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APPLYING THE WORK OF WILFRED BION TO THE TREATMENT OF PSYCHOTIC ADOLESCENTS

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Wilfred Bion played an important role in developing modern psychoanalytical approaches to psychotic phenomena. He developed three key theories in relation to the treatment of psychotic patients including: the concept of a non-psychotic part of the personality, the concrete nature of psychotic thinking and maternal reverie. The first concept postulates that psychotic patients will always have a non-psychotic part of the personality with which the therapist can make contact. In contrast psychotic drinking is inflexible and magical, and the therapist is obliged to operate in a concrete manner taking account of internally-generated explanations. The third concept requires the therapist to contain the unmanageable experiences of the patient until such time as they can be returned in an appropriate manner which facilitates individuation and development. Bion's approach provides a model for understanding psychotic patients but is limited in regard to its practical applicability. Within this multifaceted description of psychotic experience, the therapist would have to provide a range of very different therapeutic experiences including containment of the patient's infantile self, an understanding of a childlike frame of mind, and providing the patient with the opportunity to be treated like a responsible adult. The paper will discuss Bion's key concepts relating to the understanding and treatment of psychosis, and discuss how these approaches can be applied in a practical and user-friendly manner within a multi-disciplinary in-patient clinical setting.

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EFFECTS OF CLOZAPINE ON AUTONOMIC FUNCTIONS: NON-INVASIVE BIOMONITORING FROM THE SKIN

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Intro: Clozapine has strong anticholinergic and antiadrenergic properties and therefore it exerts side effects such as increased heart rate and orthostatic hypotension. We performed a clinical study to evaluate the impact of clozapine on autonomic control of the heart, acral vessels, and sweat glands.

Methods: Autonomic measurements from 25 patients suffering from schizophrenia (age 18–58 years) receiving by the mean 400 mg Clozapine p.d. for at least 4 weeks, were compared with data from 25 healthy subjects. Parameters of heart rate variability, skin blood flow, and skin conductance were assessed. Autonomic responses of vessels and sweat glands were provoced by a single deep breath, which causes brief acral vasoconstriction (VC) and increase of perspiration (Skin Conductance Response) due to a temporary increases of sympathetic outflow.

Results: Clozapine caused a significant reduction of heart rate variability (e.g. mean TP was 972.9 ms2/Hz in the control group versus 54.9 in the clozapin treated patients) and an impairment of sudomotor reaction (mean SCR: 0.5 μS) as compared to healthy controls (mean SCR: 3.4 μS). The redilation phase of VC was significantly prolonged under Clozapine (mean: 9.4 s) as compared to the controls (mean: 4.1 s).

Conclusion: Under treatment with clozapine clinical relevant effects on autonomic functions may appear. These autonomic dysfunction can be objectified by measurements of HRV, VC and SCR, indicating effects of clozapine on cholinergic and norepinephrinergic autonomic functions. Long-term studies are needed to assess the clinical implications (e.g. prediction of treatment response) of these findings.

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BEHAVIOURAL GENETICS OF COGNITIVE DISTURBANCES IN SCHIZOPHRENIA

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The present study aimed at searching for genetically independent domains of cognitive disturbances in schizophrenia and at the level of predisposition to the psychosis. ICD-10 schizophrenics and schizoaffectives (n = 83) and their healthy first-degree relatives (n = 127) completed a battery of tests designed to measure attention, memory, thinking, verbal and communication abilities. Test scores were standardized based on the means and standard deviations of 110 normals and subjected to a principal component analysis. Factors obtained were further investigated with behavioural genetics methods in 56 families of schizophrenics. In addition, we examined correlations of these factors with EEG-measures in subsamples of 44 patients and 66 relatives. In the patients, the analysis revealed four factors labelled the mental activity (with heritability (Ga) of 42%), executive working memory (Ga = 12%), short-term memory for words and stories (Ga = 61%), and verbal fluency (Ga = 6%). The factors in the group of relatives were short-term memory for words (Ga = 52%), semantic organization (Ga = 43%), executive working memory (Ga < 20%), communication functioning (Ga = 34%). The cognitive factors had specific and shared EEG-correlates. In the patients, the shared EEG-correlates were EEG-measures of left temporal regions. In the relatives, these were EEG-measures of right anterior and bilateral posterior regions. Genetic correlations between the factors were low. These results suggest that: 1) peculiarities of verbal short-term memory, semantic organization and communication functioning may be genetically independent cognitive indicators of liability to schizophrenia; 2) mental activity, executive working memory and verbal fluency deficits are rather cognitive indicators of different pathophysiological factors of the overt illness.

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MULTICENTER DOUBLE BIND RANDOMIZED OARRALKEL-GROUP CLINICAL TRIAL OF EFFECTIVENESS OF THE COMBINAION CLOMIPRAMINE PLUS LITHIUM CARBONATE VERSUS CLOMIPRAMINE PLUS PLACEBO IN THE TREATMENT OF UNIPOLAR DEPRESSION

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Introduction: The primary objective of this study was to compare the effectiveness of a combination of clomipramine + lithium (C+L) with that of clomipramine + placebo (C+P) in patients with unipolar major depression, during the first 11 days of treatment. Secondary objectives were the assessment of effectiveness after 6 weeks and assessment of the safety of the combination and lithium carbonate.

Methodology: C+L and C+P were copared for 6 weeks in a multicenter randomized trial of 149 patients hospitalized (DSMIV diagnostic of major depression). Effectiveness was evaluated using the standard MADRS and CGI scales.

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