

S13.02**CONSENSUS STATEMENTS OF THE WORLD PSYCHIATRIC ASSOCIATION: RATIONALE, CRITERIA USED IN SELECTING TOPICS, UTILISATION**

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In 1996, the General Assembly of the World Psychiatric Association (WPA) added a new function to the WPA constitution: the development of consensus statements. This decision was driven by several developments observable in an increasing number of countries including (1) the increasing reluctance of governments and of intergovernmental organizations to take a firm position on matters about which there is debate or controversy; (2) the rapid increase of knowledge that is being translated into interventions (e.g. new medications) whose use is being actively promoted by those who developed them; and (3) the decentralization of scientific endeavours and teaching leading to vast differences among undergraduate and postgraduate training curricula and qualifications of health professions.

The criteria for the selection of subjects of consensus statements developed by the WPA include the public health importance of the topic, insufficiency of scientific evidence and the interest of the matter for psychiatric societies worldwide. A brief description of consensus statements developed so far and of those being produced will be given as well as an outline of possible uses of the statements.

S13.03**THE USEFULNESS AND USE OF SECOND GENERATION ANTIPSYCHOTIC MEDICATIONS**

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The recent discovery and introduction of antipsychotic medications differing in certain of their characteristics from those used until now have opened an exciting vista of new treatment possibilities and opportunities to improve the quality of life of patients suffering from psychotic illness. In this situation, the World Psychiatric Association has decided to produce a statement that will express the consensus of experts and other interested parties about the usefulness and use of new antipsychotic medications. Produced by a task force, the Statement has been developed in close collaboration with many individuals from all parts of the world and representing psychiatrists, neuroscientists, people suffering from psychotic illness, members of their families, the pharmaceutical industry and legal authorities. The text of the Statement is currently being reviewed at national level and presented to psychiatrists and other mental health experts attending major international meetings. The presentation will include a description of the procedure used in the development of the Consensus Statement and an outline of its future uses.

S13.04**CZECH AND SLOVAK MEETING ON THE WPA CONSENSUS STATEMENT ON 2ND GENERATION ANTIPSYCHOTICS**

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The Czech translation of the second draft of WPA Consensus statement on the use and usefulness of the II. generation antipsychotics was discussed at a national meeting on May 27.

The participants agreed that a meeting of diverse groups with the objective to clarify an issue of common interest is a very useful and

valuable event. They endorse the idea of the Consensus statement and strongly support its objective i.e. to make all concerned parties aware of the essential development in the pharmacological treatment of schizophrenia and its impact on the quality of life and "the burden of disease" in patients with psychosis. They expect and hope that the document will improve the awareness of changes in psychiatry and enhance the attention to health policy regarding psychiatry and its public image.

At the meeting, it has been stressed that the extent of the problem concerning the adequate and safe treatment for patients with schizophrenia is rather large in both countries participating at the meeting. The incidence of new cases of schizophrenia per year is 35–50 per 1000000 in the Czech republic. Among 3500 long term (longer than a year) psychiatric hospital inmates, there are 60–70% patients with schizophrenia. In the late eighties, the average survival age of patients with schizophrenia on disability payments was conspicuously low in former Czechoslovakia: 39 years.

The local need and significance of the document is enhanced also by the comparatively low rate of prescription of IInd generation antipsychotics as well as some other recently developed psychotropic agents.

S14. New findings in opiate addiction

Chairs: M. Gastpar (D), A.H. Ghodse (UK)

S14.01**PSYCHOTHERAPY FOR OPIATE ADDICTS IN METHADONE SUBSTITUTION – A CONTROLLED TRIAL**

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(a) Background: Psychotherapy is often recommended as an adjunct to methadone substitution. However, there is a lack of controlled studies evaluating the additional effect of psychotherapy during substitution treatment.

(b) Design: Randomized controlled study comparing standard treatment with standard treatment plus cognitive group psychotherapy (20 sessions over 20 weeks). Standard treatment included daily methadone intake under supervision, medical treatment regarding somatic and psychiatric comorbid disorders, psychosocial support by drug-counseling. Treatment setting: Methadone out-patient clinic at a university hospital.

Subjects: Opiate addicts on stable dose in their first episode of methadone substitution. Duration of substitution treatment: At least six weeks and not more than six months. Exclusion criteria: Acute psychosis and all psychosocial circumstances, which endanger continuous study participation, e.g. impending court trial. Observation points: Before onset of psychotherapy and after six months; follow-up evaluations after 12 and 18 months. Main outcome variable: Number of opiate free urines in month 12 after the individual onset of the study (Five randomized urine screens over four weeks). Other outcome variables: Abuse of other substances, indicators for psychosocial functioning.

(c) Results: 74 addicts (20 females, 54 males) with a mean age of 30 years and a mean duration of opiate addiction of 7 years participated in the study.

At the symposium a detailed description of the participants' epidemiological data, psychiatric and somatic comorbidity will be