P-1050 - DIAGNOSTIC MAPS OF PSYCHOTIC DISORDERS: COMBINING THE CATEGORICAL AND THE DIMENSIONAL PERSPECTIVE

D.Läge[1], S.Egli[1], M.Riedel[2], A.Strauss[2], H.-J.Möller[2]
[1]Psychology, University of Zurich, Zurich, Switzerland, [2]Psychiatric Hospital of the Ludwig-Maximilians University, Munich, Germany
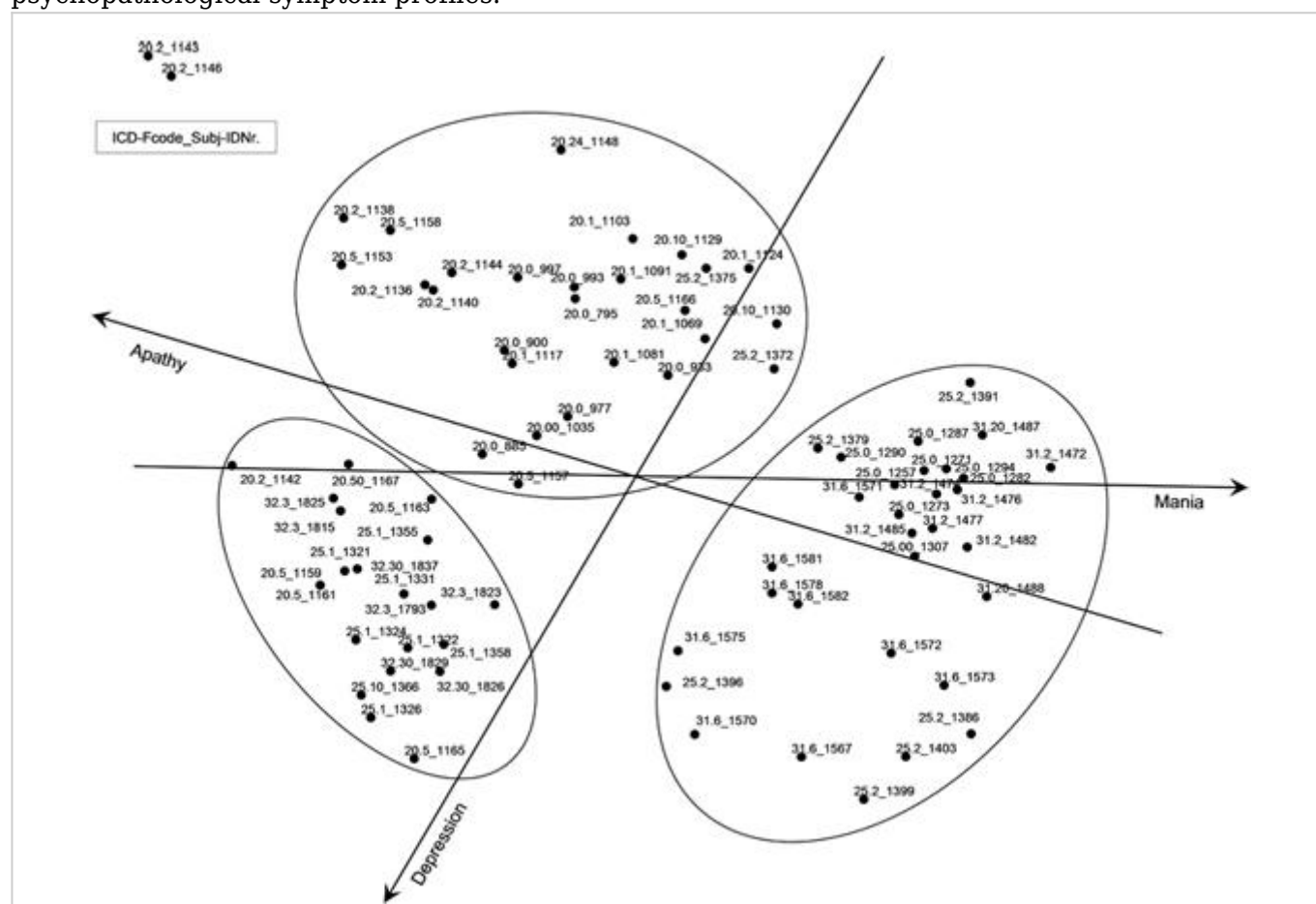
Introduction: The ongoing debate whether to look at psychiatric disorders from a categorical or a dimensional perspective provokes objections, whatever viewpoint is taken. On the one hand, a dimensional approach seems to be superior in terms of predictive validity. On the other hand, the currently applied categorical approach, its usefulness and simplicity should not be neglected.
Aim/objectives: To demonstrate a possibility to combine the categorical and the dimensional perspective at the same time.
Methods: We introduce a diagnostic map that was calculated by robust nonmetric multidimensional scaling based on AMDP symptom profiles of $N = 100$ patients with schizophrenic and affective disorders.
Results: In the diagnostic map, a manic, a depressive, and a non-affective cluster clearly emerged. At the same time, the mania dimension ($r = 0.82$), the depression dimension ($r = 0.68$), and the apathy dimension ($r = 0.74$) showed high multiple regression values in the map (Figure 1).
Conclusions: We found the association and quality of mood symptoms to be a structuring principle in a diagnostic map. We demonstrated that this approach represents a promising way of combining the categorical and the dimensional perspective. As a practical implementation of these findings, a multidimensional diagnostic map could serve as an automated diagnostic tool based on psychopathological symptom profiles.

[Figure 1]