

"New Diagnostic Approaches in Psychiatry:
Relevance for Research and Practice in Europe"




EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS
OF PSYCHIATRY

JANUARY 24-28, 2009 - LISBON, PORTUGAL



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Cipralex - the power to tackle depression at its core

Leaving no one behind



Cipralex Abbreviated Prescribing Information. Presentation: "Cipralex", tablets containing 5, 10 and 20 mg escitalopram (as oxalate). Indications: Major depression. Generalised anxiety disorder. Panic disorder with or without agoraphobia. Social anxiety disorder. Obsessive compulsive disorder. Dosage: Usual dose 10 mg once daily. Maximum dose 20 mg/day. In the elderly (>65 years), in panic disorder patients and in patients with reduced hepatic function an initial dose of 5 mg/day is recommended. Caution in patients with severely reduced renal function. Not recommended in children

and adolescents (<18 years). When stopping treatment with escitalopram, the dose should be gradually reduced over a period of one or two weeks. Contraindications: Hypersensitivity to escitalopram. Concomitant treatment with non-selective MAOIs. Pregnancy and lactation: Careful consideration prior to use in pregnant women. Breast-feeding women should not be treated. Precautions: The special warnings and precautions which apply to the class of SSRIs. Drug interactions: Reversible, selective MAOIs. Selegiline (irreversible MAO-B inhibitor). Medicinal products lowering the

seizure threshold. St. John's Wort. Enzyme inhibitors (e.g. omeprazole and cimetidine) may require reduction of escitalopram dose. Drugs metabolised by enzymes CYP 2D6 or 2C19. Adverse events: Most frequent during first or second weeks, comprise the SSRI class adverse events, e.g. nausea, diarrhoea, and constipation. Overdosage: Doses between 400 and 800 mg of escitalopram alone have been taken without any severe symptoms. Consult full prescribing information before prescribing. H. Lundbeck A/S, Copenhagen, Denmark. Date of preparation: September 2008



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EUROPEAN PSYCHIATRIC ASSOCIATION
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WELCOME LETTER

Dear Colleagues,

The 17th European Congress of Psychiatry of the European Psychiatric Association (EPA), formerly known as the Association of European Psychiatrists (AEP), offers a high-quality, multidisciplinary, scientific programme that will provide attendees with a full review of the most important aspects of treatment in psychiatry and of the latest achievements in this field. Congress highlights include presentations by premier international psychiatry experts from around the world, industry education symposia by leading pharmaceutical companies, a four day young psychiatrists' programme, and 13 CME courses. We are sure that you will enjoy this exceptional scientific meeting and your stay in Lisbon.

Cyril Höschl
EPA President

Hans-Jürgen Möller
EPA President Elect
President of the Congress

Maria Luisa Figueira
Chairman of the
Local Organizing Committee



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EPA HISTORY

The European Psychiatric Association (EPA) was founded in Strasbourg in October 1983 by twelve French and German University Psychiatrists. The founding members of the EPA were: *Manfred Ackenheil* † and *Hans Hippus* from Munich, *Peter Berner* from Vienna, *Daniel Bobon* † from Liège, *Harst Dilling* from Lübeck, *Henri Dufour* from Marseille, *Werner Rein* and *Hans Heimann* † from Tübingen, *Pierre Pichot* from Paris, *Charles Pull* from Luxembourg, *Michel Patris* and *Léonard Singer* as the first EPA President, from Strasbourg.

The founding members of EPA wished to set up an association of psychiatrists in order to promote psychiatric research, improve and establish common standards regarding the treatment and the care of psychiatric patients in Europe and establish the criteria for a higher education in psychiatry on the European scale. In creating EPA, the founding members were also aiming to create a key mediator between practitioners and official authorities on matters relative to mental health policy. From the very beginning the objective was to lay the groundwork for an organisation gathering psychiatrists from all European countries. In 1989 EPA was officially granted a consultative status with the Council of Europe, followed by a participatory status in 2003.

EPA TODAY

The European Psychiatric Association is the largest international association of psychiatrists in Europe, with active members in as many as 57 countries including the international members. Its members include leading experts covering the interests of psychiatrists in academia and in practice.

EPA deals with psychiatry and its related disciplines and it focuses on the improvement of care for the mentally ill as well as on the development of professional excellence.

MISSION

The mission of EPA is to improve psychiatry and mental health care throughout Europe.



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ACTIVITIES

EPA accomplishes its mission through the following activities:

- Annual European Congress of Psychiatry
- Annual European Platform of Psychiatrists, aimed at developing and supporting concrete projects in European Psychiatry, along with national psychiatric societies in Europe
- Annual European Leaders Meeting in Psychiatry, a joint EPA-UEMS-WHO-WPA initiative since 2000, hosted by EPA every two years and gathering the most prominent psychiatrists in Europe
- The European Psychiatry journal, published in 8 issues per year, plus supplements
- 18 active sections, which collect, examine and disseminate information about their respective disciplines
- Organisation of CME courses across Europe
- Collaborative activities in partnership with international organisations working in the field of psychiatry and mental health care (ECNP, EBC, APA, UEMS, WPA etc.),
- A wide range of grants and prizes
- Regular EPA committee meetings in Europe, aiming at circulating information and implementing the action plan voted by the General Assembly composed of EPA members.

DATES OF THE NEXT EUROPEAN CONGRESS OF PSYCHIATRY

2010	18 th	Munich, 28 February to 2 March
2011	19 th	Vienna, 19 to 23 March
2012	20 th	Prague, 3 to 7 March

EPA ACADEMIA FOR EXCELLENCE IN EUROPEAN PSYCHIATRY

In line with its educational mission, EPA has been proposing CME courses both during the annual European Congress of Psychiatry and under the format of EPA Itinerant CME courses throughout the year in collaboration with national psychiatric societies tailored to the needs



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of professionals in the psychiatry and mental health field. The CME courses are lectured by top European course Directors, emphasizing learning experiences that actively involve participants and include an opportunity for informal exchange with the renowned faculty.

In consultation with National Psychiatric Associations, and after a thorough survey of the existing CME offer in Europe, EPA has decided to extend and enrich its educational programme under the EPA Academia for Excellence in European Psychiatry.

The mission of EPA Academia will be to promote access of the professionals in the field of psychiatry and mental health care to excellence in education, research and training, by setting a high priority on supporting them with:

Continuing medical education (CME)

Continuing professional development (CPD)

E-learning

Variety of grants, prizes and scholarships

THE EUROPEAN PLATFORM OF PSYCHIATRISTS

The European Platform of Psychiatrists initiated in 2007 is a long-term project for EPA and represents a major evolution for the association. The objective of the EPA European Platform of Psychiatrists is to develop a basis of exchange and collection of input from the national societies in the following areas: education, accreditation, curricula, research networking, new international classification system, European professional networking, mental health care systems and their transformation in Europe and to streamline the different efforts of all organisations, national and international, in order to build a spirit of belonging to the European Psychiatry community.

EPA SECTIONS

EPA has established sections that have their own steering committees. The 18 active EPA sections focus on the different subspecialties of psychiatry. Their mission is to collect and disseminate information, to establish working relations between individuals and with different national and international bodies working in the same field, and to achieve greater coordination. These Sections organise their own symposia under the aegis of EPA, and annual conferences in Europe.



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EPA SECTIONS (Cont.)

EPA Sections list:

Alcoholism and Drug Addiction
Child and Adolescent Psychiatry
Consultation Liaison Psychiatry
Cultural Psychiatry
Emergency Psychiatry
Epidemiology and Social Psychiatry
Forensic Psychiatry
Geriatric Psychiatry
Neuroimaging
Personality and Personality Disorders
Philosophy and Psychiatry
Prevention of Mental Disorders
Psychopathology
Psychopharmacology
Psychotherapy
Schizophrenia
Suicidology and Suicide Prevention
Women's Mental Health

EPA MEMBERSHIP

To become a member of EPA, you are invited to submit your application to the Secretary General. A standard application form can be downloaded from the EPA website.

CONTACT

EPA President 2009/2010
Professor Hans-Jürgen Möller
15, Avenue de la Liberté
67000 Strasbourg, France
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Fax: +33 3 8835 2973
E-mail: hq@europsy.net
Website: <http://www.europsy.net>



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COMMITTEES

EPA Executive Committee Members until January 24, 2009

Cyril Höschl, President
Hans Jürgen Möller, President Elect
Henning Sass, Past President
Marianne Kastrup, Secretary General
Philip Gorwood, Treasurer
Michael Musalek, Secretary for Sections

The election of the Executive Committee -mandate 2009/2010 - will be organized in Lisbon during the Board Meeting on January 24, 2009. The results of the elections will be announced at the General Assembly of EPA Members on January 26, 2009.

