

**P106**

The prevalence of the metabolic syndrome in bipolar patients

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**Background and aims:** Two studies to date have been published regarding the prevalence of the metabolic syndrome in bipolar patients. The unadjusted prevalence rates reported were 30% and 32%. The aim of this study was to evaluate the prevalence of the metabolic syndrome in a group of 142 bipolar patients from Spain.

**Methods:** Bipolar patients (ICD-10 criteria) from 11 centres in Spain were assessed cross-sectionally for metabolic syndrome according to the NCEP ATP III criteria.

**Results:** The mean age was 47.3 (SD 14.5), 51.1% were male. On average, patients were receiving 2.8 (SD 1.3) drugs for the treatment of their bipolar disorder. Ninety-one percent were receiving mood stabilizers, 63.4% antipsychotics and 29.6 antidepressants. Eighty-seven percent of the antipsychotics prescribed were atypicals. The overall prevalence of metabolic syndrome in our sample was 24.6%. Fifty-seven percent of the sample met the criterion for abdominal obesity, 37.4% for met the criterion for hypertriglyceridemia, 36.4% for low HDL-cholesterol, 25.2% for high blood pressure and 12.5% for high fasting glucose. No statistically significant difference was found between with and without the metabolic syndrome for gender, illness status (acute versus in remission), CGI-S-BP scores and number of medications used. Patients taking tow mood stabilizers had significantly higher metabolic syndrome rates than patients taking one mood stabilizer and than patients without mood stabilizer treatment (40% versus 17.8% and 11.1% respectively,  $p .02$ ).

**Conclusions:** The prevalence of the metabolic syndrome in bipolar patients is high. It appears to be higher than that estimated for the Spanish general population.

**P107**

Investigation of child-family relations using family drawing in kindergarten children in Kaunas

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**Aim:** Child – Family relations studied using family drawing method reveal risk factors of a future mental disorders development and other psychological problems in preschool children.

**Methods:** The pupils from 12 kindergarten (n=161, 85 boys, 76 girls, age 3-6 years) were tested during the “Teddy bear hospital” project carried out by Lithuanian Medical Students’ Association. The priority, accuracy of depiction and collocation of family members in the drawing were evaluated. Software package SPSS 10.0 was used for data processing.

**Results:** 31,1% of all children drew themselves as the first object. 56% of these children were in age 5-6 years. Possibly the self perception of the group is underdeveloped. 21.1% of all children didn’t drew

themselves at all. That suspects their weak relation with the family. The mother and the child himself – were clearly emphasized in 60.3% of the drawings. 31.1% drew themselves and 29.2% - drew the mother as the first object. The tendency of the girls to identify themselves with the mother and for the boys – with the father was clearly expressed. Integral bodies (all big parts of the body) were depicted in 57.1% of all drawings. 63% of such drawings were made by elder children.

**Conclusions:** Family drawing test revealed underdeveloped self perception of investigated population. Stronger relation of girls with their mothers and boys with their fathers was clearly expressed. Age related development of intellectual level of the child was reflected by integral body drawing.

**P108**

Gender-related effect of parental age on age-at-onset in bipolar disorder

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**Aim:** We investigated the effect of the parental age at child birth on the age-of-onset (AO) of bipolar disorder in a sample of 336 bipolar I patients directly interviewed with DIGS (DSM-IV-R criteria) in connection with the type of family history (FH): 1) no family history of major psychoses (sporadic); 2) only recurrent unipolar major depression (MDD-RUP); 3) bipolar disorder, schizoaffective disorders or schizophrenia (BP/SA/SCHIZ).

**Method:** Familial psychopathology data were collected through direct interview about 76% of first-degree relatives and through FH-method (FIGS-interview) about first- and second-degree relatives not available to direct investigation.

**Results:** Linear/logistic regressions showed a significant effect of the paternal age (PATAGE) on AO in offspring in the total sample ( $p=0.040$ ); PATAGE was negatively correlated with AO in offspring when interacting with the proband gender ( $p=0.026$ ) and FH-type ( $p=0.003$ ). The division of the patients by sex revealed a significant association between PATAGE and AO only in females ( $p=0.003$ ); the fathers of females with FH of MDD-RUP and the fathers of sporadic females were significantly older than the fathers of females with FH of BP/SA/SCHIZ. The first two groups generated the negative correlation appearing in the total sample. No correlation between PATAGE and proband AO was observed in the third group. Maternal age had no impact on AO in offspring.

**Conclusion:** The PATAGE effect on AO in bipolar offspring was related to female sex and FH-type and it was detectable in bipolar probands with no familial loading or with milder loading like the MDD-RUP.

**P109**

Differences in brain activation during working memory and facial recognition tasks in patients with bipolar disorder with lamotrigine monotherapy

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