

dominated Psychiatry for most of the time. With the advent of early intervention studies, longitudinal models of disease have been emphasized. The concept of a transition to disease was then operationalized but also highly criticized. Recently, McGorry proposed a staging model for psychiatric disorders in continuum with the non-clinical population. Finally, a dynamic systems approach to diagnosis in Psychiatry will be discussed.

Conclusion Driven by research in early phases of mental illnesses, current models of disease propose a longitudinal approach that emphasizes the complex and non-linear course of symptom clusters.

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EV898

Justice in psychotherapy

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Introduction Justice is one of the fundamental concepts of right ordering of human relationships. Justice is a regulative idea for the arrangement of society preceding the law and already seen in animals; the sense of justice is observed as early as in young children. The ability to altruistic behavior, sense of fairness, reciprocity and mutual help are probably genetically determined as a disposition, which may further develop or be deformed by education. Although justice issues are common in psychotherapy, they may not be reflected and processed in the course of therapy.

Method Review of psychotherapeutic text and reflection of experiences of the authors.

Results In psychotherapy, justice issues appear directly in what the client says (mostly about injustice), but more frequently, the issues are implicitly contained in complaints and stories against a background of conflicts and problems. They may be related to the client's story, his or her problems with other people, and the therapeutic process itself, including client's selection of therapy, therapeutic relationship, and therapeutic change strategies. Problems with justice between the therapist and the client may be revealed by honest therapist self-reflection or high-quality supervision.

Conclusions Although justice issues are common in psychotherapy, they may not be reflected and processed in therapy. By increasing receptiveness to the issue of justice, the therapist may improve the therapeutic process.

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EV899

Phenomenology of ADHD

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Introduction Phenomenology is a term borrowed from philosophy which refers to the study of the structures of experience and consciousness. Founded as a school by Edmund Husserl in the early 20th century, it was later expanded and modified by many others, including Martin Heidegger, to include the analysis of existence and hermeneutics.

Objectives and aims To explain the clinic phenomenology of ADHD based on the historical bibliography regarding this term, making references to the heterogeneity of its phenomenological presentation depending on social context, age and gender.

Methods To go over the historical considerations of phenomenology and its evolution, as well as its clinical applications, in order to use this knowledge in a clinical context based on the observation of different cases in clinical practice.

Results We try to apply the phenomenological method as first inaugurated by Karl Jaspers' General Psychopathology (1913) to analyse the different clinical phenomena that can be observed in patients diagnosed with ADHD.

Conclusions We think that watching the psychiatric conditions, in this case ADHD, through the phenomenological lens can lead to a better understanding of the heterogeneity of their appearance in the clinical practice.

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EV900

Wittengstein's private language argument: Does it pass the schizophrenic mind challenge?

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Introduction The private language argument was introduced by Ludwig Wittengstein in his *Philosophical Investigations* (1953). For Wittengstein, language is a rule-governed activity and a language in principle unintelligible to anyone but its originating user is impossible, as even the originator would fail to establish meanings for its putative signs. The private language argument is of paramount significance in modern debates about the nature of language and mind and continues to be disputed. Language disorder has been described since the first accounts of Schizophrenia. Multiple studies have reported anomalies at multiple levels of language processing, from lexical and syntactic particularities to the discourse field, as well as structural and functional abnormalities in brain regions that are involved with language perception and processing.

Objectives and aims We aim to critically assess the Wittengstein's argument in the light of recent developments in neuroscience of language.

Results and conclusions We conclude that in some patients diagnosed with schizophrenia, presenting a significant language impairment, one can infer a dysfunctional process, in which the language becomes progressively more private and the meaning of utterances harder to ascertain in the realm of interpersonal communication. The privatization of language might contribute to the social cognition deficits and the so-called negative symptomatology of these patients.