Board

J. Angst , Switzerland	S. Kasper , Austria
J. Beezhold , UK	M. Kastrup , Denmark
I. Bitter , Hungary	J-P. Lépine , France
J. Bobes , Spain	K. Mann , Germany
P. Boyer , France	H-J. Möller , Germany
W. Gaebel , Germany	M. Musalek , Austria
S. Galderisi , Italy	H. Sass , Germany
P. Gorwood , France	D. Wasserman , Sweden
C. Höschl , Czech Republic	G. Zalsman , Israel

Committee on Education

H. Sass, Germany
D. Bhugra, UK
W. Gaebel, Germany
J. Bobes, Spain
S. Kasper, Austria
J.P. Lépine, France
K. Treichel, Germany



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Core Organising Scientific Committee

M. Benoît , France	J.J. Lopez-Ibor , Spain
J. Bobes , Spain	H.J. Möller , Germany
P. Boyer , France	N. Müller , Germany
I. Calliess , Germany	M. Müsalem , Austria
W. Fleischacker , Austria	P. Robert , France
P. Gorwood , France	N. Sartorius , Switzerland
C. Höschl , Czech Republic	H. Sass , Germany
S. Kasper , Austria	J. Tiihonen , Finland

Local Organising Committee Lisbon 2009

M.L. Figueira, Lisbon - Chairperson

P. Varandas, Lisbon - Co-Chairperson

A. Vaz-Serra , Coimbra	J. Miguel Caldas de Almeida , Lisbon
A. Pacheco Palha , Porto	J. Relvas , Coimbra
A. Barbosa , Lisbon	J. Marques Teixeira , Porto
A. Coimbra de Matos , Lisbon	J. Cerejeira , Coimbra
C. Braz Saraiva , Coimbra	J. Luís Pio de Abreu , Coimbra
D. Sampaio , Lisbon	L. Câmara Pestana , Lisbon
F. Medeiros Paiva , Porto	L. Ferreira , Porto
F. Arriaga , Lisbon	M. Xavier , Lisbon

Local Organising Committee EPA Munich 2010

N. Müller, Munich – Chairperson

EPA CME Courses Faculty

P. Baumann , Switzerland	M. Sarchiapone , Italy
T. Grüttert , Germany	H. Stuart , Canada
M. Keren , Israel	M. Ventresca , UK
K.F. Mann , Germany	U. Volpe , Italy
P. Munk-Jørgensen , Denmark	D. Wasserman , Sweden
M. Musalem , Austria	G. Zalsman , Israel
W. Rössler , Switzerland	



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Sections Coordination

Alcoholism & Drug Addiction
Child and Adolescent Psychiatry
Consultation Liaison Psychiatry
Cultural Psychiatry
Emergency Psychiatry
Epidemiology & Social Psychiatry
Forensic Psychiatry
Geriatric Psychiatry
Neuroimaging
Personality and Personality Disorders
Philosophy and Psychiatry
Prevention of Mental Disorders
Psychopathology
Psychopharmacology
Psychotherapy
Schizophrenia
Suicidology and Suicide Prevention
Women's Mental Health

A. Heinz
F. Resch
A. Diefenbacher
A. Qureshi
P.M. Furlan
T. Becker
P. Cosyns
N. Tataru
P. McGuire
S. Herpertz
G. Stanghellini
W. Maier
M. Musalek
I. Bitter
F. Hohagen
W. Fleischhacker
D. Wasserman
A. Riecher

Young Psychiatrists Committee

I. Calliess, Germany – Chairperson
A. Fiorillo, Italy – Co-Chairperson
C. Hanon, France
M. Rojnic, Croatia
U. Volpe, Italy

Permanent Staff

Clarisse Altés-Sroussi (Goussaud), Administrator
Caroline Martin, Project Manager
Bénédicte Jeannequin, Project Officer
Marika Ylitalo, Communication Officer



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ACKNOWLEDGEMENTS

We wish to express our gratitude to the following companies who through their generosity have helped to make the Congress possible

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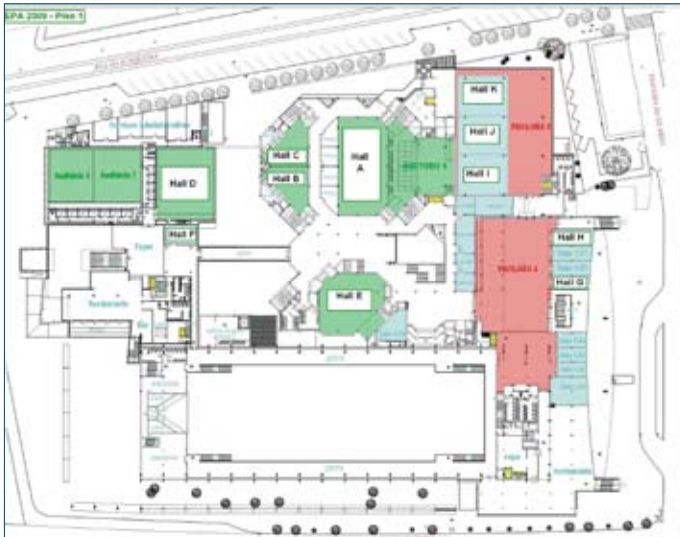
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LAYOUT OF THE BUILDING





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EPA CME COURSES PROGRAMME

SATURDAY, JANUARY 24, 2009

- 14:30-18:00 **C01 – CME Course:** **Hall B**
INFANT PSYCHIATRY, ITS RELEVANCE FOR
ADULT PSYCHIATRY
- 14:30-18:00 **C02– CME Course:** **Hall C**
PROBLEM SOLVING IN
PSYCHOPHARMACOTHERAPY USING
PHARMACOKINETIC AND PHARMACOGENETIC
TESTS
- 14:30-18:00 **C07 – CME Course:** **Hall J**
SUICIDE RISK ASSESSMENT

SUNDAY, JANUARY 25, 2009

- 14:30-18:00 **C10 – CME Course:** **Hall F**
INTERPERSONAL PSYCHOTHERAPY OF DEPRESSION
- 14:30-18:00 **C05 – CME Course:** **Hall M**
SUICIDE AND RISK MANAGEMENT IN DEPRESSED
PEDIATRIC PATIENTS

MONDAY, JANUARY 26, 2009

- 14:30-18:00 **C06 – CME Course:** **Hall J**
EMERGING DIFFICULTIES AND MANAGING
STRATEGIES FOR EARLY CAREER PSYCHIATRISTS
- 14:30-18:00 **C12 – CME Course:** **Hall M**
FIGHTING STIGMA ON A LIMITED BUDGET
- 14:30-18:00 **C13 – CME Course:** **Hall N**
TAKING CARE OF OURSELVES: MANAGING STRESS,
PREVENTING BURNOUT



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TUESDAY, JANUARY 27, 2009

- 14:30-18:00 **C14 – CME Course:** **Hall F**
DELUSIONS - DIAGNOSIS AND TREATMENT
- 14:30-18:00 **C03 – CME Course:** **Hall L**
ALCOHOLISM: BASICS, NEW INSIGHTS, NEW TREATMENTS
- 14:30-18:00 **C16 – CME Course:** **Hall M**
SUCCESSFUL STRATEGIES FOR LEADING, NETWORKING AND CHANGE MANAGEMENT
- 14:30-18:00 **C17 – CME Course:** **Hall N**
WRITING AND PUBLISHING A SCIENTIFIC PAPER

WEDNESDAY, JANUARY 28, 2009

- 08:30-12:00 **C18 – CME Course:** **Hall J**
TREATMENT OF SUICIDAL BEHAVIOURS



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YOUNG PSYCHIATRISTS' PROGRAMME

Following the great success of the Young Psychiatrists' Programme at the last 4 annual congresses, the EPA decided to continue this initiative in Lisbon for 2009.

The EPA 2009 Young Psychiatrists Programme will focus on **European identity in Psychiatry: dream or reality for European Young Psychiatrists and Trainees?**

The Young Psychiatrists Lounge is a meeting point for Young Psychiatrists with possibilities for networking and recruiting. The lounge will also host specific events designed for Young Psychiatrists.

