

Moroccan clients following their stay in Morocco, which was linked to uncoordinated eclectic health care consumption in Morocco, the pursuit of personally more acceptable diagnoses, somatic checkups or medication, and the occasional use of (stress-inducing) traditional healing methods. Rif-Project is based on the assumption of providing continuation of care to its Moroccan clients who spend their summer months in Morocco, through strategic positioning of TCH care-deliverers across the kingdom. Their activities include the continuation of the treatment program that was initiated in the Netherlands, visiting clients in their preferred environment and system, psycho-education and preventive activities. By monitoring their clients health care consumption, coordinating services in collaboration with local institutions, treatment interventions and psycho-education, TCH-workers were successful in providing and maintaining stability to their clients, which reduced the incidence of deterioration and crisis.

Keywords: Rif-Project, Morocco, migrants, continuation, trans-cultural, outreaching

S38.04

Culturally sensitive psychopharmacological research

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In recent years there has been increased recognition of the importance of developing culturally sensitive treatment in European psychiatry. A key area that requires further attention, however is related to the efficacy and security of psychopharmacological agents. It is increasingly well understood that drug metabolism can vary considerably across populations groups. At the same time, psychopharmacological research, from initial development of a new molecule to efficacy and security studies, to the identification of new indications, is generally carried out in Europe or North America, primarily using research subjects who are of White European descent. Furthermore, the development of the medication is predicated on the specific clinical issues that are of relevance to the target population. The upshot of this is that psychopharmacological research may be of limited relevance for those patients who are not of European or European American descent. To make psychopharmacological research more relevant requires that clinical issues relevant to the target population are included in the research protocol, that genetic variations are taken into consideration and identified, that the instruments used to measure the disorder in question are culturally valid, and that the overall research project is designed with the objective of understanding how cultural and genetic differences can impact pharmacodynamics and pharmacokinetics. This presentation will conclude with a brief description of a culturally sensitive ethnopsychopharmacological research project.

W12. Workshop: A ROAD MAP FOR EUROPEAN COLLABORATIVE RESEARCH IN SCHIZOPHRENIA (Organised by the AEP Section on Neuroimaging)

W12

A road map for European collaborative research in schizophrenia

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Background and Aims: Neuroimaging is one of the most promising avenues for exploring psychiatric disorders in general and schizophrenia in particular both in terms of aetiology but also pathophysiology and treatment response. The aim of this workshop is to discuss possible avenues for Europe-wide collaborative research in neuroimaging and the implications it has for training and general infrastructure

Methods: The workshop leaders will discuss at their individual presentations the current vision for more uniform approach to neuroimaging across Europe, steps already taken towards it and plans for the future.

Results: The organisers of the workshop hope that a consensus view will emerge to move neuroimaging research in schizophrenia into a Europe wide platform.

Conclusions: The future rests in collaborative large scale multi-centre research.

S39. Symposium: INTERNET PSYCHOTHERAPY: A NEW PSYCHOTHERAPEUTIC APPROACH IN PSYCHIATRY

S39.01

Is stepped care the right format for internet delivered cognitive behavioural therapy for anxiety disorders and depression?

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The database supporting Internet delivered minimal therapist contact cognitive behavioral therapy (CBT) is growing rapidly. Several randomized trials show that this novel treatment approach can work for anxiety disorders and major depression of mild to moderate character. However, in clinical practice the implementation of Internet delivered CBT is not straightforward, as it can be difficult to target the right audience and client might worsen following or during the first “low cost” treatment attempt. The aim of this talk is to describe a model for the stepped care implementation of Internet CBT and data supporting the model. Results from a randomised trial on major depression will be presented as well as a summary of the available evidence regarding Internet CBT vs. regular CBT in individual or group format and the potential for stepped care. The data obtained so far raises some doubts regarding the widespread implementation of stepped care. For example, it is not clear why more intensive therapist contact should work when minimal contact therapy has not. However, at the same time stepped care approaches can help us think more clearly regarding different levels of intervention and cost effectiveness. Further research in this field is encouraged.

S39.02

Can we benefit from internet to increase accessibility to an effective non-pharmacological treatment for major depression and anxiety disorders?

