

The aim of this study is to test the hypothesis that coadjuvant treatment with SSRI and topiramate would improve the outcome of patients with comorbid OCD and impulsive behaviour disorders.

Methods: We will describe two clinical cases admitted to our Psychiatric Hospitalization Unit. Case 1 is a 39 years old female diagnosed with OCD, borderline personality disorder and alcohol dependence and case 2 is a 38 years old male with OCD, mixed personality disorder and cocaine abuse.

Results: Treatment with topiramate (range dosage: 250-400 mg/daily) as well as SSRI (paroxetine 40 mg/daily- case 1; sertraline 200 mg/daily-case 2) improved affective instability and impulsive symptoms in both patients. Topiramate was well tolerated without important side effects.

Conclusions: Topiramate could be an interesting alternative in the coadjuvant treatment of OCD with impulsive features.

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The prevention of gambling behavior in Switzerland

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Aims: The present study addresses the empirical basis for alerting health professionals to potential risk factors for excessive gambling. On the basis of international and Swiss literature on gambling, an explanatory model for the development of gambling problems is developed.

Hypotheses: This work is based on the hypothesis that the prediction rule for excessive gambling, based on a sample of the general population and for different types of frequent gambling preferences, differs from the prediction rule for disordered gambling in patients, seeking psychiatric treatment. The goal of this study is, therefore, to contribute to an early identification of disordered gambling behaviour in the general population, as well as in the target group of patients seeking psychiatric treatment.

Data: Various sources of information were analysed separately, in order to develop and test a prediction rule for excessive gambling, namely the 2002 Swiss Health Survey, which is a survey of the general population, involving 19'706 participants, as well as the data of psychiatric patients of Lausanne/Geneva, recruited consecutively from 1996 to 2004 at the Psychiatric Hospital of the University of Lausanne. This patient population comprised a total of 886 patients. Further data from the Centre for Excessive Gambling are presented, covering 105 patients.

Outcomes: Results show that indicators of depressive behaviour as well as smoking are good candidates for the early identification of gambling problems. On the basis of these data it is safe to assume that signs of depressive behaviour should encourage health professionals to enquire about gambling problems.

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White matter abnormalities in obsessive-compulsive disorder: A diffusion tensor imaging study

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Background and aims: The subdivisions of the corpus callosum (CC) were attempted to define corresponding areas of the cortex from which the fibers originate. Previous neuroanatomic studies of the CC provide impetus for investigating its role in obsessive-compulsive disorder (OCD).

Methods: In this study diffusion tensor imaging (DTI) was employed to microstructural abnormalities of white matter of the CC in OCD patients. Nine patients with OCD and matched control subjects underwent DTI. Fractional anisotropy (FA), an index of the integrity of white matter tracts, was determined in the seven subdivisions of the CC. We placed each regions of interest (ROI) over the sagittal plane and all subdivisions were measured.

Results: Significant reduction in FA was found in the rostrum of the CC of patients with OCD compared with one of controls. FA of the other subdivisions except the rostrum in OCD patients did not differ significantly compared with control subjects. Higher FA in the rostrum correlated significantly with lower Y-BOCS scores ($r = -0.803$, $p = 0.009$).

Conclusions: The rostrum contains fibers from inferior premotor as well as medial and caudate/orbital prefrontal regions. These results supported the theory of dysfunction of prefrontal cortex and striatal circuits in OCD and suggested the implication of the orbitofrontal circuit for symptom severity in the OCD patients.

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Feasibility and acceptability of short message service (SMS) text messaging to support adherence in patients receiving quetiapine: A pilot study

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Aim: To investigate the feasibility, and patient/psychiatrist acceptability, of an SMS text messaging system reminding patients receiving quetiapine to take their medication.

Methods: 8-12(mean:9.4) week, non-interventional, psychiatrist assessed, pilot study of 27 outpatients receiving quetiapine (mean age[range]: 35.3[19-57] years). Patients were asked to reply to SMS messages sent twice daily to their cellular phone to remind them to take their medication (morning) and enquire about their well-being (evening). Patients' response (morning-yes/no; evening-positive/negative/neutral) was monitored by psychiatrists ($n=7$) via a website, and subsequently used to assess technical feasibility. Psychiatrists rated acceptability and feasibility of the system by completing case report forms (CRFs). Data are from the LOCF population.

Results: Patients responded to 77% (compliance) of the 5,000 SMS messages sent (84% correctly, 13% inaccurately, 3% responded late [eg, day after]). 7/27 patients withdrew prematurely. The most common benefits expressed by patients were that they felt cared for ($n=11/21$) and were reminded to take their medication ($n=7/21$). Psychiatrists' ratings of the system improved over time, with SMS compliance and increased patient contact seen as the most valuable aspects. At study end, CRF data showed psychiatrists felt the system