

end 2006) albeit recruitment is accomplished. Based on preliminary findings, the focus will be on methodological implications.

**Methods:** This is an open, multicenter, randomised trial conducted within the Danish University Antidepressant Group. Subjects suffered from bipolar disorder indicating prophylaxis. Exclusion criteria were kept to a minimum. Randomisation took place when clinically appropriate. The primary end-point was the need for additional medication or hospitalization, conditionally that patients were stabilized on monotherapy 6 months after randomisation. Patients were followed up to 6 years after randomisation.

**Results:** Of the 155 randomised patients, 123 (79%) were recruited at the main center. So far, 25% of the patients were prematurely withdrawn within the first 6 months after randomisation, 25% were withdrawn at 6 months since they were not in monotherapy at this point, 25% have reached the primary end-point and the remaining 25% are still in trial.

**Conclusions:** The large proportion of patients that needed additional medications even after 6 months indicates that previous long-term studies randomising patients on monotherapies may have limited generalisability. The uneven contribution from the main center and the other centers indicates that multicenter studies may include patients that are selected beyond the selection criteria.

## P052

Influences of personality traits on depressive tendency among adolescents in Eastern Taiwan

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**Purpose:** To investigate whether the depressive tendency of adolescents are associated with certain personality traits in a stratified sample in eastern Taiwan.

**Methods:** Students who were sampled from 6 junior high and 25 primary schools in a multi-stratified manner were invited to join the study and asked to complete the Center for Epidemiologic Studies Depression Scale (CES-D) and the Junior Eysenck Personality Questionnaire (JEPQ) administered together with other measurements of behavioral problems and life events. Effects of gender and grades on the score of the CES-D and the JEPQ and all its four subscales (N, E, P, and L) were analyzed. Correlation between the CES-D and the JEPQ's subscales were explored.

**Results:** Data from 3222 participants was analysed. Scores of CES-D and all four subscales (N, E, P, and L) of JEPQ were not influenced by gender. Scores of CES-D of participants from junior high school (grade 7-9) were significantly higher than those from primary schools (grade 4-6) but not similar finding in JEPQ scores. Gender difference was not noted in the low depressive tendency group, but there's more girls (59.2%) than boys (41.8%) in the high depressive group. Participants in the high depressive tendency group had significantly higher scores of N and P subscale, but not E subscale of JEPQ than those in the low depressive tendency group.

**Conclusion:** Different aspects of personality might be correlated differently to the tendency of depression among adolescents. Whether there's developmental causation warrants further analyses and explorations.

## P053

The intensity dependence of auditory ERP components in un-medicated patients with major depression. an analysis of group differences.

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**Background:** The intensity dependent amplitude change (IDAP) of auditory evoked Event Related Potential (ERP) components has been found to correlate with the level of central serotonergic neurotransmission and to be associated with response to certain antidepressants. However, it is currently unknown whether there is a general abnormality of the IDAP in patients with major depression. Therefore, the purpose of the present study was to compare the IDAP in un-medicated depressive individuals with that of healthy control subjects.

**Methods:** We report the results of a study evaluating the change of auditory evoked P1, N1, P2 as well as P1/N1 and N1/P2 peak to peak amplitudes in 40 in-patients with major depressive episode prior to antidepressant treatment, and 44 healthy control subjects. Clinical symptoms of depression were assessed by means of standardized psychiatric rating scales (CGI, HDRS, HAMA and BDI).

**Results:** In multivariate analyses of variance we found no group differences in the intensity dependent increase neither of the P1, N1, and P2 nor of the P1/N1 and N1/P2 peak to peak amplitudes between patients and controls.

**Conclusions:** Our data revealed no general abnormality of the IDAP in patients with major depression in comparison to healthy control subjects.

## P054

Suicidal ideation and depressive disorders in primary care: The role of comorbidity

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**Background and objectives:** Most suicide victims contact a primary care physician within a month before their death. Over 90% of suicide victims have a diagnosable psychiatric illness, most commonly a mood disorder.

To compare demographic and clinical characteristics of depressed patients with and without a comorbid psychiatric disorder, and subjects without depressive disorders (DD). We hypothesized that depressed patients with a comorbid disorder would be the most impaired group and would have the greatest suicidality.

**Methods:** 195 patients were evaluated in three primary care centers in Madrid (Spain) using systematic sampling. Patients were assessed using the Spanish version of Prime-PHQ and a Recent Life Changes Checklist. Demographic data and previous psychiatric history were also collected.