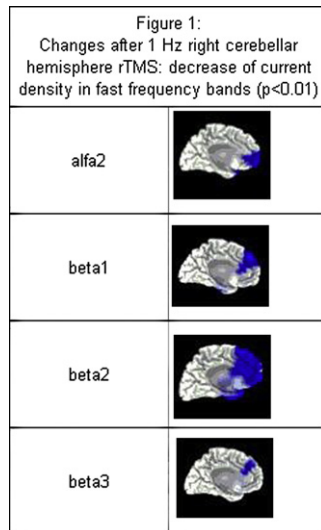


rTMS. No significant changes after 1 Hz vermis rTMS may suggest either large distance between the rTMS coil and the vermis or our sample is too small to make definitive conclusions.

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P0325

Electroconvulsive therapy in autism: Hope for severe psychopathology

L.E. Wachtel. *Department of Psychiatry, Johns Hopkins School of Medicine, Johns Hopkins Hospital, Baltimore, MD, USA*

Aim: This paper reviews electroconvulsive therapy (ECT) in children and adults with autism and concomitant psychopathology, including affective illness, catatonia and self-injury. Case examples are highlighted.

Method: A review of the English-language literature on ECT in pediatric, adult, autistic and mentally retarded populations was conducted, with focus on catatonia, drug-resistant psychiatric illness and self-injury. This was combined with the author's experience with two autistic adolescents in catatonic stupor, and an autistic child and young adult with severe affective disturbance and self-injury. All four patients underwent ECT with excellent symptom resolution.

Results: ECT is an effective and safe treatment modality across the lifespan for a wide range of psychopathology. Current literature supports the appropriateness, safety and efficacy of ECT in autistic and intellectually disabled populations, where patients suffer from an increased incidence of psychiatric and behavioral disturbances. The following cases are presented:

Pt 1: An 18-year-old female with autism, MR and self-injury in classic catatonic stupor.

Pt 2: A 15 year-old male with autism and MR in catatonic stupor confounded by bradycardia and arrhythmias.

Pt 3: A 19-year-old male with autism, MR, profound depression, tics, compulsions and catatonic symptoms accompanied by self-injury.

Pt 4: An 8-year-old boy with autism, MR, cyclical mood disturbance and intractable self-injury confined to full-body protective equipment.

Conclusion: Electroconvulsive therapy affords excellent symptom remission in autistic individuals with affective illnesses and catatonia, which may be complicated by dangerous self-injury. Prompt diagnosis and pursuit of ECT significantly improve clinical outcome in this patient population.

Poster Session II: Lithium and Other Mood Stabilisers

P0326

Lithium nephropathy in Sweden

H. Bendz¹, S. Schön², M. Aurell³, P.O. Attman³. ¹ *Department of Psychiatry, Lund University Hospital, Lund, Sweden* ² *Department of Internal Medicine, Ryhov County Hospital, Jönköping, Sweden* ³ *Department of Nephrology, Sahlgrenska Academy, University of Göteborg, Göteborg, Sweden*

Background and Aims: Uncertainty prevailing about the role of lithium for the development of chronic renal failure; and the prevalence of lithium-induced end-stage renal disease (ESRD) being virtually unknown, we decided to clarify these issues.

Methods: Using a questionnaire we counted the number of former or present lithium patients among all ESRD patients on renal replacement therapy (RRT, i.e. dialysis or renal transplant) in two defined regions in Sweden, comprising 30 % of 9 million Swedes. We also counted the number of all lithium patients in the areas. A chart review is under way to retrieve clinical data for the assessment of the nephrotoxic effect of the lithium therapy.

Results: There were 2,270 RRT patients (0.08 % of the general population). Twenty-seven of them (1.2 %) acknowledged long-term lithium treatment. Seventeen were on dialysis, ten were transplanted. The concurrent number of lithium patients was 3,567.

Based on our own earlier studies we estimate that 900 (25 %) of the lithium patients in the two regions had been on lithium ≥ 15 years. Thus, twenty-seven of the long-term lithium patients in this study were subject to RRT.

Conclusions: The prevalence of lithium nephropathy in the RRT population is at least 1 %, 0.8 % in the entire lithium population, and approximately 3 % among long-term lithium patients. The risk of developing ESRD is higher when on lithium therapy compared to the general population. Our results so far underscore the need for adequate safety programs, ascertaining the early detection of lithium nephropathy.

P0327

Efficacy of Quetiapine monotherapy in rapid cycling bipolar disorder compared to Sodium Valproate: A pilot study

T. Drieling¹, J.M. Langosch¹, N.C. Biedermann¹, C. Born², J. Sasse³, H. Bauer⁴, J. Walden¹, M. Bauer³, M. Berger¹, H. Grunze². ¹ *Department of Psychiatry, Albert-Ludwigs-University of Freiburg, Freiburg, Germany* ² *Department of Psychiatry, Ludwig-Maximilians-University of Munich, Munich, Germany* ³ *Department of Psychiatry, Carl-Gustav-Carus-University of Dresden, Dresden, Germany* ⁴ *AstraZeneca GmbH, Wedel, Germany*