this symposium is the presentation of several approaches of recently finished, ongoing and planned programs in different countries. Strategies, implementation and outcome will be presented and discussed. A major target will be to specify how future antidepressive and suicide-preventative campaigns should be designed.

Sunday, April 3, 2005

W-04. Workshop: Bridging the gap between evidence-based treatment and complementary and alternative medicine

Chairperson(s): Christoph Lauber (Zürich, Switzerland), Wulf Rössler (Zürich, Switzerland) 14.15 - 15.45, Holiday Inn - Room 4

Complementary and alternative medicine (CAM) is widely accepted in the general population, e.g., for treatment of allergies or cancers. In people with mental illness the use of CAM is not very well understood. Data are available especially from the United States, but not from Europe. Thus, this symposium aims to, firstly, clarify the general public's treatment expectations with respect to mental disorders and CAM. Illness models and their implications for treatment will be illustrated based on data from a representative public survey in Switzerland. Secondly, data from the Zurichstudy, a prospective population-based assessment of medical conditions in the general population, will display the public's use of CAM. Moreover, the relationship of psychiatric and somatic symptoms concerning the use of CAM will be shown. Thirdly, we will discuss how alternative and evidence-based medicine complement each other in severely mentally ill migrants. The special cultural background of this group influences the use of CAM, but also ideas about mental illness and their respective treatment. And finally, we will have a closer look at the difference between professionals and patients in their treatment concepts exemplified by the concept of compliance.

Sunday, April 3, 2005

W-07. Workshop: Cycloid psychoses

Chairperson(s): Willem Verhoeven (Venray, Netherlands), Siegfried Tuinier (Venray, Netherlands)

16.15 - 17.45, Holiday Inn - Room 6

Objective: The development of the concept of cycloid psychoses is the result of Kraepelins diagnostic dichotomy of the endogenous psychoses into dementia praecox and manic-depressive illness. This resulted in a number of unclassified psychoses that cannot be placed within this concept. Kleist called these psychoses marginal psychoses ("Randpsychosen") to make clear that they do not belong to schizophrenia as proposed by Bleuler, but have to be placed 'at the border' of the affective psychoses.

Design and Methods: Leonhard described the cycloid psychoses as a group of nosological independent illnesses with an episodic course, intrasyndromal bipolarity and without residual symptoms in the long run. He described three clinical subtypes: anxiety-happiness-psychosis, confusion-psychosis and motility-

psychosis, each with a specific symptomatology. A large body of research now supports the validity of the concept of cycloid psychoses with respect to genetics, environmental causes and therapeutic strategies.

Results: Systematic scoring of the relevant psychotic symptoms showed a prevalence of cycloid psychoses of at least 10-15% in psychotic patient groups. Antipsychotics play a minor role in the acute treatment and relapse prevention and the genetic endowment is quite different from bipolar illness and schizophrenia.

Conclusion: These and other data emphasize that cycloid psychoses have to be studied as a separate disease entity.

Monday, April 4, 2005

W-10. Workshop: Ligand-gated ion channels as targets for psychotropic drugs

Chairperson(s): Rainer Rupprecht (München, Germany), Johannes Kornhuber (Erlangen, Germany) 14.15 - 15.45, Holiday Inn - Room 5

- G. Biggio. Dept. of Experimental Med., Cagliari, Italy
- G. Collingridge. University Hospital Dept. of Anatomy, Bristol, United Kingdom
- R. Rupprecht. Klinikum der Universität Klinik für Psychiatrie, München, Germany
- J. Kornhuber. Department of Psychiatry, Unive, Erlangen, Germany

The family of ligand-gated ion channels comprises the GABA type A receptor, glutamate receptors, eg. the NMDA receptor, the serotonin tye 3 receptor, the nicotinic acetycholine receptor and glycine receptors. This symposium will highlight the role of ligandgated ion channels for the action of psychopharmacological drugs. Giovanni Biggio will elucidate the role of various subunits of the GABA type A receptor for the action of benzodiazepines and the importance of the hormone status for benzodiazepine action. Graham Collingridge will address the significance of glutamate receptors, e.g. NMDA receptors, and of compounds targeting this receptor for synaptic plasticity and memory formation. Rainer Rupprecht will show how antidepressants and antipsychotics target the serotonin type 3 receptor in an allosteric fashion which challenges the concept of target specificity of psycho-pharmacological drugs. Johannes Kornhuber will delineate the potential of modulators of NMDA receptor function such as memantine for the treatment of dementia disorders and as antipsychotic agents. In summary, this workshop will introduce the family of ligand-gated ion channels as novel targets for psychotropic drugs.

