P106

The prevalence of the metabolic syndrome in bipolar patients

M.P. Garcia-Portilla 1, P.A. Saiz 1, I. Menendez 1, P. Sierra 2, L. Livianos 2, A. Benabarre 3, J. Perez 4, A. Rodriguez 5, J. Valle 6, F. Sarramea 7, R. Fernandez-Villamor 8, J.M. Montes 9, M.J. Muniz 10, 1 University of Oviedo, Oviedo, Spain 2 Hospital La Fe, Valencia, Spain 3 Hospital Clinic, Barcelona, Spain 4 Hospital Santa Creu i Sant Pau, Barcelona, Spain 5 FORUM, Hospital del Mar, Barcelona, Spain 6 Hospital La Princesa, Madrid, Spain 7 CSM Andujar, Jaén, Spain 8 CSM La Macarena, Sevilla, Spain 9 CSM Torrejon, Madrid, Spain 10 CSM Usera, Madrid, Spain

Background and aims: Two studies to date have been published regarding the prevalence of the metabolic syndrome in bipolar patients. The unadjusted prevalence rates reported were 30% and 32%. The aim of this study was to evaluate the prevalence of the metabolic syndrome in a group of 142 bipolar patients from Spain.

Methods: Bipolar patients (ICD-10 criteria) from 11 centres in Spain were assessed cross-sectionally for metabolic syndrome according to the NCEP ATP III criteria.

Results: The mean age was 47.3 (SD 14.5), 51.1% were male. On average, patients were receiving 2.8 (SD 1.3) drugs for the treatment of their bipolar disorder. Ninety-one percent were receiving mood stabilizers, 63.4% antipsychotics and 29.6 antidepressants. Eighty-seven percent of the antipsychotics prescribed were atypicals. The overall prevalence of metabolic syndrome in our sample was 24.6%. Fifty-seven percent of the sample met the criterion for abdominal obesity, 37.4% for the criterion for hypertension (HTN), 36.4% for low HDL-cholesterol, 25.2% for high blood pressure and 12.5% for high fasting glucose. No statistically significant difference was found between with and without the metabolic syndrome for gender, illness status (acute versus in remission), CGI-S-BP scores and number of medications used. Patients taking mood stabilizers had significantly higher metabolic syndrome rates than patients taking one mood stabilizer and than patients without mood stabilizer treatment (40% versus 17.8% and 11.1% respectively, p < 0.02).

Conclusions: The prevalence of the metabolic syndrome in bipolar patients is high. It appears to be higher than that estimated for the Spanish general population.

P107

Investigation of child-family relations using family drawing in kindergarten children in Kaunas

V. Grigaliuniene 1, A. Gonak 2, A. Krisciukaityte 2, G. Stonyte 2. 1 Department of Psychiatry, Kaunas University of Medicine, Kaunas, Lithuania 2 Kaunas University of Medicine, Kaunas, Lithuania

Aim: Child — Family relations studied using family drawing method reveal risk factors of a future mental disorders development and other psychological problems in preschool children.

Methods: The pupils from 12 kindergarten (n=161, 85 boys, 76 girls, age 3-6 years) were tested during the “Teddy bear hospital” project carried out by Lithuanian Medical Students’ Association. The priority, accuracy of depiction and collocation of family members in the drawing were evaluated. Software package SPSS 10.0 was used for data processing.

Results: 31.1% of all children drew themselves as the first object. 56% of these children were in age 5-6 years. Possibly the self perception of the group is underdeveloped. 21.1% of all children didn’t drew themselves at all. That suspects their weak relation with the family. The mother and the child himself — were clearly emphasized in 60.3% of the drawings. 31.1% drew themselves and 29.2% - drew the mother as the first object. The tendency of the girls to identify themselves with the mother and for the boys — with the father was clearly expressed. Integral bodies (all big parts of the body) were depicted in 57.1% of all drawings. 63% of such drawings were made by elder children.

Conclusions: Family drawing test revealed underdeveloped self perception of investigated population. Stronger relation of girls with their mothers and boys with their fathers was clearly expressed. Age related development of intellectual level of the child was reflected by integral body drawing.