The lounge is located in the exhibition area and is open as follows:

Sunday, January 25	08:00 - 17:30
Monday, January 26	08:00 - 18:30
Tuesday, January 27	08:00 - 17:30

The Meet the Expert sessions are conceptualized as informal discussions in a relaxed atmosphere to guarantee a maximum of free interaction with the audience. Seats are limited.

Meet the Expert Speakers

Meet the Expert 1 - Dinesh Bhugra
Sunday, January 25, 09:30 - 10:30

Introduction of Dinesh Bhugra

Professor Dinesh Bhugra is Professor of Mental Health and Cultural Diversity at the Institute of Psychiatry, King's College London and an Honorary Consultant at the Maudsley Hospital. In July 2008 he was elected President of the Royal College of Psychiatrists. He has authored/co-authored over 300 scientific papers, chapters and 19 books. His recent volumes are Culture and Self Harm, Handbook of Psychiatry for South Asia, Textbook of Cultural Psychiatry and Management for Psychiatrists. His most recent monograph, Mad Tales from Bollywood: Portrayal of Madness in Conventional Hindi Cinema, was published in 2006.



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Meet the Expert 2 - Marianne Kastrup
Monday, January 26, 12:00 - 13:00

Introduction of Marianne Kastrup

Dr. Kastrup's Advisory Positions: 1987-today Member Expert Advisory Panel on Mental Health, WHO. 1993-today Expert advisor, European Council Committee for the Prevention of Torture, Inhuman or Degrading Treatment and Punishment.

Dr. Kastrup's activities related to EPA: 1992-today Member Board of European Psychiatric Association. 2003-today Secretary General, European Psychiatric Association. Professor Kastrup's publications: Author/co-author of more than 90 peer-review articles. Editor/author of more than 15 books. Author of more than 60 book-chapters. Author of more than 60 technical reports/other publications. More than 250 international abstracts.

Meet the Expert 3 - Silvana Galderisi
Tuesday, January 27, 12:00 - 13:00

Introduction of Silvana Galderisi

Faculty and Clinical Positions: Staff Psychiatrist at the Dept. of Psychiatry of the First Medical School of the University of Naples since 1982. Visiting Professor of Neuropsychology at the School of Specialization in Psychiatry of the University of L'Aquila (Italy) from 1987 to 1990. Visiting Professor at the Institute of Higher Nervous Activity and Neurophysiology of the Academy of Sciences of Moscow in 1990. Professor of Psychophysiology at the School of Specialization in Psychiatry of the University of Naples SUN from 1993 to 2002. Associate Professor of Psychiatry at the University of Naples SUN since 1999. Professor of Cognitive Psychotherapy at the School of Specialization in Psychiatry of the University of Naples SUN since 2003. Director of the School of Specialization in Psychiatry of the University of Naples SUN since 2003. Professor of Psychiatry at the University of Naples SUN since 2006. EPA Board member since 2007.

Further speaker details are available on the Congress website.



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The programme includes the following sessions which will take place at the Young Psychiatrists Lounge, unless indicated otherwise.

SUNDAY, JANUARY 25, 2009

- 09:30-10:30 **YP01** - Meet the Expert 1: Dinesh Bhugra
- 04:30-16:00 **YP04** - YP Symposium: Young Psychiatrists Symposium: Leadership in Psychiatry
- 16:30-17:30 **YP03** - Happy Hour Session 1: How To Start A Successful Research Career

MONDAY, JANUARY 26, 2009

- 13:30-14:30 **YP05** - Meet the Expert 2: Marianne Kastrup
- 14:30-16:00 **YP06** - Happy Hour Session 2: Why Choose Psychiatry as a Medical Specialty?
- 16:30-18:30 **YP07** - Interactive Clinical Session "Updates in the Treatment of Depression"

TUESDAY, JANUARY 27, 2009

- 12:00-13:00 **YP09** - Meet the Expert 3: Silvana Galderisi
- 13:00-14:30 **YP10** - Young Psychiatrists Symposium "European Identity for Young Psychiatrists and Trainees in Europe: Dream or Reality?"
- 16:30-17:30 **YP11** - Happy Hour Session 3: Publication Strategies for Young Researchers



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SECTION SYMPOSIA AND WORKSHOPS

SUNDAY, JANUARY 25, 2009

S04 - Symposium: **Hall L**

IMMIGRATION AND MENTAL HEALTH TREATMENT: TRENDS AND
NEW DEVELOPMENTS
(Organised by the Cultural Psychiatry Section)

S05 - Symposium: **Hall M**

ADDICTION AND PSYCHIATRIC CO-MORBIDITY: NEW INSIGHTS
INTO NEW CHALLENGES
(Organised by the Alcoholism and Drug Addiction Section)

S06 – Symposium: **Hall N**

AN UPDATE ON CANNABIS AND PSYCHOSIS
(Organised by the Epidemiology and Social Psychiatry Section)

S09 – Symposium: **Hall B**

BEYOND FAMILY BURDEN - THE COMPLEXITIES OF CARER ROLES
(Organised by the Women's Mental Health Section)

S10 – Symposium: **Hall K**

BAD OR MAD IN PSYCHIATRY
(Organised by the Psychopathology Section)

S11 - Symposium: **Hall N**

BIPOLAR DISORDER: RISK FACTORS FOR COURSE AND
PREVENTION STRATEGIES
(Organised by the Epidemiology and Social Psychiatry Section)

S12 - Symposium: **Hall B**

CULTURE AND IMMIGRATION IN THE DIAGNOSTIC PROCESS
(Organised by the Cultural Psychiatry Section)



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SECTION SYMPOSIA AND WORKSHOPS (Cont.)

S14 - Symposium: **Hall D**

COGNITION IN SCHIZOPHRENIA: A FOCUS ON FIRST EPISODE PATIENTS

(Organised by the Schizophrenia Section)

S15 - Symposium: **Hall J**

CLINICAL DEVELOPMENT OF ANTIDEPRESSIVE DRUGS

(Organised by the Psychopharmacology Section)

S17 - Symposium: **Hall N**

CALCIUM DEPENDENT SIGNALING PATHWAYS IN COGNITION AND EMOTION

(Organised by the Psychopharmacology Section)

S19 - Symposium: **Hall H**

EARLY PHASES OF MENTAL DISORDERS IN ADOLESCENCE AND YOUNG ADULTHOOD

(Organised by the Child and Adolescent Psychiatry Section)

W03 - Workshop: **Hall H**

TREATING CHRONIC DEPRESSION WITH COGNITIVE BEHAVIOURAL ANALYSIS SYSTEM PSYCHOTHERAPY

(Organised by the Psychotherapy Section)

W04 - Workshop: **Hall C**

CRISIS INTERVENTION WITH BORDERLINE PATIENTS: FROM PSYCHOBIOLOGY TO COST-EFFECTIVE TREATMENT

(Organised by the Personality and Personality Disorders Section)

MONDAY, JANUARY 26, 2009

S18 – Symposium: **Hall E**

ADVANCING PSYCHOTHERAPY IN PERSONALITY DISORDERS

(Organised by the Personality and Personality Disorders Section)



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S20 - Symposium: **Hall N**

DETERMINATIONS OF DRUG CONCENTRATIONS – HOW TO
MAKE THE MOST
(Organised by the Psychopharmacology Section)

S25 - Symposium: **Hall E**

FUNCTIONAL IMAGING IN COGNITIVE DECLINE AND DEMENTIA
(Organised by the Neuroimaging Section)

S30 - Symposium: **Hall A**

INVOLUNTARY TREATMENT AND GUARDIANSHIP OF THE
ELDERLY: VARIATIONS IN EUROPE
(Organised by the Geriatric Psychiatry Section)

S33 - Symposium: **Hall C**

LIMBIC DETERMINATIONS & PSYCHIATRY
(Organised by the Neuroimaging Section)

S36 - Symposium: **Hall B**

MENTAL HEALTH AND DEAFNESS
(Organised by the Cultural Psychiatry Section)

W08 – Workshop 8: **Hall H**

THE NEED FOR SOCIAL COGNITION REHABILITATION IN
BIPOLAR DISORDER
(Organised by the Psychotherapy Section)

W10 - Workshop: **Hall H**

POSITIVE THERAPY: FOCUSING ON RESILIENCY AND
SELF-DETERMINATION
(Organised by the Psychotherapy Section)

