P01.149

A COMPARATIVE P300 STUDY OF YOUNG ADULT PATIENTS WITH DEPRESSIVE AND DEPRESSIVE-DELUSIONAL DISORDERS

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Auditory EPs were recorded in the standard oddball paradigm in 12 right-handed males (Gr. 1, 16–25 years) with affective disorders, in depressive state (ICD-10, F 31.3; F 31.4; F32; F33; F34.0). The data were compared with the findings in a group (Gr.2) comprising 11 patients with paranoid schizophrenia, depressive-delusional disorder (F20.0) and 3 patients with schizoaffective disorder, depressive type (F25.1) as well as in a group of healthy subjects (HS, 11 subjects). All tested groups were matched for sex, age and handedness, patients of Gr. 1 and Gr. 2 were on medication. The severity of depression assessed by HDRS-21 varied from 12 to 37 balls, the summarized scores of positive symptoms (PANSS) in Gr. 2 were 1432. Statistical analysis was done by SPSS 8.0.

Gr. 1 did not differ significantly from other groups, however there were found tendencies to lower P300 amplitude in T4 ($p < 0.09$) and longer LP in F4 ($p < 0.09$) as compared with HS. Gr. 2 significantly differed from HS by lower P300 amplitudes in T3 ($p < 0.05$), C4 ($p < 0.03$), and T4 ($p < 0.02$) and longer LP in F4 ($p < 0.04$). Therefore, patients of Gr. 1 and Gr. 2 had similar deviations of P300 although the level of significance was reached only in the group comprising patients with schizophrenia and schizoaffective disorder. The data are in line with the hypothesis about the involvement of right hemisphere in the development of depressive state in affective disorders, schizoaffective disorder and schizophrenia.

P01.150

MULTIDISCIPLINE APPROACH TO PREDICTION OF SCHIZOPHRENIA IN FAMILIES

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An improvement of criteria of genetic prognosis in schizophrenia is an important issue due to the necessity of development of disease prophylactics. A significant contribution to the assessment of genetic risk of schizophrenia can be provided by molecular studies of candidate genes. At the same time, there is another approach based on the integration of findings of different branches of neurosciences, which study illness pathogenesis. At first, this approach assumes a search for genetically informative characteristics at different levels of pathogenesis (clinical, psychological, neurophysiological, CT, etc.) with high heritability and correlations with liability to schizophrenia. 2nd stage provides an integration of these characteristics into predictors of schizophrenia (by means of multivariate genetic analysis).

A multidiscipline examination of 152 schizophrenic families revealed a number of informative characteristics of disease pathogenesis: clinical - disonthogenesis, severity of child and puberty crisis, abnormality of cognition and emotions, schizoid personality; psychological - parameters of emotion recognition, attention (stability, reversibility), volume of mediated memorization, level of anxiety; neurophysiological - slow, alpha, betha1 and betha2 rhythms in different cortical zones, P300 amplitude in right frontal, frontotemporal and parietal zones; CT - parameters of central parts and anterior horns of lateral ventricles in region of nucleus caudatus and parameters of frontal lobes.

Integration of these markers into complex predictors will allow not only to clarify genetic prognosis in schizophrenia but also to individualize it for a certain family.

P01.151

A CONTROLLED STUDY COMPARING "PSYCHOSE HALLUCINATOIRE CHRONIQUE" WITH TWO MATCHED GROUPS OF SCHIZOPHRENIA IS CONSISTENT WITH THE INDEPENDENCY OF THE TWO DIAGNOSIS

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The French concept of "Psychose Hallucinatoire Chronique" (PHC) is characterized by a late-onset psychosis, predominantly in females, with rich and frequent hallucinations, but almost no dissociative features. The diagnosis of PHC is generally classified in schizophrenic disorders (paranoid type) according to DSM-IV. The hypothesis that the PHC phenotype does belong to the schizophrenic spectrum has nevertheless never been tested.

We recruited and interviewed (D.I.G.S., SANS and SAPS) 30 females with PHC (LICET criteria), 30 eldery schizophrenic (DSM-IV criteria) female subjects (matched for age at interview) and 30 young schizophrenic female subjects (matched for duration of illness). We also used the FH-RDC interview for the assesment of relatives.

The PHC group has significantly less total negative symptoms ($p < 0.0001$), more hallucinations ($p = 0.01$), but less through disorder ($p < 0.0001$) and bizarre behavior ($p < 0.0005$) than the two comparison groups of schizophrenic patients. The patients with PHC (100%) had predominantly positive symptoms, compared the other groups (17% and 40%). 85% of PHC had episodic modifications or moderate deterioration, in opposite to the old and young schizophrenic group (0% and 16%, respectively). Furthermore, depression without psychotic features was found more frequently in the PHC group than in the two schizophrenic group ($p = 0.05$). Finally, we found that the two schizophrenic groups had more schizophrenic relatives than the PHC group ($p = 0.004$ and $p = 0.006$).

There is no definite argument that PHC and schizophrenia share common etiopathogenic factors. This first controlled study thus put to the fore clinical, epidemiological, and possibly etiopathogenic factors which distinguish these two concepts.

P01.152

COGNITIVE PERFORMANCE IN CHRONIC ALCOHOLISM RELATED TO APO E GENOTYPE

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Apolipoprotein E $\epsilon 4$ has been related to several conditions involving cognitive impairment including Alzheimer's disease, normal aging and cerebrovascular disease. It has not, however, been established whether this genotype is associated to alcoholism or its cognitive functioning. Genotypic distribution of 140 chronic alcoholic patients were compared to a non-alcoholic sample, and the cognitive performance of a subsample of 42 alcoholic subjects was assessed with standard neuropsychological tests. We found no differences in allele or genotype distributions of Apo E gene

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