P108

Gender-related effect of parental age on age-at-onset in bipolar disorder

M. Grigoriou-Serbanescu 1, P. Wickramaratne 2, M.M. Noethen 3, 1 Psychiatric Genetics Research Unit, Alexandru Obregia Psychiatric Hospital, Bucharest, Romania 2 Columbia University, New York State Psychiatric Institute, New York, NY, USA 3 Institute of Medical Genetics, University of Bonn, Bonn, Germany

Aim: We investigated the effect of the parental age at child birth on the age-of-onset (AO) of bipolar disorder in a sample of 336 bipolar I patients directly interviewed with DIGS (DSM-IV-R criteria) in connection with the type of family history (FH): 1) no family history of major psychoses (sporadic); 2) only recurrent unipolar major depression (MDD-RUP); 3) bipolar disorder, schizoaffective disorders or schizophrenia (BP/SA/SCHIZ).

Method: Familial psychopathology data were collected through direct interview about 76% of first-degree relatives and through FH-method (FIGS-interview) about first- and second-degree relatives not available to direct investigation.

Results: Linear/logistic regressions showed a significant effect of the paternal age (PATAGE) on AO in offspring in the total sample (p=0.040); PATAGE was negatively correlated with AO in offspring when interacting with the proband gender (p=0.026) and FH-type (p=0.003). The division of the patients by sex revealed a significant association between PATAGE and AO only in females (p=0.003); the fathers of females with FH of MDD-RUP and the fathers of sporadic females were significantly older than the fathers of females with FH of BP/SA/SCHIZ. The first two groups generated the negative correlation appearing in the total sample. No correlation between PATAGE and proband AO was observed in the third group. Maternal age had no impact on AO in offspring.

Conclusion: The PATAGE effect on AO in bipolar offspring was related to female sex and FH-type and it was detectable in bipolar probands with no familial loading or with milder loading like the MDD-RUP.

P109

Differences in brain activation during working memory and facial recognition tasks in patients with bipolar disorder with lamotrigine monotherapy

M. Haldane 1, J. Jogia 1, A. Cobb 1, E. Kozuch 1, V. Kumari 2, S. Frangou 1. 1 Section of Neurobiology of Psychosis, Institute of Psychiatry, Kings College London, London, United Kingdom 2 Department of Psychology, Institute of Psychiatry, Kings College London, London, United Kingdom
**Abstract for poster sessions / European Psychiatry 22 (2007) S221–S341**

S253

**Background:** Bipolar Disorder (BD) is associated with impairment in emotional self-regulation and verbal working memory. Lamotrigine (LTG) is effective in the clinical management of BD.

**Objective:** To investigate whether treatment with LTG is associated with altered function within neural circuits subserving emotional processing and verbal working memory, in a BD1 sample.

**Method:** Functional Magnetic Resonance Imaging (fMRI) was used to explore blood oxygenation level-dependent (BOLD) response across the whole brain in 12 stable BD1 patients at baseline and following 12 weeks of LTG monotherapy. Stimuli were presented in a block-design while individuals performed a verbal working memory (N-back sequential letter) task and in an event-related fashion during an angry facial affect recognition task. Data was acquired using a 1.5-Tesla MRI scanner and analysed using SPM2. Group activation maps were generated for each task and for the drug-free and post-medication condition. A threshold of $p < 0.001$ was used. Effect of LTG on brain activation during tasks was explored using a random-effects, within-group comparison.

**Results:** In both tasks, LTG monotherapy was associated with increased BOLD signal when compared to baseline in a number of brain regions, mostly within the prefrontal cortex and cingulate gyrus. All foci of increased activation with LTG monotherapy were observed within cortical regions normally engaged in verbal working memory and facial affect processing.

**Conclusions:** LTG monotherapy in BD1 patients may enhance cortical function within neural circuits involved in memory and emotional self-regulation.

**Declaration:** This study was supported by an unrestricted GlaxoSmithKline grant.

**P110**

Transition from immediate-release methylphenidate (ir-MPH) to extended-release methylphenidate (OROS®-MPH) improves quality of life of patients with ADHD - a naturalistic study

L. Hargarter 1, M. Gerwe 1, J. Czekalla 1, F. Mattejat 2, 1 Medical and Scientific Affairs, Janssen-Cilag GmbH, Neuss, Germany 2Department of Child and Adolescent Psychiatry, Philipps-University, Marburg, Germany

**Objectives:** To investigate the effectiveness, tolerability, functionality and quality of life (QoL) under naturalistic conditions of once daily extended release methylphenidate (OROS®-MPH) in children and adolescents with attention-deficit/hyperactivity-disorder (ADHD), who had previously been treated with IR-MPH.