W12 - Workshop: **Hall L**

HOW TO REVIEW A SCIENTIFIC PAPER
(Organised by the Epidemiology and Social Psychiatry Section)



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TUESDAY, JANUARY 27, 2009

S37 – Symposium:

Hall E

OAP ACTUAL PROBLEMS IN EUROPEAN COUNTRIES
(Organised by the Geriatric Psychiatry Section)

S38 - Symposium:

Hall F

NEGLECTED AREAS OF AGEING
(Organised by the Geriatric Psychiatry Section)

S39 - Symposium:

Hall F

NEUROFUNCTIONAL AND NEUROPHARMACO-LOGICAL
EFFECTS OF CANNABIS: INTERACTION WITH PSYCHOSIS
(Organised by the Neuroimaging Section)

S40 - Symposium:

Hall K

NEW DEVELOPMENTS IN CONSULTATION-LIAISON
PSYCHIATRY IN EUROPE
(Organised by the Consultation Liaison Psychiatry Section)

S42 - Symposium:

Hall L

NEW EVIDENCE-BASED DISORDER TAILORED PSYCHOTHERAPIES
(Organised by the Psychotherapy Section)

S46 - Symposium:

Hall C

PARENTAL DEPRESSION ON POSTNATAL PERIOD AND CHILD
OUTCOMES: LONGITUDINAL STUDIES
(Organised by the Women's Mental Health Section)

S47 - Symposium:

Hall D

PERSPECTIVES OF OUTPATIENT TREATMENT IN PEOPLE WITH
SEVERE MENTAL DISORDERS
(Organised by the Epidemiology and Social Psychiatry Section)



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S48 - Symposium:

Hall E

POLYMEDICATION IN ELDERLY PSYCHIATRIC PATIENTS
SUFFERING FROM COMORBIDITIES
(Organised by the Geriatric Psychiatry Section)

S53 - Symposium:

Hall N

TRAUMA, STRESS AND GENETIC IN SUICIDE
(Organised by the Suicidology and Suicide Prevention)

S57 – Symposium:

Hall C

THE FORGOTTEN PARTY: THE ROLE OF VICTIMS IN FORENSIC
PSYCHIATRY
(Organised by the Forensic Psychiatry Section)

S60 - Symposium:

Hall K

SAVING YOUNG LIVES IN EUROPE
(Organised by the Suicidology and Suicide Prevention)

S62 - Symposium:

Hall I

SPECIAL ISSUES IN ACOHOLISM TREATMENT
(Jointly organised by the Alcoholism and Drug Addiction Section and
International Society of Addiction Medicine (ISAM))

WEDNESDAY, JANUARY 28, 2009

S70 - Symposium:

Hall K

THE ELDERLY AND FORENSIC PSYCHIATRY
(Organised by the Forensic Psychiatry Section)

W15 - Workshop:

Hall K

HOW TO READ A SCIENTIFIC PAPER
(Organised by the Epidemiology and Social Psychiatry Section)



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

SATELLITE SYMPOSIA

SUNDAY, JANUARY 25, 2009

13:00-14:30 **SS01 - Satellite Symposium:** **Hall A**

IMPROVING THE OUTCOMES OF PSYCHIATRY
RELATED METABOLIC CONDITIONS

Sponsored by Pfizer 

MONDAY, JANUARY 26, 2009

13:00-14:30 **SS02- Satellite Symposium:** **Hall A**

A ROAD MAP TO SUSTAINABLE TREATMENT PLANS:
INTEGRATING PATIENT'S PERSPECTIVE,
PHARMACOLOGY, AND CLINICAL RESEARCH
EVIDENCE

Sponsored by  Bristol-Myers Squibb  Otsuka Otsuka Pharmaceutical Europe Ltd.

SESSIONS ORGANISED IN COOPERATION WITH OTHER ORGANISATIONS

SUNDAY, JANUARY 25, 2009

15:00-16:00 **PF02 EPA/ESC/EASD Presidential Forum** **Hall J**

MONDAY, JANUARY 26, 2009

08:30-10:00 **JS02: ECNP / EPA Joint Workshop:** **Hall D**
JOINT SYMPOSIUM ECNP-EPA: USE AND MISUSE
OF SECOND GENERATION ANTIPSYCHOTICS IN
ANXIETY AND BIPOLAR DISORDERS

14:30-16:00 **JS01: Pan-European Studies** **Hall C**



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

EPA FORMAL AND ADMINISTRATIVE MEETINGS

FRIDAY, JANUARY 23, 2009

13:00-18:00 3rd European Platform
of Psychiatrists **Hall I**

SATURDAY, JANUARY 24, 2009

09:00-11:00 European Task Force for Psychiatry **Hall G**

13:00-17:00 EPA Board Meeting **Hall G**

SUNDAY, JANUARY 25, 2009

11:00-13:00 Committee of Education Meeting /
Academia Task Force Meeting **Hall G**

13:00-14:30 EPA Section Coordination Meeting **Hall G**

MONDAY, JANUARY 26, 2009

10:30-11:30 Young Psychiatrists Committee Meeting **Hall G**

12:00-13:30 Alumni-Mentors' Luncheon **Restaurant on 1st Floor**

18:30-20:00 EPA Extraordinary and General Assemblies **Hall I**

20:00-21:30 EPA Membership Roundtable **Restaurant on 1st Floor**

TUESDAY, JANUARY 27, 2009

08:30-10:00 COSC Meeting **Hall G**

16:30-18:00 Guidance Steering Group **Hall G**

WEDNESDAY, JANUARY 28, 2009

08:00-11:00 Executive Committee Meeting **Hall G**



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

EPA SECTIONS COMMITTEE MEETINGS

Additional meetings reserved after date of printing will be announced on the message board.

SATURDAY, JANUARY 24, 2009

08:30-09:30 Epidemiology and Social Psychiatry Section **Hall H**

14:30-15:30 Alcoholism and Drug Addiction Section **Hall H**

SUNDAY, JANUARY 25, 2009

09:30-10:30 Psychopathology Section **Hall G**

15:00-16:00 Cultural Psychiatry Section **Hall G**

16:30-17:30 Women's Mental Health Section **Hall G**

MONDAY, JANUARY 26, 2009

08:30-9:30 Suicidology and Suicide Prevention Section **Hall G**

13:00-14:00 Child and Adolescent Psychiatry Section **Hall G**

14:30-15:30 Philosophy and Psychiatry Section **Hall G**

16:30-17:30 Psychopharmacology Section **Hall G**

TUESDAY, JANUARY 27, 2009

11:00-12:00 Forensic Section **Hall G**

12:30-13:30 Consultation Liaison Psychiatry Section **Hall G**



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

INFORMATION FOR PRESENTERS

ORAL PRESENTATIONS

A Speakers' Ready Room sponsored by  Bristol-Myers Squibb  Otsuka Otsuka Pharmaceutical Europe Ltd. will be available on the 1st floor for the duration of the Congress.

Data presentation:

If using a Powerpoint (or any other computer) presentation, please note you need to bring it on a CD, a DVD or on a "disk on key" Memory stick (using the USB port in the computer) and load it on one of the congress' computers in the Speakers' Ready Room, at least 1 hour before the start of the session. You may supply your own laptop computer as a back-up. If combining video films with PowerPoint, please make sure to check it in the session hall where your lecture is taking place during a coffee or lunch break prior to your session, at least 30 minutes before the start of the session - even after checking it in the Speakers' Ready Room. Please note that the congress' computers in the session halls are being supplied with Windows XP and Office 2003.

Important note for Macintosh users

If using a Macintosh laptop computer, please note that you need to supply your own, confirm that it has a VGA socket for external signal and come to check it first in the Speakers' Ready Room as soon as you arrive and later on in the session hall where your lecture is taking place during the coffee or lunch break prior to your session, at least 30 minutes before the start of the session. Please note that VHS Video projection, 35 mm' slide projection and Overhead projection (projection of transparencies) will not be available.

POSTERS

Posters will be on display on three days: Sunday, January 25, Monday, January 26 and Tuesday, January 27 and will be changed daily. Your poster should be displayed as per the date and the number in the programme. Posters are to be mounted from 08:00 on your assigned day. Please remove your poster at the conclusion of sessions on your assigned day. The Organising Committee will not be responsible for posters that are not removed on time.

