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Background and Aims: Anorexia nervosa (AN) patients show remarkably rigid control over eating and exhibit persistent and obsessive temperament traits. Neuropsychological studies have shown minor impairments in cognitive flexibility in AN patients. The aim of the present study was to investigate alterations of the functional neuroanatomy in AN patients performing a cognitive flexibility task.

Methods: Thirteen female subjects aged 18 to 26 years with chronic AN (8 with the purging subtype) and 15 age-matched healthy female controls (HC) underwent functional magnetic resonance imaging while performing a reactive flexibility task. In an event related paradigm, participants had to respond with a different button press to infrequent target stimuli embedded in the prepotent presentation of standard stimuli. The performance to the task was quantified as reaction time and number of correct trials.

Results: On behavioral level, AN patients and the HC group showed a similar performance (reaction times, number of correct trials) in the reactive flexibility task. During correct behavioral shifts, the AN patients compared to the HC group showed decreased activation of the bilateral thalamus, ventral anterior cingulate gyrus (ACC), ventral insula, dorsolateral prefrontal (DLPFC), premotor cortex, visual stream and cerebellum (p uncorr. < .001).

Conclusions: AN patients show an impaired activation in thalamo-(striato)-cortical loops involved in response selection and behavioral shift. These findings support from a neurobiological perspective a more generalized cognitive rigidity in AN, that is not restricted to food, weight and shape.

CS08.04

The cycle of risk. The factors involved in the transmission of eating disorders between mothers and children

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Background: Complex psychiatric disorders develop from interactions between genetic and environmental factors. Offspring of women with a history of an eating disorder (ED) are a high risk group due to a combination of both genetic vulnerability and rearing/environmental factors.

Aim: The aim of this study is to examine the clinical features and also the experiences of mother-daughter dyads where both mother and daughter have had an eating disorder in order to explore factors that may impact on risk for and outcome in eating disorders.

Method: Mother-daughter ED dyads participated in a study that used a combination of quantitative and qualitative methodologies.

Results: the quantitative assessment found marked differences distinguishing ED mothers from control mothers (with no ED history), particularly in areas such as caregiving, eating attitudes and personality traits. The qualitative assessment identified an important phenomenological interaction between the mothers' and daughters' experiences of an eating disorder.

Conclusion: These results shed light on the significant role and impact of a mother's eating disorder when her offspring develops the same illness. The study's findings highlight the need to take these

possible transmission factors and the impact of maternal ED into account in clinical practice.

Presidential Symposium: Forensic psychiatry issues in Europe

PS02.01

The role of forensic psychiatry in mental health systems in Europe

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Forensic Psychiatry seems different from one country to another due to different historical developments, legal systems and mental health systems. There are, however, several common goals of Forensic Psychiatry shared across countries, e.g.

- To assure treatment for severely mentally ill patients who became delinquent and to give evidence to courts in cases where the responsibility due to mental illness is in question
- To prevent relapse of mentally disordered offenders

This work has to be done in the interface of Law and Psychiatry and mostly needs an interdisciplinary approach. Forensic Psychiatry has developed special knowledge and skills which pertain especially to violence and sexual deviance, to risk assessment and management and to the incorporation of techniques developed in neighbouring disciplines.

On the other hand the specialisation of psychiatry into several sub-disciplines has led to the loss of some of these skills in general psychiatry and to a "forensification" of some of its patients.

From these developments new fields of interest arise both for general and forensic psychiatry:

- How to prevent mentally ill from becoming forensic patients
- How to prevent mentally ill from becoming victims of crime
- How to intervene in the vicious circle from victim to perpetrator

Research on these topics is just beginning and neither general nor forensic psychiatry will be able to achieve practical progress if they try to reach it independently. So I plead for a close integration of forensic psychiatry into the mental health system and for intensive exchange of knowledge and skills.

PS02.02

The interface between general and forensic psychiatry

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The relationship between General and Forensic Psychiatry has a long history, being for the most part constructive, but also characterised by tension and conflict. The mentally abnormal offender has been welcome neither in general mental health services nor in prisons. In nineteenth and twentieth century asylums and mental hospitals, the mixing of "criminal lunatics" with "ordinary lunatics" was unavoidable but not usually preferred. With the opening of mental hospitals from the 1950's, the admission of mentally abnormal offenders became more problematic. From the 1970's, medium secure units were built to assess and treat mentally disordered patients posing a significant risk to others, leaving only those posing the most serious risk to the Special (High Security) Hospitals. The placement of psychopaths and sex offenders posed especial complexity. Additionally some patients not convicted in a court but prone to serious violence or absconding from hospital may also require forensic placement.

