Symposia

SAL01. Food for thought: understanding and treating eating disorders

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Food for thought: understanding and treating cating disorders

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This state of the art lecture will highlight the following themes with special emphasis on the blind spots in our current knowledge.

Diagnosis: The present delineation of the various eating disorders shows some inconsistencies and is questionable in the case of significant weight fluctuations and serious comorbidity (especially with respect to features of obsessionality and impulsivity).

Etiology: The biopsychosocial model in understanding the development of eating disorders is illustrated by the complexity of family factors which may play a predisposing, precipitating and perpetuating role.

Treatment: In recent years several well-controlled outcome studies have been carried out, but still many questions remain to be answered with regard to the (contra) indications of the investigated therapeutic methods; moreover, there is a lack of research on the treatment process in difficult cases which also confront us with challenging ethical issues.

Prognosis: The available data on the long-term outcome of eating disorders can partially guide us towards better (secondary and tertiary) prevention, but much is unknown about the crucial factors that may shape – for better or worse – the course of the disorder.

SAL02. Post genomic psychiatry: the effect of the human genome project on clinical practice

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Post genomic psychiatry: the effect of the human genome project on clinical practice

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There is now consistent evidence of an important genetic component to most of the major adult psychiatric disorders and increasing evidence of perhaps even stronger genetic effects in childhood disorders such as attention deficit hyperactivity disorder and autism. With a few rare exceptions psychiatric disorders have complex modes of inheritance, but despite this, progress in mapping and identifying genes is being made and momentum is likely to gather apace following the completion of the draft human genome sequence and concomitant technical advances.

The most immediate benefit of identifying genes contributing to common familial psychiatric diseases will be in our understanding of the basic neurobiology of disease but this should lead on to the discovery of novel and more specifically targeted drug treatments. It is as much commercial far-sightedness as scientific altruism that has led the major pharmaceutical companies into serious investment in genotyping technology and the development of detailed SNP maps. Safer, more effective treatments will obviously be to the benefits of patients but it is also possible to envisage that DNA testing will be used to predict who responds to what type of antipsychotic or antidepressant treatment or who will be susceptible to what side effects. There is already some preliminary evidence suggesting that these approaches will work. There will also be less immediately tangible benefits to sufferers from psychiatric disorders. It has sometimes been feared that 'geneticisation' could contribute to the stigma of mental disorder. So far the experience has been just the opposite. Alzheimer's disease is now widely perceived as a 'real' disorder with a rapidly unfolding molecular aetiology. This author's view that identifying the genes involved and understanding causation will do much to improve public perception and understanding of other psychiatric disorders.

SES01. AEP Section Alcoholism and Drug Addiction – Pharmacotherapy of addiction: a European update

Chairs: M. Berglund (S), K. Mann (D)

SES01.1

A randomised Methadone-controlled heroin trial in opiod-addicts

W. van den Brink. The Netherlands

No abstract was available at the time of printing.

SES01.2

Two new methods of rapid detoxification in opioid dependence: what does general anaesthesia really add to the effect?

C.A.J. de Jong. The Netherlands

No abstract was available at the time of printing.

SES01.3

Sertraline in alcoholics with major depression: a controlled trial

A. Gual. Spain

No abstract was available at the time of printing.