

In 12 patients a moderate to marked improvement in all domains was observed upon treatment with 20–40 mg citalopram daily. Treatment for one year in the effective dose prevented recurrence of depressive symptomatology.

It is concluded that citalopram is a well tolerated, safe, interaction-free and effective antidepressant in mentally retarded subjects with a depressive disorder.

P46.05

Smoking modulates neuroendocrine responses to ipsapirone in patients with panic disorder

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Objective: Reduced 5-HT_{1A}-receptor responsiveness has been reported in patients with panic disorder and/or agoraphobia (PDA). Although many of these patients are regular smokers, it has not been examined whether psychological or neurobiological effects induced by the highly selective 5-HT_{1A}-receptor agonist, ipsapirone, are affected by the smoking status of the patients.

Methods: In order to clarify this question neuroendocrine challenges with oral doses of ipsapirone (0.3 mg/kg) and placebo were performed in 39 patients with PDA, and results were compared between smokers and non-smokers for at least two years (n=22).

Results: Patients who were smokers (but did not smoke during the challenge procedure) had significantly reduced baseline concentrations of cortisol; they also showed significantly higher cortisol responses to ipsapirone than non-smokers.

Conclusion: Smoking status has to be taken into account when assessing the responsiveness of 5-HT_{1A} receptors in patients with psychiatric disorders.

P46.06

Relation between sexual dysfunctions and CYP 2D6 activity

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The aim of the study was to establish to the difference, as to the frequency and severity of side effects related to sex-life, between patients treated by paroxetine with reduced CYP 2D6 metabolic capacity and patients who showed no such changed capacity. Data were obtained from 30 patients with informed written consent treated by paroxetine for 131.4 days. The average daily dose of paroxetine being 20.8 mg. The effect of treatment on the sexual function was recorded by ASEX and the UKU scale. The difference of sexual dysfunction incidence between extensive and poor metabolizers broken down into the items of the scales used was subjected to statistical evaluation by the Mann-Whitney test. The CYP 2D6 metabolic status was determined with the dextromethorphan test (phenotype) and the allele-specific PCR (genotype). It may be summed up that most patients (24) undergoing long-term treatment by paroxetine reported sexual dysfunction. Subjects with low CYP 2D6 activity probably due to the long-term administration of paroxetine reported statistically significant more frequent sexual dysfunction in the ASEX scale.

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P46.07

A rare case of neuroleptic malignant syndrome and the NMS spectrum concept

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Neuroleptic malignant syndrome is an uncommon but potentially fatal complication of neuroleptic treatment. We describe a rare case of NMS diagnosed in a 18-year old man after a rapid escalation on neuroleptic dose. The patient developed the cardinal features of the syndrome gradually over a period of 15 days. The rather slow presentation was followed by an extremely prolonged course with rigorous treatment, including assisted ventilation in an intensive care unit extending over 3,5 months. The failure of more conventional modes of treatment imposed the use of electro-convulsive therapy. The final outcome was surprisingly positive with complete recovery of the NMS. Furthermore the patient's mental status and functioning remained intact over the last five years. This case raises interesting issues on neuroleptic toxicity lending credence to the spectrum concept of NMS.

P46.08

The effect of olanzapine on dopamine receptor responsivity in schizophrenia

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A neuroendocrinological method to check the degree of dopamine receptor blocking is by measuring the prolactin (PRL) responses to acute (i.m.) administration of haloperidol (HAL). The authors applied this test in a group of male patients with DSM-IV schizophrenia in the drug-free state. The patients were subsequently treated with olanzapine (OLZ) (mean daily dose: 22.5±5.8) and the test was repeated 6 weeks later. For the Hal-test, 5mg HAL were injected i.m. and blood samples were taken at times 0, 30, 60, 90 and 120 minutes. Fourteen patients enrolled in the study. Psychopathology was assessed by means of the Brief Psychiatric Rating Scale (BPRS).

Six weeks treatment with OLZ resulted in significant decreases in the total BPRS score and on the score of its subscales for positive, negative, and general psychopathology. Comparison of the PRL response patterns, after HAL administration by analysis of variance for repeated measures (ANOVAR) for drug treatment and time, revealed a highly significant time effect (F=28.98, p=0.000) and a significant treatment by time interaction (F=8.27, p=0.000008). Namely, in the drug-free state significant increases were found in the PRL levels after i.m. HAL administration which were significantly reduced during treatment with OLZ, indicating moderate receptor blockade.

P46.09

Psychopharmacotherapy or psychotherapy of anxiety disorders – one year results

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The purpose of our one-year study was a comparison of psychopharmacotherapy and psychotherapy of acute outpatients with anxiety disorders during crisis periods.

Patients and methods: 20 patients/DSM-IV and ICD-10 classifications used hydroxyzin and psychotherapy for 12 weeks.