is expected that frequency of depression, neurocognitive disorders and effective antidepressant treatment will be found to correlate to the profile of immune biomarkers. These findings might help to understand the etiology of depression in HIV, and specifically the role of inflammation and immunological changes.

*Disclosure of interest*    The authors have not supplied their declaration of competing interest.

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### W004
### Psychosocial screening of alcohol liver disease patients before liver transplantation

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In Europe, 30% to 50% of liver transplantations are currently due to alcoholic liver disease (ALD). In the United States, this percentage is 17.2%. Post-transplant survival and other predictors of clinical course do not differ significantly from those in other types of transplanted patients, as long as there is no relapse of drinking. However, 20%–25% of these patients lapse or relapse to heavy drinking post-operatively, which has been associated with an increased risk of liver damage and mortality. It is therefore crucial to design specific selection and follow-up strategies aimed at this particular type of patient. Several good and poor prognosis factors that could help to predict a relapse have been suggested, among them the duration of abstinence, social support, a family history of alcoholism, abuse diagnosis versus alcohol dependence, non-acceptance of diagnosis related to alcohol use, presence of severe mental illness, non-adherence in a broad sense, number of years of alcoholism, and daily quantity of alcohol consumption. In this article, we discuss these and other, more controversial factors in selecting ALD patients for liver transplantation. Abstinence should be the main goal after transplantation in an ALD patient. In this article, we review the several definitions of post-transplant relapse, its monitoring and the psychopharmacological and psychotherapeutic treatment.

*Disclosure of interest*    The author has not supplied his declaration of competing interest.

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## Workshop: Women in psychiatry: Mind the gender gap

### W005
### The current status of women in psychiatry in Europe

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For more than two decades, psychiatry has retained its position amongst the medical specialties with the highest proportion of women entering residency programs. The percentage of women in junior academic positions in psychiatry is also high and consistently higher than that of men. However, the number of women in positions of leadership remains disproportionally low at around 5% with no evidence of improvement over time. The phenomenon of female under-representation is not unique to psychiatry or academia. Women are under-represented in all fields of leadership and this is a matter of wider societal concern. In this presentation, I will discuss external and internal barriers that women face and detail positive actions that can help women succeed in their careers.

*Disclosure of interest*    The author has edited and co-authored a book on "Women in Academic Psychiatry: A mind to Succeed"

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### W006
### Barriers to gender equality in career advancement and leadership

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Life as a researcher includes a large amount of competition and a heavy workload. Professor's tasks comprise, besides their own research, to lead your research team, to have the responsibility for higher education, expertise in diverse contexts, review of scientific articles, to seek financial support, to work with national and international committees, to serve in administrative posts at the university and in international associations, to write articles, books and book chapters, to attend meetings and conferences, and to address the many other tasks that may arise throughout one's career. This makes one dependent on skillful co-workers, which should not be taken for granted. Given the constant flow of incoming requests, one has to think and choose before agreeing to commit to a task at hand, in order to not set aside your own research. This demands a high capability to prioritize. The choice of a life partner who can share both professional and private interests, a partner who understands, encourages and supports, while at the same time gives the necessary critical feedback, is a treasure. Freud said "love and work are the cornerstones of our humanness", but work must be pleasurable thus try to combine work, love, and play.

*Disclosure of interest*    The author has not supplied his declaration of competing interest.

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## Workshop: Mental health impact of SUDS on neurodevelopmental mental disorders

### W007
### Neuroimage studies: The effect of methylphenidate in cocaine users with ADHD

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*Background*    Attention deficit/hyperactivity disorder (ADHD) is an important contributing factor in the pathophysiology of substance use disorders (SUD), and ADHD occurs more often in populations with SUD compared to the general population. This high prevalence rate and comorbidity may relate to a shared neurobiological vulnerability, including a deregulation of the brain's dopamine system. This comorbidity directly impacts the treatment of ADHD: treatment with methylphenidate is less effective in patients with ADHD and SUD compared to ADHD patients without SUD.

*Methods*    We investigate the underlying neurobiological background of reduced treatment effectiveness for adult ADHD patients with comorbid SUD.

*Results*    We observed lower available dopamine transporters, as well as a reduced binding of methylphenidate to these transporters, and more neurocognitive dysfunction in adults ADHD patients with SUD compared to ADHD patients without SUD.

*Conclusion*    Comorbid ADHD and SUD has a high prevalence rate and reduces ADHD treatment effectiveness, which makes it necessary to screen for the presence of ADHD in patients