An issue however for modern psychiatry as a whole is how best general and forensic psychiatry should interact.

PS02.03

Quality assurance in forensic psychiatry

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The problems of quality assurance have been discussed in a working group between specialists in forensic psychiatry and judges of the High Court in Karlsruhe / Germany. This resulted in two publications on "Minimal standarts for the evaluation of legal responsibility" (2005) and "Minimal standarts for the evaluation of prognosis in criminal offenders"(2007).

Principles and consequences of these standards and implications for the forensic evaluation of offenders with personality disorders will be presented.

Workshop: Scientific reading and writing in psychiatry

W01.01

Publication trends in high impact factor journals 1994-2004

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Aims: To describe the characteristics of psychiatric research and their changes within one decade by analysing the publications in three high impact general psychiatric journals.

Methods: All articles published in the "American Journal of Psychiatry", "British Journal of Psychiatry" and "Archives of General Psychiatry" in 1994 and 2004 were considered for analysis. The publications were classified as "research" or "non-research" articles and further categorised according to a range of variables including "methodology", "research area", "subject matter"; "number of participants" and "statement on funding". Data were analysed descriptively.

Results: In 2004 the overall percentage of non-research articles was 6,8% higher than in 1994. The use of different research methods remained fairly stable, with the exception of case-control studies, which accounted for a slightly higher percentage of all publications in 2004 compared to 1994. Further relevant developments included the tremendous increase in published studies involving neuro imaging techniques from 1994 to 2004. An increase in publications was also found for genetic and cross-cultural studies, while the number publications in most other research areas remained relatively stable. Moreover, the percentage of papers reporting funding also increased significantly from 1994 to 2004.

Conclusions: The systematic analysis of journal content can be used to assess the state of psychiatric knowledge and practice. Highlighting advancements and changes over time it may reflect research trends and policies.

W01.02

Qualitative research methods in psychiatric science

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Background and Aims: Qualitative research has been met with growing interest in recent years. Several trends in medical and psychiatric practice, including patient orientation, the recovery movement and the search for evidence-based psychotherapeutic interventions, have propelled scientific inquiry into subjective perspectives on experiencing mental health problems, their consequences, and psychiatric services. While initially largely criticised as lacking scientific rigour, the value of qualitative research has increasingly been recognised, following a certain disenchantment with genetic research, the acknowledgement of methodological limitations in measuring subjective constructs such as needs, quality of life or stigma with standardised tools, and the definition of clear quality criteria for qualitative studies.

Methods: Multiple databases (Ovid Medline, PsycINFO, PsychLit, Cochrane Reviews) were scanned for relevant publications in the period from 1990 to 2007.

Results: A proliferation of qualitative literature could be noted, especially from 2000 onward. Published research focuses on patients' and caregivers' experiences of mental health problems (subjective illness models, stigma, help-seeking motivations) and of using mental health services (expectations, empowerment, service evaluation). Among mental health professionals, experiences of service provision (service development, job motivation, stress & burnout) were studied.

Conclusions: Qualitative methods are becoming an integral part of the methodological canon of psychiatric research. This presentation gives an overview of publication trends regarding topics covered, journals featuring qualitative papers, and methodological quality criteria. It further focuses on fields of application for qualitative vs. quantitative methods and discusses specific requirements on scientific writing in publishing qualitative data.

W01.03

Current developments and challenges for publishing houses

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New technologies have always brought new challenges even as they solve old problems. The 21st century is seeing a revolution in scientific, technical and medical publishing. The stage was set a few years ago, when publishers began migrating their content to the online environment, in parallel with continued print publication, first journals, then books. Initially, the premise was still that the print product was primary and the electronic version just a way of reaching a larger audience. As new functionality was introduced, expectations were raised and content now has to be much more than an electronic version of a printed page: it must include easy cross-referencing both internally within a document and to external sources, without regard to the owner or publisher of those sources; it must accommodate audiovisual material; and all this must be done rapidly and seamlessly.

But the target has already moved further away: the real challenge now is to deliver the interactivity that will be expected from the generation that communicates through MySpace and Facebook. How do we maintain the status of the textbook when students look for answers on Wikipedia? Who will read a journal paper describing a particular gene when they can log into GenBank? What is the role of the clinical reference work when doctors carry PDAs loaded with guidelines and treatment algorithms? The publishing house that successfully answers these questions will be the one that survives to face the challenges of the next decade.

W01.04

Why books?

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