Poster presenters are requested to be present at their designated poster board(s) to answer questions during breaks.

BEST POSTER PRIZES

Poster prizes will be allocated per topic, depending on the decision of the poster chairpersons.

Each winner will receive a prize of €300.



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

EUROPEWIDE ACCREDITATION OF THE CONGRESS

(also recognized by the APA)

The 17th European Congress of Psychiatry is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) to provide the following CME activity for medical specialists. The EACCME is an institution of the European Union of Medical Specialists (UEMS) www.uems.net.

The 17th European Congress of Psychiatry is designated for a maximum of 21 hours of European external CME credits. Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.

EACCME credits are recognized by the American Medical Association towards the Physician's Recognition Award (PRA). To convert EACCME credit to AMA PRA, category 1 credit, contact AMA.



Meet
the editors of
**European
Psychiatry**
for any questions
or proposals

Hall B

From 12.00-13.00 / 25 and 27 January 2008



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

EPA RESEARCH PRIZE WINNERS

The European Psychiatric Association has awarded four Research Prizes of €2,500 each to Young Psychiatrists working in Europe, who published the best scientific papers in 2008. Research Prizes for 2009 have been awarded to the following Young Psychiatrists:

- **Paolo FUSAR POLI** (UK), for his paper *"Distinct effects of D9-Tetrahydrocannabinol and Cannabidiol on neural activation during emotional processing"*, published in Archives of General Psychiatry (2008)
- **Fabrice JOLLANT** (France), for his paper *"Orbitofrontal cortex response to angry faces in men with histories of suicide attempts"*, published in the American Journal of Psychiatry (2008)
- **Fiammetta COSCI** (Italy), for her paper *"Nicotine dependence, psychological distress and personality traits as possible predictors of smoking cessation. Result of a double-blind study with nicotine patch"*, published in Addictive Behaviors (2008)
- **Katherine JOHNSON** (Ireland), for her paper *"Absence of the 7-repeat variant of DRD4 VNTR is associated with drifting sustained attention in children"*, published in the American Journal of Medical Genetics (2008)

BMS Prevention Award in Psychiatry

The winner of the BMS Prevention Award in Psychiatry will be awarded with €20,000 for scientific purposes at his or her institution and is invited to present the award lecture during the European Congress of Psychiatry.

The winner of the European BMS Prevention Award in Psychiatry 2009 is: **Philip MCGUIRE**, Institute of Psychiatry, King's College London, UK, awarded for his work "Factors that predict the onset of psychosis in people with prodromal symptoms".



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

SCHOLARSHIP PROGRAMME FOR YOUNG PSYCHIATRISTS AND TRAINEES

The Scholarship Programme includes

Free congress entrance to the 17th European Congress of Psychiatry, travel expenses, hotel accommodation for 4 nights, free entry to 1 CME course and 1 year of free EPA membership.

Who is eligible?

Young psychiatrists who are either trainees or within 5 years of completion of specialist training in psychiatry and who are working in countries that form part of the World Health Organisation Europe region.

The scholarship has been awarded to the following young psychiatrists and trainees:

Olivier ANDLAUER, France

Liliana CORREIA de CASTRO, Portugal

Silvia FERRARI, Italy

Lucie NAWKOVA, Czech Republic

Christian WOLF, Germany

Selection Committee in 2008-2009

Cyril Höschl (EPA President); Henning Sass (EPA Vice President, Chair Education Committee), Maria Luisa Figueira (EPA President Local Organising Committee); Iris Calliess, Kai Treichel, Cecile Hanon, Andrea Fiorillo, Julian Beezhold (EPA Young Psychiatrist Committee members).



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

GENERAL INFORMATION

LOCATION

Centro De Congressos De Lisboa
Praça Das Indústrias
Lisbon 1300-307, Portugal
Tel: +351 21 365 20 00
Fax: +351 21 363 94 50
Website: www.lisboacc.pt

LANGUAGE

English is the official language of the Congress.

REGISTRATION DESKS

Registration desks will be situated at the Centro De Congressos for the duration of the Congress and will operate at the following times:

Saturday, January 24	07:30-20:30
Sunday, January 25	07:30-18:00
Monday, January 26	08:00-18:00
Tuesday, January 27	08:00-18:00
Wednesday, January 28	08:00-12:00

NAME BADGE

You are kindly requested to wear your name badge during all Congress sessions and events.

EXHIBITION OPENING HOURS

The exhibition will be open as follows:

Saturday, January 24	18:00-20:00
Sunday, January 25	09:30-16:30
Monday, January 26	09:30-16:30
Tuesday, January 27	09:30-16:30

EPA will have an exhibition booth that will operate during these hours.



**EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY**

GENERAL INFORMATION (Cont.)

CME COURSES

CME courses will take place throughout the Congress. Please present your Course ticket at the entrance of the appropriate halls. Registration for the CME Courses should be arranged prior to the start of the course, at the Registration Desk.

Participants in Courses are requested to complete the Evaluation Form at the conclusion of the Course and hand it to the hostess on-site.

ART EXHIBITION

Today when we are constantly reminded of the dangers of thinking in exclusive terms, art affords us a model of dialogue in which the other is accepted as an equal conversation partner. Art fosters cooperative communication in which dignity and individuality of a mental health patient may be reaffirmed. At the same time, art allows for critical distance, retrospection, and vast opportunities for individual choice, and thus may be conducive to an improved self-image and self-esteem. Please visit the exhibition Art Against Stigma: Social Experience of Illness in the exhibition area.

INTERNET ZONE

Free internet and e-mail facilities are located in the exhibition area and are available during exhibition hours. Please be considerate of fellow participants when using the facilities.

CERTIFICATE OF ATTENDANCE

The certificate of attendance is included in your participant kit.

CLIMATE

The weather in Lisbon in January is cool with a high chance of precipitation. Average high temperature is 14 degrees C°/58 degrees F°, with the average low at 8 degrees C°/47 degrees F°.

CLOTHING

During the entire congress, attire will be casual.



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

SMOKING POLICY

Smoking is prohibited at all times in meeting halls, exhibit halls and rest rooms. Your compliance is appreciated.

CONGRESS ORGANISERS

KENES *International*
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GLOBAL CONGRESS ORGANIZERS AND
ASSOCIATION MANAGEMENT SERVICES

17th European Congress of Psychiatry - EPA
1-3, Rue de Chantepoulet, PO Box 1726
CH-1211 Geneva 1
Switzerland
Tel: +41 22 908 0488
Fax: +41 22 732 2850
E-mail: epa@kenes.com
Website: www.kenes.com/epa





EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

ADDITIONAL ACTIVITIES

SATURDAY, JANUARY 24, 2009

Starting time: 18:10

Opening Ceremony

Hall A



Welcome Words

Professor Maria Luisa Figueira, Local Organizing Committee
Mayor of Lisbon, Drº António Costa



Changes of psychiatric classification and diagnosis in the
past and future, exemplified by the case history of the
composer Robert Schumann

Hans-Jürgen Möller, EPA President Elect



Sonata by Schumann to illustrate Schumann's life performed by
Patrice Boyer, EPA COSC Member



EPA Scholarship Awards Presented by Young Psychiatrist Committee



Awards Announcement for EPA 2009 Research Prizes



BMS Award Announcement and Lecture



Invitation to Welcome Buffet Reception in Exhibition area by
Hans-Jürgen Möller, EPA President



The full programme will be provided at the entrance
to Hall A.



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

Welcome Reception following Opening Ceremony
Exhibition Area



MONDAY, JANUARY 26, 2009

20:00

EPA Membership Round Table
(Following EPA Assemblies)

Restaurant on 1st floor

Social Programme reserved for EPA Members.
All EPA Members are invited to meet fellow EPA colleagues of the association in a friendly atmosphere during dinner.
This is the occasion to influence the EPA future by discussing the activities of the association (topics will be proposed for your review).

20:30

Young Psychiatrists Network Gathering

For further information please approach the Registration Desk.



TUESDAY, JANUARY 27, 2009

20:30-22:30

Presidential Dinner - Optional

Agronomy Institute

You are welcome to purchase a ticket to the EPA Presidential Dinner at Lisbon's famous Agronomy Institute

Please approach the registration desk to purchase your ticket.
Tickets are sold at €85 per person. Seats are limited and will be sold on a 'first come, first serve' basis.



