

S53. Prediction of psychosis

Chairs: J. Klosterkötter (D), M. Birchwood (UK)

S53.01

PRODROMES OF RELAPSE AND FIRST-EPISODE OF PSYCHOSIS: DIFFERENT OR SAME?

M. Birchwood

No abstract was available at the time of printing.

S53.02

COGNITIVE AND BEHAVIORAL FUNCTIONING DURING THE DECADE PRIOR TO FIRST HOSPITALIZATION AND DURING EARLY COURSE OF SCHIZOPHRENIC ILLNESS

M. Davidson

No abstract was available at the time of printing.

S53.03

VULNERABILITY MARKERS AND PREDICTION OF IMMINENT PSYCHOSIS

P. Jones

No abstract was available at the time of printing.

S53.04

THE COLOGNE EARLY RECOGNITION PROJECT

J. Klosterkötter

No abstract was available at the time of printing.

S53.05

SCREENING AND DESCRIBING SUBJECTS WITH PRODROMALS TO SCHIZOPHRENIA

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It is a common scientific finding and clinical experience that various psychic symptoms and functional decline often precede the onset of schizophrenia and other psychoses. The time between first symptoms and the manifestation of schizophrenia can be from months to years. There is also some evidence that earlier treatment of psychosis results in better outcome. Thus, the key question is: Is it possible to detect the people who are not yet psychotic but in high risk to become psychotic in the near future and who therefore are possible candidates for early intervention? This presentation will describe a prospective study project "Detection of Early Psychosis" (DEEP project) designed to identify and characterize the prodrome in the first-degree relatives of schizophrenia patients and in new psychiatric outpatients. The aim of the DEEP project is to identify predictors related to transition from prodrome to psychosis. First, we developed an instrument, called the PROD-screen, for screening subject having possible prodromal symptoms. The sensitivity and specificity of the PROD-screen proved to be satisfactory and it proved to be easy to use in various settings. The PROD-screen

positive subjects have been assessed by the Structural Interview for Prodromal Symptoms (SIPS). First results have showed that the subjects with prodromal symptoms (SIPS positive) have more also other psychic symptoms, poorer premorbid adaptation and more decline in functioning than non-prodromal subjects and healthy controls. The subjects will be characterized more thoroughly by neuropsychological tests, MRI scans and neurophysiological examinations. The subjects will be followed for three years. Latest results will be presented and discussed.

SES18. AEP Section "Classification and Nomenclature": Personality dimensions as predictors for treatment outcome in affective disorders

Chairs: P. Bech (DK), P. Pichot (F)

SES18.01

PERSONALITY DIMENSIONS IN AFFECTIVE DISORDERS

P. Pichot. *Académie Nationale de Médecine, Paris, France*

The difficulties resulting from the use of radically different models to describe the mood disorders, conceived as syndromal categories, and the related personality dimensions are first stressed. The possibility of describing the mood disorders, presently conceptualized according to the categorical model, by using the dimensional one, is briefly discussed. However the main problem remains the determination of the relations between the personality disorders, conceived as pathological personality traits and therefore implicitly as dimensional, characterized by attributes related to the mood spectrum symptomatology, and the mood disorders (bipolar, depressive, and their varieties). It will be shown that historically the positions taken have always oscillated between two poles. On the first dimensional personality disorders have been, despite their symptomatic similarities, considered as largely or completely independent from the mood disorders. On the second, it has been claimed that both are more or less strongly related, this relation being envisaged from different points of view: personality traits as constitutional predisposing factors to the disorders, common genetic background of both, and finally personality disorders or at least part of them as minor forms of full blown mood disorders. The conflicting positions, reflected in the modern nosological systems (including the special issues of the relationship between dysthymic disorder and depressive personality, and of the heterogeneity of the last one) are reviewed.

SES18.02

THE ICS-10 PERSONALITY DISORDERS RELEVANT FOR AFFECTIVE DISORDERS

C. Pull

No abstract was available at the time of printing.