PW01-258 - **ELECTRODERMAL HYPOREACTIVITY IS A VALID THEORETICAL AND CLINICAL PLATFORM IN SUICIDOLOGY AND SUICIDE PREVENTION**

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Recent findings in 345 depressive patients and 89 healthy subjects from three international independent laboratories and hospitals offer clear and consistent information that possesses strong explanatory potentials for suicidal behaviour with death intent and for clinical use in suicide risk assessment and therapeutic intervention. Its extraordinary high sensitivity (97%) and specificity (93%) for suicide and the extraordinary highly significant relationship with operationally defined suicidal propensity (p= 8.3 x 10^{-17} and p= 6.1 x 10^{-20}), its consistency over a row of published studies and its independence of serotonin, depression rating scores, antidepressive medication and other relevant variables makes the measurement of electrodermal hyporeactivity in an specifically designed acoustic habituation test a useful clinical tool for suicide risk detection as an important complement to the clinical suicide risk assessment.

Its theoretical links over specific brain structures to indifference towards everyday life (*indifference vulnerability* for suicide) and known cognitive dysfunctions like overgeneralized autobiographic memory offers a new psychobiological platform for theoretical work and support for cognitive therapeutic interventions in depressed and euthymic patients for preventive and possibly cure of suicidal propensity, beside known and possible biological treatment methods. Thorell's Hyporeactivity Theory is compared to other models and theories of suicide.

Some parts of the presentation are extracted from Thorell LH (2009): Valid electrodermal hyporeactivity for depressive suicidal propensity offers links to cognitive theory, Acta Psychiatrica Scandinavica, May;119(5):338-349.

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