**Methods:** Interim analysis of an open-label, prospective, multicenter observational study (42603-ATT-4001) in children and adolescents aged 6-18 years with ADHD (DSM-VI). After transition patients were treated with OROS®-MPH (CONCERTA®) in flexible doses for 3 months. Primary documentation parameters were change in IOWA Conners’ parent rating scale, C-GAS, and inventory for the assessment of quality of life (ILK). Statistical analyses based on ITT population (LOCF, Wilcoxon-test for dependent samples).

**Results:** Data from 296 patients (mean age 10.4±2.5 years; 85% male) were documented. There was a marked reduction in symptomatology from 29±11 to 19±11 points at endpoint on the IOWA Conner’s parent rating scale ($p<0.0001$). QoL significantly improved from 17±4 to 20±4 points on the ILK parent rating scale ($p<0.0001$). Functionality showed a significant improvement of 12±14 points in C-GAS ($p<0.0001$). 19.3% of the patients had at least one adverse event (AE). In 2 patients serious AE were documented and were rated as unrelated to OROS®-MPH. Most frequent AEs were insomnia (5.7%) and nervousness (2.7%). Tolerability after transition to OROS®-MPH was rated as "good" or "very good" by 85% of the parents.

**Conclusion:** In this naturalistic study the transition to OROS®-MPH led to a significant improvement in clinical symptomatology, functionality and quality of life in patients with ADHD. OROS®-MPH showed to be safe and well tolerated.

**P111**

Teenagers suicidal behavior and psychosocial factors

A. Jaras, V. Arbaciauskas, D. Gudienë, O. Jankuviene, B. Burba, V. Grigaliūniene. Department of Psychiatry, Kaunas Medical University, Kaunas, Lithuania

**Objective:** Suicidal behavior becomes more and more actual problem in many countries. Lithuania is known as a country where suicides rate, especially among young people, is the highest in Europe.

The goal of this research was to establish the coherence between family, psychosocial characteristics and teenagers’ suicide behavior.

**Methods:** Two groups of teenagers from 14 to 17 were researched: the analyzed group (N=109) and the control group (N=218). To evaluate anamnesis, psychosocial factors of the researched teenagers, structural questionnaire, concluded by the authors was presented.

Seeking to establish the coherence between psychosocial factors and suicide behavior, the comparisons were made between the frequencies of this factor among 14-17 year old teenagers, having no suicide anamnesis and the teenagers who have tried to commit a suicide.

**Results:** The data analysis proved the statistically reliable evidence that in analyzed group both male and female teenagers, who have tried to commit a suicide, live in not full families ($p<0.001$). The frequent behavior in such families is addiction of both or one of the parents to alcohol ($p<0.001$); physical punishment is not an exception ($p<0.001$). The teenagers who have tried to commit a suicide indicated that they more often than the teenagers in the control group fell badly or even very badly among their contemporaries ($p<0.001$) and most of their time they spend alone ($p<0.001$).

**Conclusions:** According to the results, the psychosocial factors and teenagers suicidal behavior are related, but only they themself can’t predetermine the suicide.

**P112**

Executive function in Chinese children with bipolar disorder

W.D. Ji 1, H.F. Chang 1, 2, Y. Li 1, B.Y. Guo 3, D.L. Yang 1, 1 Changing Mental Health Center, Shanghai, China 2 The Affiliated Hospital of Bio-X Center of Shanghai Jiao Tong University, Shanghai, China 3 Jiading Mental Health Center, Shanghai, China

**Background and aims:** Impaired executive function has been proposed as a trait marker for adult bipolar disorder. However, similar impairments in children bipolar disorder have not been yet documented. Here, we assessed executive function in 21 children and adolescents with bipolar disorder.

**Methods:** 21 children and adolescents with bipolar disorder and 21 demographically matched healthy participants completed a standardized WCST test.