SCIENTIFIC PROGRAMME
SATURDAY, JANUARY 24, 2009



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For more information visit www.wiley.com



SCIENTIFIC PROGRAMME
SUNDAY, JANUARY 25, 2009





SCIENTIFIC PROGRAMME
MONDAY, JANUARY 26, 2009



Look for



Enduring Mental

&

Physical Health

at Booth number 16

Exhibition Hall

**and at Pfizer's Satellite Symposium
'Improving the Outcomes of Psychiatry Related
Metabolic Conditions'**

Hall A

(Sunday January 25th 2009, 1pm – 2.30pm)





SCIENTIFIC PROGRAMME
TUESDAY, JANUARY 27, 2009





SCIENTIFIC PROGRAMME

WEDNESDAY, JANUARY 28, 2009



Where dementia symptoms blend in



A diagnosis stands out

DaTSCAN, helping you make a more accurate differential diagnosis between probable dementia with Lewy bodies and Alzheimer's disease.



DaTSCAN™
IOFLUPANE (¹²³I)

PRESCRIBING INFORMATION DaTSCAN™ ioflupane (¹²³I)

Please refer to full national Summary of Product Characteristics (SPC) before prescribing. Indications and approvals may vary in different countries. Further information available on request. **PRESENTATION** Vials containing 185 MBq or 370 MBq ioflupane (¹²³I) at reference time. **INDICATIONS** Detecting loss of functional dopaminergic neuron terminals in the striatum. i) in patients with clinically uncertain Parkinsonian Syndromes in order to help differentiate Essential Tremor from Parkinsonian Syndromes related to idiopathic Parkinson's Disease (PD), Multiple System Atrophy (MSA), Progressive Supranuclear Palsy (PSP). DaTSCAN is unable to discriminate between PD, MSA and PSP. ii) to help differentiate probable dementia with Lewy bodies (DLB) from Alzheimer's disease. DaTSCAN is unable to discriminate between DLB and Parkinson's disease dementia. **DOSAGE AND METHOD OF ADMINISTRATION** DaTSCAN is a 5% (v/v) ethanolic solution for intravenous injection and should be used without dilution. Clinical efficiency has been demonstrated across the range of 111-185 MBq; do not use outside this range. Slow intravenous injection (15-20 seconds) via arm vein is recommended. Appropriate thyroid blocking treatment must be given prior to and post injection of DaTSCAN. SPECT imaging should take place 3-6 hours after injection of DaTSCAN. DaTSCAN is not recommended for use in children or adolescents. For use in patients referred by physicians experienced in the management of movement disorders/dementia. **CONTRAINDICATIONS** Pregnancy and hypersensitivity to the active substance or any of the excipients. **WARNINGS AND PRECAUTIONS** Radiopharmaceuticals should only be used by qualified personnel with appropriate government authorisation and should be prepared using aseptic and radiological precautions. DaTSCAN is not recommended in moderate to severe renal or hepatic impairment. Contains 5% volume ethanol, up to 197mg per dose, harmful for those suffering from alcoholism. To be taken into account in high-risk patients e.g. liver disease or epilepsy. **INTERACTIONS** Consider current medication. Medicines that bind to the dopamine transporter may interfere with diagnosis; these include amphetamine, benztropine, bupropion, cocaine, mazindol, methylphenidate, phentermine and sertraline. Drugs shown during

clinical trials not to interfere with DaTSCAN imaging include amantadine, trihexyphenidyl, budipine, levodopa, metoprolol, primidone, propranolol and selegiline. Dopamine agonists and antagonists acting on the postsynaptic dopamine receptors are not expected to interfere with DaTSCAN imaging and can therefore be continued if desired. **PREGNANCY AND LACTATION** Contraindicated in pregnancy. Information should be sought about pregnancy from women of child bearing potential. A woman who has missed her period should be assumed to be pregnant. If administration to a breast feeding woman is necessary, substitute formula feeding for breast feeding for 3 days. **UNDESIRABLE EFFECTS** No serious adverse effects have been reported. Common side effects include headache, vertigo and increased appetite and formication. Exposure to ionising radiation is linked with cancer induction and a potential for hereditary defects and must be kept as low as reasonably achievable. Intense pain on injection has been reported uncommonly following administration into small veins. **DOSIMETRY** Effective dose from 185 MBq is 4.35 mSv. **OVERDOSE** Encourage frequent micturition and defecation. **MARKETING AUTHORISATION HOLDER** GE Healthcare Limited, Amersham Place, Little Chalfont, Buckinghamshire, HP7 9NA, UK. **CLASSIFICATION FOR SUPPLY** Subject to medical prescription. **MARKETING AUTHORISATION NUMBERS** EU/1/00/135/001 (2.5ml) and EU/1/00/135/002 (5.0ml). **DATE OF REVISION OF TEXT** 4 February 2008. **UK Price** £391/185MBq.

Adverse events should be reported. Reporting forms and information can be found at www.yellowcard.gov.uk. Adverse events should also be reported to GE Healthcare.

GE Healthcare Limited, Amersham Place, Little Chalfont, Buckinghamshire, England HP7 9NA. www.gehealthcare.com

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12-2008 JB3463/OS UK & INT'L ENG



POSTER SESSIONS

SUNDAY, JANUARY 25, 2009



All presentations marked with
indicate Young Psychiatrists posters





POSTER SESSIONS

MONDAY, JANUARY 26, 2009



All presentations marked with
indicate Young Psychiatrists posters





POSTER SESSIONS

TUESDAY, JANUARY 27, 2009



All presentations marked with
indicate Young Psychiatrists posters





EXHIBITION



GET INVOLVED IN TODAY'S RESEARCH IN PSYCHIATRY!



LEADING RESOURCES FOR PROFESSIONALS

Annales Medico-psychologiques
Archives of Psychiatric Nursing
Asian Journal of Psychiatry
Biological Psychiatry
Brain Stimulation
Child and Adolescent Psychiatric
Clinics of North America
Clinical Psychiatry News
Comprehensive Psychiatry
Drug and Alcohol Dependence
Encephale-revue de Psychiatrie
Clinique Biologique et
Thérapeutique

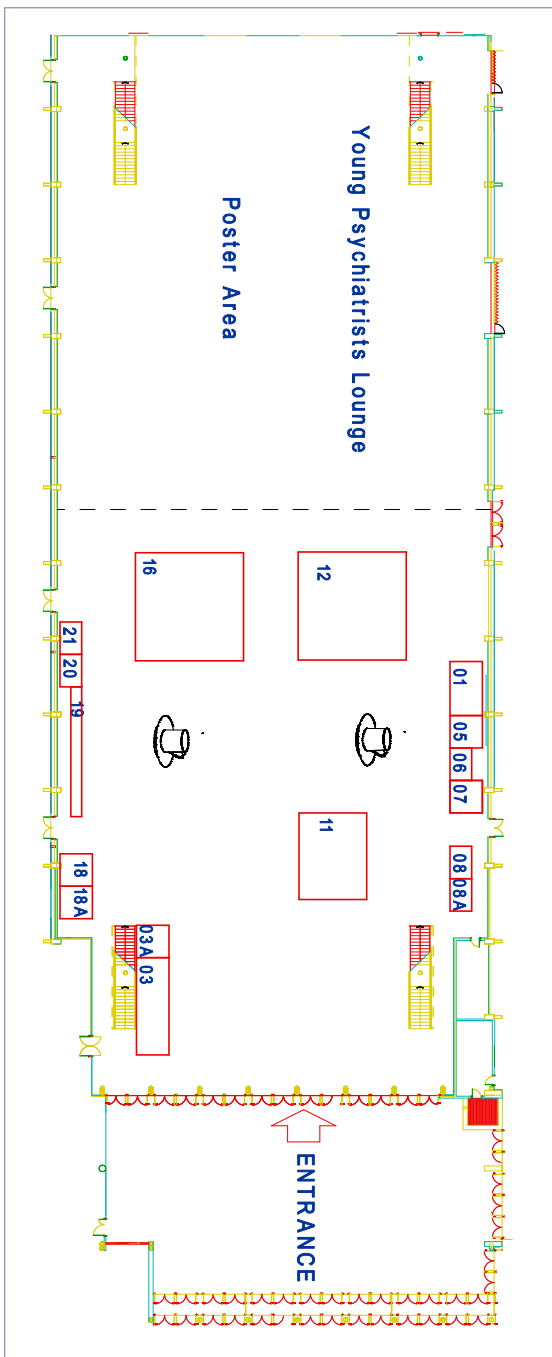
European
Neuropsychopharmacology
European Psychiatry
Evolution Psychiatrique
General Hospital Psychiatry
International Journal of Law and
Psychiatry
Journal of Affective Disorders
Journal of Anxiety Disorders
Journal of Behavior Therapy and
Experimental Psychiatry
Journal of Psychiatric Research
Journal of Psychosomatic
Research

