

**S11.05**  
THEORETICAL AND METHODOLOGICAL  
CONSIDERATIONS FOR FUTURE DYSCONNECTIVITY  
RESEARCH

K. Vogeley\*, P. Falkai. *Department of Psychiatry, University of Bonn, Germany*

Modern schizophrenia research is focussing on two different approaches. Firstly, psychopathological syndromes are reconstructed as neuropsychological core deficits, which can then be operationalized, especially for functional imaging studies. Secondly, research is concentrated on the organic brain changes underlying schizophrenia looking at certain candidate regions. Brain studies are performed with different neuroscientific methodologies comprising structural and functional imaging studies, and post mortem studies. Although these methodologies have generated evidence for pathology of the frontal and the temporal lobes and the limbic system, studies failed to identify a single site of brain pathology underlying schizophrenia. In contrast to a naive assumption of a circumscribed pathology in the brain, the leading hypothesis is based on the idea of a disturbed network which involves different brain structures leading to a complex dysconnection syndrome. Dysconnection may occur as a disturbance of cortico-cortical, interhemispheric and/or cortico-subcortical connectivity. The talk focuses on fronto-temporal and fronto-parietal connections and presents functional neuroimaging and post mortem data, in which a multiregional correlational approach was performed.

---

**SES02. AEP Section “Emergency Psychiatry”:  
Emergency psychiatry and substance abuse**

*Chairs:* D. Moussaoui (MA), G. Invernizzi (I)

---

**SES02.01**  
DRUG ABUSE AND PSYCHIATRIC EMERGENCIES IN  
DEVELOPING COUNTRIES

D. Moussaoui. *Morocco*

No abstract was available at the time of printing.

**SES02.02**  
CRISIS INTERVENTIONS IN ADDICTIONS

O.M. Lesch. *University of Vienna, Department of Psychiatry, Austria*

From an epidemiological point of view alcohol and drug abuse is an important factor, from which complications in intensive care patients may arise. Therapeutic concepts have to take into regard a possible alcohol or drug intoxication or withdrawal. Drug related disabilities influence the effects but also the side effects of all medication applied. The different abused drugs are followed by individual withdrawal syndromes, different in nature, duration and symptoms.

From the viewpoint of addiction treatment the symptoms in crisis situations are always a mixture of severity of intoxication or withdrawal, of the basic disturbances, drug related disabilities and of social strain, often even a total isolation. In crisis intervention we have to define a short term aim and a long term plan.

The first aim in crisis intervention is an immediate medical and social help (protection, support, admission, help for a setting in which the patient can stay sober, special withdrawal treatment, treatment of drug related disabilities). Each crisis intervention gives the chance for a motivation process following the proposal of Di Clemente and Prohaska. In the long term treatment an individual strategy has to follow the individual patterns of subgroups, as e.g. described in alcohol dependent patients. The specific psychopathological and medical syndrome, observed during a crisis, influences in modern addiction therapy the long term treatment concepts. This will be demonstrated in crisis intervention of alcohol dependent patients, whereby 3 different symptom patterns of acute withdrawal states will be outlined.

**SES02.03**  
EMERGENCY DRUG ABUSE AND SECURITY PROBLEMS:  
WHAT ABOUT TREATMENT?

I. Ferrand

No abstract was available at the time of printing.

**SES02.04**  
SUBSTANCE ABUSE IN PSYCHIATRIC EMERGENCIES:  
THE FAMILY CRISIS AND ITS DEVELOPMENTS

G. Invernizzi

No abstract was available at the time of printing.

---

**S12. Internet and clinical psychiatry**

*Chairs:* J.E. Mezzich (USA), S. De Risio (I)

---

**S12.01**  
GRAND ROUNDS: THE NEXT GENERATION

R.C. Hsiung. *Department of Psychiatry, University of Chicago, USA*

Grand Rounds is a staple of continuing medical education and has the potential to be transformed by the Internet. We have made it possible both to participate in our Grand Rounds "live" and to play back recorded Grand Rounds online. The major advantage is increased accessibility. Patient education and public relations purposes are also served. It should be possible to offer continuing professional education credit. The more experience with the Internet psychiatrists gain and the more widespread and inexpensive computers and Internet access become, the clearer the advantages of this next generation of Grand Rounds will be.

**S12.02**  
SETTING UP THE ROYAL COLLEGE OF PSYCHIATRISTS'  
WEBSITE

D.S. Jago. *The Royal College of Psychiatrists, London, UK*

The College's website ([www.rcpsych.ac.uk](http://www.rcpsych.ac.uk)) has evolved constantly since its creation, and if it is to remain healthy it will continue to grow and develop indefinitely. To be of any value, websites must be driven by the needs of users, and the College site is moving gradually from a reflection of the College's internal structure towards a more user-driven model. Along the way, we are trying