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Objective: Ventricular enlargement is one of the most consistent brain changes associated with schizophrenia. However, there are only few cross-sectional studies in genetic at risk individuals, and no studies in individuals meeting ultra high risk (UHR) criteria of developing frank psychosis. This study investigates the timing of ventricular volume changes across the different stages of emerging psychotic disorders.

Methods: We measured ventricular volumes in 473 subjects comparing 135 UHR subjects (of whom 39 subsequently developed a psychotic illness), 162 first-episode psychosis (FEP) subjects, 89 chronic schizophrenia (CS) subjects with 87 normal controls (NC). 29 UHR, 25 FEP, 13 CS, and 24 HV had longitudinal follow up scans.

Results: We found significant ventricular enlargement in FEP and CS, but not in UHR and NC. Longitudinal analysis confirmed ventricular enlargement in non-affective psychosis only. UHR patients had normal ventricular volumes regardless of whether they made transition to frank psychosis or not.

Conclusion: Our results are suggestive that ventricular enlargement is a consequence of transition and/or progression of illness rather than a risk marker in that it is apparent only after the onset of frank psychosis, with prominence in patients with schizophrenia-like psychoses. The results parallel our previous study in that hippocampal volumes were reduced in CS and normal in patients having non-schizophrenic psychoses as well in UHR individuals.

S18.05

Association of regional grey matter abnormalities with cognitive functions in the at risk mental state

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Objective: There is some evidence that psychosis and its prodrome are associated with neuroanatomical abnormalities and cognitive deficits. However, the brain structure - cognition associations in this disorder are less clear. The aim of the study was to investigate brain structure – cognition associations in individuals with an At Risk Mental State (ARMS) relative to patients with first-episode psychosis and healthy volunteers.

Methods: The subjects were recruited through a specialised clinic for the early detection of psychosis (FEPSY) at the Psychiatric Outpatient Department, University Hospital Basel. We examined structural brain abnormalities, identified using voxel-based morphometry (VBM), and cognitive function (general intelligence, attention, executive function, and working memory) in 32 individuals at high risk of developing psychosis (ARMS), 22 patients with a first-episode psychosis and 11 healthy volunteers.

Results: We expect that regional grey matter volume abnormalities are associated with specific cognitive deficits in people with an ARMS.

Conclusions: We predict that some associations are specific to individuals with an ARMS and may be a correlate of their increased vulnerability to psychosis. Furthermore, we expect structure –

cognition associations within the high risk group to be associated with the subsequent onset of psychosis.

S19. Symposium: PSYCHIATRY AND THE CULTURES OF SUBJECTIVITY (Organised By The AEP Section on Philosophy And Psychiatry)

S19.01

On capturing subjectivity in narrative

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In this paper I distinguish between two claims. 1) That subjects or selves are constituted by narratives. 2) That narratives play an essential and irreducible role in capturing subjectivity. I will argue that whilst the reduction of selves to narratives - in claim 1 - fails, claim 2 helps highlight the essential role of normativity in characterising subjects' mental lives. But the irreducibility of normativity places principled limits on the range of phenomena on which psychiatry can aim to shed light.

S19.02

Subjectivity and cultures in psychiatry

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Subjectivity is an essential part of psychiatry, often forgotten in daily clinical work, despite the remarkable demonstrations done by the German school of phenomenology in the 20th century concerning this aspect of our specialty.

As a matter of fact perception of internal and external time, social space, relationship to pleasure and religion are essentially linked to culture. One of the most important determinants of culture is economy, which is itself largely determined by geography and history of the region.

The author will present the intertwinement existing between these variables, and its impact on the clinical picture and the subjective interpretation of the patient, taking depression as a model for this theoretical construction.

S19.03

Objective evidence and subjective narratives in medicine and psychiatry

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Evidence Based Medicine and Psychiatry has had a (controversial) success in the last years. Narrative Based Medicine and Psychiatry has emerged subsequently as a complementary (not an alternative) movement. The object of this presentation is the following question: To what extent are these movements something new for medical science? Or, to what extent are they simply the current expression of an age-old tradition in the history of medicine and psychiatry? Our objective here is to review a series of possible (and scantily commented) historical antecedents, not so much of Evidence- and Narrative-Based Medicine and Psychiatry in themselves, as of the scientific aspirations and the human needs that are behind them.