

EV1105

Clozapine treatment of adolescent refractory emergent emotionally unstable personality disorder: Challenges in diagnostics and therapeutics

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Despite recent advances precision diagnostic criteria on how best to diagnose and treat EUPD remains debated. Therapeutic indication and appropriate use of anti-psychotics including clozapine in this patient group remains unclear. It is debated about personality disorder being diagnosed in children and adolescents, overall it is much more acceptable for adolescents to be given a diagnosis of 'emerging' personality disorder if they exhibit clinical features of such. Clozapine has been used (as an off-license treatment) in adults diagnosed with personality disorder improving psychopathology and quality of life. These patients have been tried on numerous other treatments. In a secure unit for adolescent girls who meet the criteria for a diagnosis of emergent personality disorder who posed serious risks to themselves and others three were given a trial of clozapine The off license use of clozapine was tried in all three patients showed a reduction in incidents, reduced need for polypharmacy and improvement in their qualities of life. One cannot account for these changes being the result of clozapine alone; however, these cases add to the growing body of evidence of the benefits of clozapine in patients with emergent personality disorder.

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e-Poster Viewing: Psychophysiology

EV1106

Use of eye-tracker device to detect attention deficits in adults with ADHD

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Introduction Adult patients with ADHD may go unrecognized. This can result in psychosocial and functional decline.

Objectives To investigate the use of objective testing, with an eye-tracker device in the diagnosis of adult patients with ADHD.

Methods Case control study. Inclusion criteria were aged 18–65, minimum 5 years of education and literate in English. Exclusion criteria were visual impairment, amnesia and learning difficulties. ADHD was diagnosed with Conners' adult ADHD diagnostic interview (group A, $n=15$) and were matched for gender and age against normal controls (group B, $n=33$). Participants completed four computer-based tasks while their eye movements were recorded. The tests included (i) Stroop effect test, (ii) Stroop effect test with visual aid, (iii) perceptual selectivity test and (iv) Saccadic interference. accuracy (%) and response time (msec) for tests (i–iii) measured while for test (iv), saccade count, average saccade amplitude and average fixation duration.

Results Stroop test accuracy showed a statistically significant difference between group A and group B ($P=0.004$). Stroop response time also showed a statistically significant difference between the two groups ($t=3.228$, $df: 46$, $P=0.001$). For test (ii), there was a significant difference for response time ($t=2.326$, $df: 46$, $P=0.024$) but not for accuracy. For test (iii), the results were statistically significant for accuracy; ($t=2.682$, $df: 46$, $P=0.010$) and for response time ($t=4.028$, $df: 46$, $P=0.001$). There were no significant differences in the saccadic interference test.

Conclusion Adults with ADHD have a longer response time and perform less accurately than controls. Thus, these data demonstrate that there is a use for objective tests (tests i–iii) in the diagnosis of adult ADHD.

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EV1107

Trauma-related dissociation: Psychological features and psycho-physiological responses to script-driven imagery in borderline personality disorder

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Background Defense reactions to threatening situations are vital adaptations to stress that protect organisms from injury and ensure survival. We retrospectively investigated the role of peritraumatic dissociation (PD) in the occurrence of severe psychopathology and dissociative patterns of reactions in borderline personality disorder (BPD).

Methods We recruited 28 patients with a clinical diagnosis of BPD and 15 healthy controls. The BPD group was divided according to the level of PD (low vs. high): BPD and PD ($n=15$) and BPD only ($n=13$). We conducted an extensive investigation of history of trauma, clinical status, and measurements of emotional and physiologic responses to recall of personalized aversive experiences.

Results Participants with BPD and high PD displayed highest degrees of trauma exposure and clinical symptoms. Their significant heart rate decline during the imagery of personal traumatic events was opposed to the heart rate increases exhibited by the other two groups and may indicate a dissociative reaction pattern. Skin conductance responses did not differentiate between groups. Several emotional responses to imagery provided also support of the idea that PD may play a role in memory processing of traumatic events and thus in the aggravation and maintenance of symptoms in particularly severe forms of BPD.

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Smooth pursuit eye movements in psychiatric inpatients

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Introduction Eye movements are used in several studies as a biomarker in order to evaluate cortical alterations in psychiatric disorders. Pursuit eye movements' deficits were found both in