawal, aggression and compulsive behaviours, whereas the actual psychopathological phenotype comprised anxieties, affective instability, mood swings, obsessive-compulsive symptoms, ideas of reference, paranoid ideation and auditory hallucinations. In none of the patients treatment with psychotropics and/or mood stabilizers resulted in a sustained symptomatic improvement. Thus, the most adequate diagnosis is Velo-Cardio-Facial Psychiatric Syndrome.

P27.03

Hyponatremia during carbamazepine therapy in the learning disabled

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Objectives: To determine the prevalence of hyponatremia during carbamazepine treatment in the learning disabled; to investigate risk factors and clinical features of hyponatremia in this group.

Methods: We performed a retrospective assessment of the prevalence of hyponatremia in 53 people receiving carbamazepine (subjects) and 64 people not receiving carbamazepine (controls) at a residential centre for the learning disabled. We examined relationships between serum sodium level, sex, age, carbamazepine dose and serum carbamazepine levels. We assessed clinical features of hyponatremia using a specially designed checklist.

Results: The prevalence of hyponatremia in subjects was 41.5% and in controls was 9.4%. Mean serum sodium level in subjects was significantly lower than that in controls ($p < 0.0001$). Hyponatremia correlated significantly with high carbamazepine dose and high serum carbamazepine level. The checklist of clinical features was not useful in detecting hyponatremia clinically.

Conclusions: Hyponatremia is a common occurrence in this population. In light of the uncertain significance of mild, chronic hyponatremia, the value of routine monitoring of serum electrolytes has yet to be established.

P27.04

Risperidone for behavioral disturbances in adults

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The efficacy and safety of risperidone for treating behavioral disturbances in adults with conduct spectrum disorders and mild, moderate, or borderline mental retardation were assessed in a randomized, double-blind, placebo-controlled trial. Subjects received 1 to 4 mg/day of risperidone ($n=39$) or placebo ($n=38$) for 4 weeks. The overall mean dose of risperidone was 1.45 mg/day. The primary efficacy measure was the change at endpoint in the total Aberrant Behavior Checklist (ABC) score. Significantly greater reductions in total ABC score were seen in the risperidone group than in the placebo group from week 2 through endpoint ($p < 0.05$). Similar results were observed for the irritability subscale ($p < 0.05$). Risperidone was associated with a significantly greater decrease than placebo in the hyperactivity and stereotypic behavior subscales at week 4 ($p < 0.05$). Adverse events were reported in 59% and 66% of patients in the risperidone and placebo groups, respectively. No patient discontinued the trial because of adverse events. The results suggest that risperidone is efficacious and well tolerated for behavioral disturbances in adults with conduct spectrum disorders and subaverage IQs.

P28. Neurobiology

P28.01

Effect of naltrexone on dopamine system functions in morphine dependent rats

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Opiate receptor antagonists (ORA), including Naltrexone, are widely used in the treatment of opiate addiction. There is an opinion that the therapeutic effect of ORA is only attributed to "chemical blockade". To answer the question whether ORA have an effect on biological mechanisms of opiate dependence we studied two groups of Wistar rats. One group was given morphine for 12 days. Three days after morphine withdrawal this group received Naltrexone during 12 days. Group 2 was only given morphine. The HPLC method was used to determine free and conjugated DA in the blood serum and midbrain. The results showed an increased

blood free DA level in group 2 and normal in group 1. The conjugated DA level in the blood of animals in group 2 tended to decrease while that in group 1 was normalized and DOPAC content increased thus indicating an activation of DA metabolism. In the midbrain, the morphine-increased DA level was much more increased by Naltrexone. So, Naltrexone was shown to influence DA system functions in the brain and blood of the morphine-dependent rats. This influence might be attributed to both the blockade of opiate receptors and the direct effect of Naltrexone on DA system, including DA receptors.

P28.02

Autoradiographic localisation of 5-HT receptors in the human brain

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The serotonin (5-HT) system is widely distributed throughout the brain and is a target for the pharmacological treatment of several psychiatric disorders. A detailed characterization of 5-HT receptor distribution in the human brain could be important for the development of specific psychoactive drugs. This presentation compares the distribution of a number of 5-HT receptors and the 5-HT transporter (SERT) in the human postmortem brain. Anatomically adjacent whole hemisphere sections were incubated with specific radioligands for the 5-HT_{1A}, 5-HT_{1B}, 5-HT_{2A}, 5-HT₄ receptors and SERT. A detailed comparison of the autoradiograms revealed different laminar and regional distribution patterns in the neocortex, where 5-HT_{1A} and 5-HT₄ receptor binding showed highest densities in superficial layers and 5-HT_{2A} receptor binding was most prominent in medial layers. The layering was less distinct for 5-HT_{1B} and SERT, although regional differences was revealed with dense binding in the medial occipital cortex (5-HT_{1B}) and cingulate gyrus (SERT). Subregional differences between the different receptors were also observed in the hippocampal formation and in the basal ganglia.

P28.03

Evidence for neuroplastic activity in acute schizophrenic psychosis

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Objective: S100B, a calcium binding protein produced by astroglial cells, evolves paracrine and autocrine effects on neurons and glia cells playing a role in neuronal plasticity and long-term potentiation. It has been shown to be increased in acute brain damage and neurodegeneration. A recent study showed increased S100B levels in medicated acutely psychotic patients with schizophrenia.

Methods: The study presented here included 26 drug-free patients with acute schizophrenia and 26 matched healthy controls. S100B blood concentrations were determined using a quantitative immunoassay upon admission and after 6 weeks of neuroleptic treatment. The PANSS was used to investigate psychopathology.

Results: Unmedicated schizophrenic patients initially showed significantly increased S100B levels compared to matched healthy controls. After 6 weeks of treatment, 11 patients showed normal S100B levels while in 15 patients the levels remained increased. These patients showed significantly higher PANSS negative scores upon admission and after 6 weeks of treatment.