P01.49
LOW-DOSE AMISULPRIDE: SOME EVIDENCE FOR ALERTNESS-INCREASING PROPERTIES IN EEG STUDIES

E. Legangneux*, P. Rosenzweig, B. Saletu, H. Allain. *Sanofi-Synthelabo, 1 Ave Pierre Brossolette, F-91385 Chilly Mazarin, France*

Sedative side effects can be a problem with many antipsychotic medications and are particularly unwelcome in patients with predominantly negative symptoms and during chronic treatment.

Amisulpride (Solian®, Sanofi-Synthelabo) is a novel antipsychotic with demonstrated efficacy in acute and chronic treatment. It is effective against positive and negative symptoms and lacks sedative side effects in clinical trials.

EEG studies have confirmed the lack of sedative effects of amisulpride; indeed a mild alertness-potentiating effect has been observed. A single dose, placebo-controlled trial of amisulpride 12.5 mg, 25 mg, 50 mg and 100 mg revealed only weak and inconsistent effects on EEG profile in healthy young volunteers. The effect was characterised by an increase in fast beta waves under resting conditions at the lower doses only.

Spectral analysis of resting EEG during sleep deprivation was performed in healthy young volunteers following repeated doses of amisulpride (50 mg/day for 4 days). Amisulpride resulted in significant ($p < 0.05$) increases in total power spectral density; in absolute delta, theta and beta (12–40 Hz) activity; and in relative beta (30–40 Hz) and relative delta, theta and beta (12–40 Hz) activity over baseline total power. Other parameters also suggested a mild alerting effect of amisulpride.

Thus, far from causing sedative effects, low doses of amisulpride appear to cause a mild alerting effect in healthy young volunteers. This is in favour of the use of low doses of amisulpride in the chronic treatment of schizophrenia with negative symptoms without fear that sedation will affect compliance.

P01.50
ALCOHOLICS LIFE QUALITY EVALUATION

P.I. Sidorov*, A.G. Soloviev. *Medical Academy, Arkhangelsk, Russia*

The authors suggest a way of chronic alcoholics' life quality evaluation on the basis of financial level, social contacts, general health state, wellbeing and integrating index of life quality. The study of the above mentioned parameters is concerted with the subjective evaluation of the life quality dependence on spiritual drinks consumption. The article shows that it is necessary to take into consideration the patients' life quality in the general functional diagnostic of alcoholism, for example to estimate the social activity and personality degradation rate, changes in attitude to treatment and family relations stability, the choice of social and professional rehabilitation. Dynamic investigation of chronic alcoholics by means of the suggested method made it possible to observe the peculiar features of psychopathological dependence development and allowed to make the symptomatic therapy individual, predict the disease development and evaluate the effectiveness of the rehabilitation activities.

P01.51
MEDICAL FOLLOW-UP OF ATTEMPTERS IN THE YEAR PRECEDING SUICIDE

F. Chastang, L. Leclerc*, P. Rioux, V. Kovess, E. Zarifian. *CHU Côte de Nacre, 14033 Caen Cedex, France*

The aim of this study, which is part of an investigation carried out in 541 suicide attempters (females: 67%, males: 33%, mean age = 34 ± 1 years; repeaters: 54%) referred to the Emergency Department of the Caen University Hospital (France) is to characterise their modality of access to medical care in the year preceding the referent suicidal act. 30% suicide attempters had visited the Emergency Unit in the year preceding the reference suicide attempt, 30% had been hospitalised; 78% had seen a general practioner, 30% had seen a psychiatrist regularly.

Repeaters had visited Emergency Department significantly more often than first attempters (43.6% vs 13.3%, $p < 0.001$). Young suicide attempters had significantly less frequently consulted a general practitioner than their older counterparts (72% vs 83.4%, $p < 0.001$), and even less in the case of repeaters (66.5% vs 85.5%, $p < 0.001$) or those in precarious employment (67.6% vs 87.8%, $p < 0.001$).

It also appears that those with the highest risk of suicide, namely young repeaters with poor living conditions, get less medical primary care. This situation is paradoxical in terms of primary prevention and poses a real challenge in the field of suicide prevention.

P01.52
THE EFFICACY AND SAFETY OF RISPERIDON IN CHILDREN WITH AUTISTIC DISORDER

R.S. Dýler[1], S. Firat[1], A. Avci[1]*. [1]*Child Psychiatry Department, Cukurova University Faculty of Medicine, Adana, Turkey*

In this study, the efficacy and safety of risperidon in children with autistic disorder is aimed to be evaluated in an open study for 6 months. 20 children (6 girls, 14 boys), aged between 3 and 7.5, who had no organic disorder were included in the study. The Ethical Committee of the Cukurova University Medical Faculty approved the study, and all families of the children signed informed consent forms. Clinical Global Impression (CGI), Childhood Autism Rating Scale (CARS) and Adverse Effect Checklist used as measurements. No pathology was found in laboratory measurements (whole blood counts, whole blood biochemistry, ECG, thyroid function tests) during 6 months. 16 children completed the study for 6 months whereas 4 children failed because of incompliance and side effects. CGI scores showed moderate improvement. Total CARS scores were 40.87 ± 7.14 before the trial and significantly decreased to 36.91 ± 9.76 after 6 months (t: 2.69, p: 0.017). At the end of the trial the 11 of the 15 subscales of the CARS showed significant improvement: Relating to people, imitation, body use, object use, adaptation to change, visual response, taste-smell-touch response and use, verbal communication, nonverbal communication, general impression. The Adverse Effect Checklist showed no significance and risperidon was considered to be safe. It is concluded that risperidon has positive effects on the course of autistic disorder, but further placebo-controlled studies are needed.

https://doi.org/10.1016/S0924-9338(00)94459-6 Published online by Cambridge University Press