performance test (DS-CPT) and contextual processing with a visual delayed non-matched to sample task (DNMS).

Results: Citalopram treatment did not produce measurable changes to reaction time, hit rate and false alarms in the DS-CPT at any time point. The citalopram treated group underperformed in the DNMTS after acute treatment and this decrement appeared to persist at 28 days.

Conclusions: Our results suggest that SSRI treatment may lead to small but measurable decrements in contextual processing, which require further confirmation, and evaluation in clinical populations.

P0027

Case of Successful treatment of voyeurism

E. Becirovic, A. Arnautalic, R. Softic, E. Avdibegovic. *Klinika Za Psihijatriju, Tuzla, Bosnia and Herzegovina*

Patient 27 years old received at clinic in upset state, potentially destructive and suicidal. After thorough anamnesis, in absence of his wife, he presents with symptoms of voyeurism in comorbidity with fetishism. Disorder starts unexpectedly several years ago. His neighborhood knows nothing of that. We started treatment with antidepressants and antipsychotic on which he reacted well. Several days latter he presents completely free of symptoms. He becomes able to admit his wife of his disorder and readies to work it out together. Few days latter he is dismissed from the treatment.

P0028

Are life events prior to first episode of major depression a predictor of medical treatment outcome?

C. Bock [1], J.D. Bukh [1], M.V. Christensen [1], U. Gether [2], L.V. Kessing [1]. [1] *Department of Psychiatry,Rigshospitalet, and Faculty of Health Sciences, University of Copenhagen, Copenhagen, Denmark* [2] *Center of Pharmacogenomics, University of Copenhagen, Copenhagen, Denmark*

Background and Aims: The association between stressfull lifeevents and onset of major depression has been verified in various studies, but more dubious are results concerning the association between life events and treatment outcome.

This study is part of a multicenter investigation evaluating genetic and psychosocial factors influence on outcome after pharmacological treatment of depression.

Methods: All cases of admittance or outpatient contact to a psychiatric department in Denmark are covered by the Danish Psychiatric Central Research Register. In this study we obtain personal data on all patients in a defined region of Denmark (Zealand) recently discharged with an ICD-10 diagnosis of a single depressive episode. These patients are invited to an interview including structural interviews and questionnaires to evaluate the presence of previous or recent life events (IRLE), personality traits (EPQ) or disorders (SCID), a family history of affective disorder, and the outcome of pharmacological treatment of their depression (TRAQ). The clinical diagnosis of depression is confirmed by the SCAN semistructural interview. The study is scheduled to include approximately 400 patients.

Results: Data collection continues until january 2008 and statistical evaluation will be completed subsequently. Results are ready for presentation in April 2008.

Conclusions: Compared with a prospective randomized study the drawback of the present study may be less validity of response to antidepressive treatment, on the other hand the present design enables an investigation of a large and representative sample of patients to reveal the influence of life events on the outcome of pharmacological treatment of depression.

P0029

Genetic Polymorphisms and the outcome of antidepressant Treatment

J.D. Bukh [1], C. Bock [1], M.V. Christensen [1], U. Gether [2], L.V. Kessing [1]. [1] *Psychiatric Centre, University Hospital of Copenhagen, Copenhagen, Denmark* [2] *Center for Pharmacogenomics, University of Copenhagen, Copenhagen, Denmark*

Background and Aims: The genetic contribution to individual differences in drug response is probably polygenetic with a number of susceptibility genes and gene interactions. The non-genetic factors are likewise comprehensive, interacting and might even be under genetic influence themselves. Thus, antidepressant response is a complex and multifactorial phenomenon.

This study sought to examine the effects of various genetic variations on the outcome of antidepressant treatment taking into account the possible interactions with environment and personality.

Methods: Patients discharged from a psychiatric clinic in a region of Denmark with the diagnosis of single depressive episode are identified via the Danish Psychiatric Central Research Register and invited to participate in interviews regarding present psychiatric illness, treatment response, recent life events, and personality disorder. Further, blood test for genetic analyses are taken and the participants complete questionnaires regarding present symptoms, personality traits, coping, and side effects.

The study will include approximately 400 patients.

Results: Data collection will proceed until January 2008, and the presentation will therefore include new and unpublished results.

Associations between genetic polymorphisms (including the genes encoding the serotonin transporter, catecol-O-methyl-transferase, 5-HT2 receptors, dopamin beta-hydroxylase, cytochrome P450 and brain derived growth factor) and outcome of antidepressant treatment will be presented.

Conclusion: The systematic recruitment of a relatively large, unselected and ethnic as well as phenotypic homogeneous sample of patients and the inclusion of genetic as well as non-genetic predictors of treatment response will make it possible throw new light on the role of genetic variation in the treatment of depression.

P0030

Treatment of melancholy with Duloxetine

A. Chinchilla, M.F. Pando, I. Gobernado, M. Martin, J. Perez-Templado, M.C. Morcillo, R. Arroyo, M.D. Crespo, M. Vega. *Psychiatry Department, Ramon Y Cajal Hospital, Madrid, Spain*

We have administered a dosage of 120 mg a day of duloxetine to 11 patients diagnosed with melancholy. On these patients, we studied sociodemographical and clinical variables, previous episodes and records, former response to treatment and adherence. They were evaluated at the beginning and then 15, 30, 60, 90 and 120 days after commencing the treatment. The therapeutical response was measured using the Hamilton scale for depression (HDRS). Other items observed were the side-effects and adherence. As an additional