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During the last 15 years we have seen a dramatic increase in the administration of effective drug treatment for anxiety disorders and major depression due to the introduction of SSRIs. Lately psychological treatments has been shown to be similarly effective in these conditions. Thus evidence from repeated randomized clinical trials (RCT) shows that CBT is an evenly effective alternative to SSRIs for major depression and anxiety disorders. However, due to limited availability of skilled CBT therapists we have an effective alternative to drug treatment out of reach for most patients regardless of preferences.

Fortunately, CBT provided in self-help-based approaches seems to be effective for e.g. depression, panic disorder, phobias, depression, eating disorders, PTSD and social phobia. A significant number of patients may however find it difficult to complete the treatment on their own. Thus Internet treatment with CBT in self-help format accompanied with minimal therapist contact by email seems to be a cost effective procedure to provide effective treatment to an increasing number of patients. This approach may to some extent overcome the limitation in therapist number and increase treatment accessibility. Patients may still enjoy the benefit of an individual therapist contact and thus improve the number of treatment program completers. Results from RCTs with Internet treatment in clinical settings with patients referred from general practitioners will be provided. Moreover, issues of patient selection/recruitment, web-technology and treatment limitations and clinical impressions of treating patients in this way will be discussed.

S39.03

Psychotherapy on the internet: How does it work concretely?

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Today, internet-based technologies are used in all phases of psychosocial services. Current psychotherapeutic applications focus on the implementation of traditional approaches in the Internet. For instance, self-help material is posted onto the net, therapies are conducted via email, and groups meet in virtual chatrooms. However, recent advancements in web-based technologies are providing even greater opportunities for psychotherapy on the Internet. Today, many different aspects of psychotherapy on the Internet can be provided on a single integrated Web platform.

Recently, we have created an Internet platform that offers various aspects of a cognitive behavioral approach to social phobia. This includes an interactive self-help guide, contact with therapists, a continuous monitoring and feedback of patient response, as well as collaborative elements, offering patients the opportunity to share their experiences with other patients. The aim of this presentation is to provide insight into the concrete application of such a platform. Experiences, pitfalls and opportunities are discussed along with the primary results of a controlled study.

S41. Symposium: GENES, ENDOPHENOTYPES AND TREATMENT OF ADULT ADHD

S41.01

Association of response to methylphenidate in adults with ADHD with a polymorphism in SLC6A3 (DAT1)

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Background: During this presentation, the first pharmacogenetic study on response to methylphenidate (MPH) in adults with ADHD will be reported.

Methods: We performed a stratified analysis of the association between response to MPH, assessed under double-blind conditions, in 42 adults with ADHD, and polymorphisms in the genes encoding the dopamine transporter, SLC6A3 (DAT1), the norepinephrine transporter, SLC6A2 (NET), and the dopamine receptor D4, DRD4.

Results: Polymorphisms in the DRD4 and the SLC6A2 (NET) genes were not significantly associated with the response to MPH treatment; however, the VNTR polymorphism in the 3'untranslated region of SLC6A3 (DAT1) was significantly associated with an increased likelihood of a response to MPH treatment (odds ratio 5.4; 95% CI 1.4-21.9) in heterozygous 10-repeat allele carriers in comparison with the 10/10 homozygotes: 52.2% of the participants heterozygous for the 10-repeat allele improved significantly on MPH treatment whereas only 22.2% of the 10/10 homozygous individuals did.

Conclusions: This study confirms that the SLC6A3 (DAT1) genotype may have an influential role in determining the response to MPH in the treatment of ADHD. The SLC6A3 (DAT1) gene might be a factor worth evaluating further in the future regarding choice of treatment and possibly dose adjustment.

S41.02

Attention-deficit/hyperactivity disorder endophenotypes - an overview

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Attention-deficit/hyperactivity disorder (ADHD) is a clinically heterogeneous, highly heritable and genetically complex disorder. The pathways from genes to behaviour are still unknown. Endophenotypes, or intermediate phenotypes that are more closely linked to the neurobiological substrate than the core symptoms of ADHD, may help to disentangle these complex relationships between genes and behaviour and to clarify its etiology and pathophysiology. Heritability and stability represent key components of any useful endophenotype. Various other criteria for the selection of useful endophenotypes have been proposed. A review of the current state of the research on potential endophenotypes for ADHD will be given.

S41.03

Genes and neurocognitive performance: are the two related in adult ADHD?

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