Neuropsychiatrie de l'enfance et
de l'adolescence
Progress in
Neuropsychopharmacology &
Biological Psychiatry
Psychiatric Clinics of North
America
Psychiatry
Psychiatry Research
Psychiatry Research:
Neuroimaging
Psychoneuroendocrinology
Schizophrenia Research
World Psychiatry

For a complete list of psychiatry products, detailed information on the titles
above and online access to the journal articles, please visit

www.elsevier.com/psychiatry

EXHIBITION LAYOUT





EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

LIST OF EXHIBITORS

Company	Booth #
American Psychiatric Publishing (APP)	8
Bristol-Myers Squibb/Otsuka Pharmaceuticals	12
DGPPN	21
ECNP	5
Elsevier Masson SAS	3A
European Psychiatric Association (EPA)	3
GE Healthcare	1
Otsuka Pharmaceuticals/Bristol-Myers Squibb	12
Pfizer Ltd.	16
Ratiopharm Portugal	11
Routledge	18A
S.Karger	6
WFSBF	20
Wiley-Blackwell	18
Wisepress	19
WPA	7



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

EXHIBITOR PROFILES

AMERICAN PSYCHIATRIC PUBLISHING, INC. (APP)

1000 Wilson Boulevard,
Suite 1825
Arlington, VA 22209
USA

Psychiatric Publishing, Inc. is the world's premier publisher of books, journals, and online products on psychiatry, mental health and behavioral science. We offer authoritative, up-to-date and affordable information geared toward psychiatrists, other mental health professionals, psychiatric residents, medical students and the general public. Visit us online at: www.appi.org

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Elsevier Masson SAS

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France
Website: <http://em-consulte.com>, <http://elsevier-masson.com>
<http://elsevier.com>

Elsevier Masson is part of Elsevier. The office is located in Paris. Founded in Paris, *European Psychiatry* has been published by the local office of Elsevier for the last 23 years. Since it is available on ScienceDirect, *European Psychiatry* has considerably developed its readership and its impact factor is on the upward trend.

Elsevier Masson also publish psychiatry journals in French - L'Encéphale, Annales médico-psychologiques, l'Evolution psychiatrique, Neuropsychiatrie de l'enfance et de l'adolescence, etc.

Come and join the editors of *European Psychiatry* for a chat - Hall B - Sunday, Monday and Tuesday, from 12:00-13:00.



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

European Psychiatric Association (EPA)

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67000 Strasbourg

France

Tel: +33 3 8823 9930

Fax: +33 3 8835 2973

E-mail: hq@europsy.net

Website: <http://www.europsy.net>

The European Psychiatric Association is the largest international association of psychiatrists in Europe, with active members in as many as 57 countries including the international members. Its members include leading experts covering the interests of psychiatrists in academia and in practice.

Founded in 1983, EPA was granted by the Council of Europe a consultative status in 1989 and a participatory status in 2003. EPA deals with psychiatry and its related disciplines and it focuses on the improvement of care for the mentally ill as well as on the development of professional excellence. The mission of EPA is to improve psychiatry and mental health care throughout Europe.

The EPA organises a very wide range of activities that include the EPA Itinerant CME course programme, promoting excellence in psychiatric research with a wide range of grants and prizes and enhancing initiatives improving ethical standards of psychiatric care and encouraging professional interchange between European Psychiatrists.

EPA organizes yearly the European Congress of Psychiatry encouraging progress in psychiatric clinical practice, ensures the publication of the European Psychiatry Journal, supports 18 active sections and organises the annual European Platform of Psychiatrists aimed at developing and supporting concrete projects in European Psychiatry.



FINAL PROGRAMME

JANUARY 24-28, 2009 - LISBON, PORTUGAL

Florence WPA 2009 Congress

Website: www.wpa2009florence.org

This Congress aims to provide a high-quality, comprehensive overview of all evidence-based treatments currently available for all mental disorders. Many prominent scientists, including the ten most cited psychiatrists in the past decade (according to the Essential Science Indicators) will be among the speakers. More than 8,000 participants are expected.

GE Healthcare

Pollards Wood
Nightingales Lane
Chalfont, St Giles
Bucks HP8 4SP
UK

Website: www.gehealthcare.com

GE Healthcare is dedicated to helping you transform healthcare delivery by driving critical breakthroughs in biology and technology. Our expertise in medical imaging and information technologies, medical diagnostics, patient monitoring systems, drug discovery, and biopharmaceutical manufacturing technologies is enabling healthcare professionals around the world discover new ways to predict, diagnose and treat disease earlier. We call this model of care "Early Health." Our goal is to help clinicians detect disease earlier, access more information and intervene earlier with more targeted treatments, so they can help their patients live their lives to the fullest. Re-think, Re-discover, Re-invent, Re-imagine. For additional information please visit www.gehealthcare.com



EUROPEAN PSYCHIATRIC ASSOCIATION
17th EUROPEAN CONGRESS OF PSYCHIATRY

German Society of Psychiatry, Psychotherapy and Nervous Diseases Congress DGPPN Kongress 2009

25 – 28 November 2009
Berlin
Germany
<http://www.dgppn-kongress.de>

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H.Lundbeck A/S is an international pharmaceutical company truly dedicated and focused in research & development, production, marketing and sales of medicines for diseases within CNS. The company has a long history of creating innovative treatments for depression and the launch of Ciprexal/Lexapro (escitalopram) has confirmed the leading position in this area. Ebixa® (memantine) for the treatment of Alzheimer's disease is Lundbeck's first major neurological product representing a novel approach to the treatment of AD as the first and only approved drug in its class, the NMDA receptor antagonists. Circadin, a new treatment for insomnia that improves quality of sleep and morning alertness, was recently launched in much of Europe.



FINAL PROGRAMME
JANUARY 24-28, 2009 - LISBON, PORTUGAL

Otsuka Pharmaceutical Europe Ltd.

Hunton House
Highbridge Estate
Oxford Road, Uxbridge
Middlesex UB8 1HU
UK

Founded in 1964, Otsuka Pharmaceutical Co., Ltd. is a global healthcare company with the corporate philosophy: 'Otsuka-people creating new products for better health worldwide.' Otsuka researches, develops, manufactures and markets innovative and original products, with a focus on pharmaceutical products for the treatment of diseases and consumer products for the maintenance of everyday health. Otsuka is committed to being a corporation that creates global value, adhering to the high ethical standards required of a company involved in human health and life, maintaining a dynamic corporate culture, and working in harmony with local communities and the natural environment. The Otsuka Pharmaceutical Group comprises 106 companies and employs approximately 33,000 people in 18 countries and regions worldwide. Otsuka and its consolidated subsidiaries earned ¥928.4 billion (approx. US \$9.2 billion*) in annual revenue in fiscal year ended in March 2008.

Pfizer Ltd.