Monday, April 4, 2005

YP-W-01. Workshop: European and International networks of young psychiatrists and trainees

Chairperson(s): Kai Treichel (Germany), I.T. Calliess (Hannover, Germany) 14.15 - 15.45, Holiday Inn - Room 8 J. Beezold. United Kingdom

D. Eraslan. Turkey

V. Buwalda. Netherlands

N. Maric. Institute of Psychiatry, Belgrade, Yugoslavia

Tuesday, April 5, 2005

W-14. Workshop: COX-2 inhibitors in the therapy of psychiatric disorders

Chairperson(s): Norbert Müller (Munich, Germany), P.J. Egger (Greenford, United Kingdom) 08.30 - 10.00, Holiday Inn - Room 5

M. J. Schwarz. Psychiatric Hospital, LMU Muni, Munich, Germany B. Sperner-Unterweger. Psychiatric Hospital, Universi, Innsbruck, Austria

M. Riedel. Psychiatric Hospital, LMU Muni, Munich, Germany P. J. Egger. Greenford, United Kingdom

N. Müller. Ludwig Maximilian University Psychiatric Hospital, Munich, Germany

Cyclooxygenase-2 (COX-2) - constitutively expressed in the CNS - is suggested to have an important functional role in the CNS. COX-2 interacts with neurotransmitters such as acetylcholine, serotonin, and glutamate, but is also involved in the regulation of immune system and in inflammation in the central nervous system (CNS) via effects of prostaglandins, in particular prostaglandin E2. The relationship between the tryptophan/serotonin metabolism and the differential effects of COX-1 and COX-2 will be discussed by G. Engbert, Stockholm. While Markus Schwarz München, Germany, will present data showing that inflammation, cytokines and PGE2 plays a role in the etiopathology of schizophrenia, Michael Riedel München, Germany, will focus on the effects of COX-2 inhibitors on neurotransmitters, which are involved in schizophrenic psychopathology. Recently, a role for the new generation of selective COX-2 inhibitors in the treatment of psychiatric disorders is discussed. Peter Egger, Greenford, UK will present epidemiological data of 716 schizophrenic patients who had a prescription of a selective COX-2 inhibitor (celecoxib or rofecoxib). Compared to schizophrenics without a COX-2 inhibitor, the COX-2 inhibitor users had a 36% reduced risk for a schizophrenic exacerbation independent from antipsychotic medication. Results of two double-blind, randomized studies, altogether with 90 schizophrenic patients will be presented by Norbert Müller, München, Germany. The results show, that celecoxib has significant beneficial effects not only at the PANSS total scale, but also regarding the general psychopathology and on the schizophrenic negative symptoms. The fact that the therapeutic effect depends from the duration of the disease fits with the inflammation hypothesis. In depression, however, signs of inflammation have been described since many years. Clinical improvement of a depressive syndrome has been observed in patients, which have been treated rofecoxib due to other indications. First data of the use of COX-2 inhibitors in affective disorders will be presented.

Wednesday, April 6, 2005

W-21. Workshop: Psychotropic drugs in pregnancy and lactation

Chairperson(s): Cyril Höschl (Prag 8, Czech Republic), Dagmar Seifertova (Praha 1, Czech Republic) 08.30 - 10.00, Holiday Inn - Room 5

M. Steiner, L. Ross, L. Born. McMaster University Dept. of Psychiatry, Hamilton ON, Canada

The proposed workshop covers both theoretical and practical issues of administration of psychotropic drugs (antipsychotics, antidepressants, mood stabilizers, anxiolytics and hypnotics) and ECT during pregnancy and lactation. It is primarily focused on the very common problems that psychiatrists may encounter in their clinical practice: whether and how to prescribe medication for women who want to become or already are pregnant; or who are breastfeeding; to weigh risks and benefits for baby and mother, including risks of untreated mental illness. Our current knowledge on the effects of psychotropic drugs on fetuses, newborns and infants is largely based on the case reports and retrospective studies. Possible teratogenity, withdrawal symptoms, and long?term impacts are of particular concern. In the introductory part of each session, a brief summary of drug effects, contemporary treatment state?of?art and practical guidelines based on evidence will be reviewed. Afterwards, case reports will be presented and the participants will be encouraged to discuss presented cases.

Monday, April 4, 2005

C-07. Educational course: Therapeutic drug monitoring of psychotropic drugs and pharmacogenetic tests in psychiatry

Course director(s): Pierre Baumann (Prilly-Lausanne, Switzerland)
08.30 - 12.00, Hilton - Salon Bialas

Therapeutic drug monitoring (TDM) of psychotropic drugs is now a widely introduced practice, and it is especially recommended in patients who are non-compliant, or who poorly tolerate, or respond poorly to a medication, or who belong to the category of "special populations" (somatically ill patients, comedicated with a variety of drugs, suffering from a liver or renal disease, elderly or very young patients). Increasingly, the use of generics has been shown to represent a source of unexpected treatment outcomes, and TDM may help to explain pharmacokinetic particularities after switching from an original to a generic preparation (or vice versa). Finally, the increasing knowledge of the metabolism of psychotropic drugs allows to take account of the pharmacogenetic status (e.g. cytochrome P-450, Pglycoprotein) of the patients not only in adapting their medication, but also for interpreting pharmacokinetic interactions with clinical consequences. In this respect, TDM and pharmacogenetic tests (phenotyping, genotyping) have now also to be considered as a tool in pharmacovigilance. The aim of this course is first to briefly summarize some basic knowledge on TDM and pharmacogenetics of the metabolism of psychotropic drugs. Psychiatrists who already have experience in this field will have their knowledge updated: recently progress will be illustrated by clinical situations, which will be discussed in an interactive way. A consensus paper (AGNP) with recommendations on the optimal use of TDM and pharmacogenetic tests in psychiatry will be summarized and submitted for discussion, by speakers (clinicians, clinical psychopharmacologists) from Switzerland, Sweden and Germany.