Walton Oaks, Dorking Road
Walton-on-the-Hill, Tadworth, Surrey, KT20 7NS
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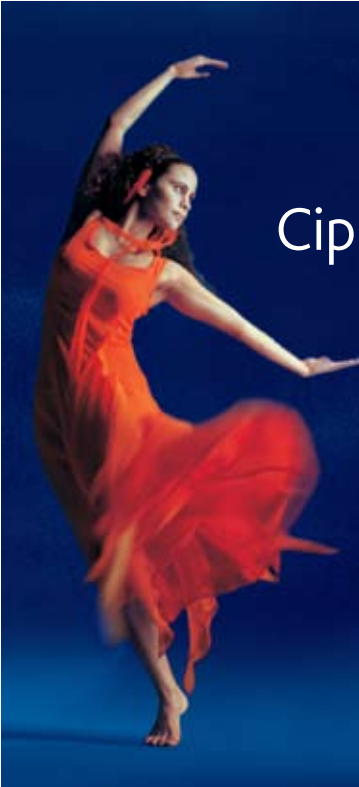
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escitalopram

Cipralex Abbreviated Prescribing Information. Presentation: "Cipralex", tablets containing 5, 10 and 20 mg escitalopram (as oxalate). Indications: Major depression. Generalised anxiety disorder. Panic disorder with or without agoraphobia. Social anxiety disorder. Obsessive compulsive disorder. Dosage: Usual dose 10 mg once daily. Maximum dose 20 mg/day. In the elderly (>65 years), in panic disorder patients and in patients with reduced hepatic function an initial dose of 5 mg/day is recommended. Caution in patients with severely reduced renal function. Not recommended in children

and adolescents (<18 years). When stopping treatment with escitalopram, the dose should be gradually reduced over a period of one or two weeks. Contraindications: Hypersensitivity to escitalopram. Concomitant treatment with non-selective MAOIs. Pregnancy and lactation: Careful consideration prior to use in pregnant women. Breast-feeding women should not be treated. Precautions: The special warnings and precautions which apply to the class of SSRIs. Drug interactions: Reversible, selective MAOIs. Selegiline (irreversible MAO-B inhibitor). Medicinal products lowering the

seizure threshold. St. John's Wort. Enzyme inhibitors (e.g. omeprazole and cimetidine) may require reduction of escitalopram dose. Drugs metabolised by enzymes CYP 2D6 or 2C19. Adverse events: Most frequent during first or second weeks, comprise the SSRI class adverse events, e.g. nausea, diarrhoea, and constipation. Overdosage: Doses between 400 and 800 mg of escitalopram alone have been taken without any severe symptoms. Consult full prescribing information before prescribing. H. Lundbeck A/S, Copenhagen, Denmark. Date of preparation: September 2008



INDEX



ABILIFY® (aripiprazole) PRESCRIBING INFORMATION

TABLETS, ORODISPERSIBLE TABLETS, ORAL SOLUTION & ABILIFY-▼ 7.5 mg/ml SOLUTION FOR INJECTION

See Summary of Product Characteristics before prescribing.

PRESENTATION: Tablets: 5mg, 10mg, 15mg, 30mg aripiprazole; orodispersible tablets: 10mg, 15mg aripiprazole; oral solution: 1mg/ml aripiprazole, solution for injection for intramuscular use (IM): 7.5mg/ml aripiprazole (1.3ml vial containing 9.75mg aripiprazole).

INDICATIONS: *Oral formulations:* Schizophrenia. Moderate to severe manic episodes in Bipolar I Disorder & prevention of new manic episodes in aripiprazole respondent patients.

IM: Rapid control of agitation & disturbed behaviours in schizophrenia or manic episodes in Bipolar I Disorder.

DOSAGE: *Oral formulations:* Schizophrenia: Usual starting dose is 10 or 15mg once daily with or without food. Effective dose range is 10-30mg with a recommended maintenance dose of 15mg. Mania in Bipolar I: Usual starting dose is 15mg once daily with or without food as monotherapy or combination therapy. For recurrence prevention, continue at same dose. Dose adjustment on basis of clinical status.

IM: Initial dose 9.75mg (1.3ml) injection. Effective dose range: 5.25-15 mg as single injection. Lower dose of 5.25 mg (0.7 ml) may be given. Second injection may be administered 2 hours after the first, on basis of individual clinical status. No more than three injections in any 24-hour period.

For all formulations: Maximum daily dose 30mg. No dosage adjustment required in renal or moderate hepatic impairment. Elderly (>65 years): Efficacy not established. Consider lower starting dose. Children and adolescents (< 18 years): Safety and efficacy not established.

CONTRAINDICATIONS: Hypersensitivity to any ingredient.

WARNINGS AND PRECAUTIONS: Clinical improvement may take several days to some weeks: monitor patient throughout this period. Reduce dose or discontinue if signs of tardive dyskinesia appear. Discontinue if patient develops signs and symptoms indicative of neuroleptic malignant syndrome. Caution in patients with a history of seizure, cardiovascular disorders, conduction abnormalities, diabetes and elderly demented patients with psychosis and those at risk of aspiration pneumonia (see SPC). Do not use in pregnancy unless benefit outweighs risk; breastfeeding not advised. Until individual patient response established, caution not to drive or operate machinery.

IM: observe patients for orthostatic hypotension and regularly monitor blood pressure, pulse, respiratory rate and level of consciousness. If additional parenteral benzodiazepine therapy is deemed necessary, monitor patients for excessive sedation and for orthostatic hypotension.

DRUG INTERACTIONS: Increased hypotensive effect with certain antihypertensives. Caution is advised when combining with alcohol or other CNS medication with overlapping side effects such as sedation; also with certain antifungals, antituberculous drugs, antivirals, anticonvulsants, St John's Wort and medicines known to cause QT prolongation or electrolyte imbalance. Reduce aripiprazole dose with concomitant use of potent CYP3A4 or CYP2D6 inhibitors, e.g. fluoxetine, paroxetine. Increase aripiprazole dose with concomitant use of potent CYP3A4 inducers, e.g. carbamazepine. See SPC. *IM:* increased sedation when combined with lorazepam.

UNDESIRABLE EFFECTS: In placebo controlled trials, the following adverse drug reactions were reported: *common* (>1/100 <1/10): insomnia, restlessness, anxiety, headache, akathisia, extrapyramidal disorder, fatigue, dizziness, nausea, vomiting, dyspepsia, constipation, salivary hypersecretion, somnolence, sedation, tremor, blurred vision. *IM:* increased diastolic blood pressure; *uncommon* (>1/1000 <1/100): tachycardia, orthostatic hypotension, depression. *IM:* fatigue, dry mouth. Other adverse events from post-marketing surveillance include; allergic reaction (anaphylaxis & angioedema), pancreatitis, priapism, suicide, rhabdomyolysis, hyperglycaemia, diabetes, dysphagia, convulsions, cardiac disorders including arrhythmias & sudden unexplained death, thromboembolic events, hypertension, hepatitis, leucopenia and thrombocytopenia. Other findings see SPC.

OVERDOSAGE: Treatment should be symptomatic and supportive: adequate airway maintenance, cardiovascular monitoring and close medical supervision. Activated charcoal reduces serum concentrations.

LEGAL CATEGORY: POM

AUTHORISATION NUMBERS & BASIC NHS PRICE: 28 tablets; 5mg (EU/1/04/276/002) £101.63, 10mg (EU/1/04/276/007) £101.63, 15mg (EU/1/04/276/012) £101.63, 30mg (EU/1/04/276/017) £203.26. 28 orodispersible tablets; 10mg (EU/1/04/276/025) £101.63, 15mg (EU/1/04/276/028) £101.63. 150ml bottle 1mg/ml oral solution: (EU/1/04/276/034) £108.89. 1.3ml vial 7.5mg/ml solution for injection: (EU/1/04/276/036) £3.63.

MARKETING AUTHORISATION HOLDER: Otsuka Pharmaceutical Europe Ltd, Hunton House, Highbridge Business Park, Oxford Road, Uxbridge, Middlesex UB8 1HU.

FURTHER INFORMATION FROM: Bristol-Myers Squibb Pharmaceuticals Ltd., Uxbridge Business Park, Sanderson Road, Uxbridge, Middlesex, UB8 1DH. Tel: 0800-731-1736.

DATE OF P.I. PREPARATION: June 2008

ABI/0508/3148/0410 II-041

Adverse events should be reported. Reporting forms and information can be found at www.yellowcard.gov.uk

Adverse events should also be reported to Bristol-Myers Squibb Pharmaceuticals Ltd Medical Information on 0800 731 1736.



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ABILIFY®
(aripiprazole)

**NEW indication in
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1. Dillenschneider A. *et al. Eur Arch Psychiatry Clin Neurosci.* 2007; 257 (Suppl. 2): 35. Poster P24. 2. Sánchez R. *et al. European Neuropsychopharmacology.* 2007; 17 (Suppl. 4): Poster P.3.c005. 3. Keck PE *et al. J Clin Psychiatry.* 2006; 67: 626-637. 4. Keck PE *et al. J Clin Psychiatry.* 2007; 68: 1480-1491. 5. Vieta E. *et al. Am J Psychiatry, in advance*, April 1, 2008. A1A: 1-9.

ABILIFY® is indicated for the treatment of schizophrenia and **newly indicated** for the **treatment** of moderate to severe **manic episodes** in Bipolar I Disorder and for the **prevention** of a **new manic episode** in patients who experienced predominantly manic episodes and whose manic episodes responded to **ABILIFY®** treatment


ABILIFY®
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