

An issue however for modern psychiatry as a whole is how best general and forensic psychiatry should interact.

### PS02.03

Quality assurance in forensic psychiatry

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The problems of quality assurance have been discussed in a working group between specialists in forensic psychiatry and judges of the High Court in Karlsruhe / Germany. This resulted in two publications on "Minimal standarts for the evaluation of legal responsibility" (2005) and "Minimal standarts for the evaluation of prognosis in criminal offenders"(2007).

Principles and consequences of these standards and implications for the forensic evaluation of offenders with personality disorders will be presented.

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## Workshop: Scientific reading and writing in psychiatry

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### W01.01

Publication trends in high impact factor journals 1994-2004

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**Aims:** To describe the characteristics of psychiatric research and their changes within one decade by analysing the publications in three high impact general psychiatric journals.

**Methods:** All articles published in the "American Journal of Psychiatry", "British Journal of Psychiatry" and "Archives of General Psychiatry" in 1994 and 2004 were considered for analysis. The publications were classified as "research" or "non-research" articles and further categorised according to a range of variables including "methodology", "research area", "subject matter"; "number of participants" and "statement on funding". Data were analysed descriptively.

**Results:** In 2004 the overall percentage of non-research articles was 6,8% higher than in 1994. The use of different research methods remained fairly stable, with the exception of case-control studies, which accounted for a slightly higher percentage of all publications in 2004 compared to 1994. Further relevant developments included the tremendous increase in published studies involving neuro imaging techniques from 1994 to 2004. An increase in publications was also found for genetic and cross-cultural studies, while the number publications in most other research areas remained relatively stable. Moreover, the percentage of papers reporting funding also increased significantly from 1994 to 2004.

**Conclusions:** The systematic analysis of journal content can be used to assess the state of psychiatric knowledge and practice. Highlighting advancements and changes over time it may reflect research trends and policies.

### W01.02

Qualitative research methods in psychiatric science

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**Background and Aims:** Qualitative research has been met with growing interest in recent years. Several trends in medical and psychiatric practice, including patient orientation, the recovery movement and the search for evidence-based psychotherapeutic interventions, have propelled scientific inquiry into subjective perspectives on experiencing mental health problems, their consequences, and psychiatric services. While initially largely criticised as lacking scientific rigour, the value of qualitative research has increasingly been recognised, following a certain disenchantment with genetic research, the acknowledgement of methodological limitations in measuring subjective constructs such as needs, quality of life or stigma with standardised tools, and the definition of clear quality criteria for qualitative studies.

**Methods:** Multiple databases (Ovid Medline, PsycINFO, PsychLit, Cochrane Reviews) were scanned for relevant publications in the period from 1990 to 2007.

**Results:** A proliferation of qualitative literature could be noted, especially from 2000 onward. Published research focuses on patients' and caregivers' experiences of mental health problems (subjective illness models, stigma, help-seeking motivations) and of using mental health services (expectations, empowerment, service evaluation). Among mental health professionals, experiences of service provision (service development, job motivation, stress & burnout) were studied.

**Conclusions:** Qualitative methods are becoming an integral part of the methodological canon of psychiatric research. This presentation gives an overview of publication trends regarding topics covered, journals featuring qualitative papers, and methodological quality criteria. It further focuses on fields of application for qualitative vs. quantitative methods and discusses specific requirements on scientific writing in publishing qualitative data.

### W01.03

Current developments and challenges for publishing houses

J. Marsh. *Wiley-Blackwell, London, UK*

New technologies have always brought new challenges even as they solve old problems. The 21st century is seeing a revolution in scientific, technical and medical publishing. The stage was set a few years ago, when publishers began migrating their content to the online environment, in parallel with continued print publication, first journals, then books. Initially, the premise was still that the print product was primary and the electronic version just a way of reaching a larger audience. As new functionality was introduced, expectations were raised and content now has to be much more than an electronic version of a printed page: it must include easy cross-referencing both internally within a document and to external sources, without regard to the owner or publisher of those sources; it must accommodate audiovisual material; and all this must be done rapidly and seamlessly.

But the target has already moved further away: the real challenge now is to deliver the interactivity that will be expected from the generation that communicates through MySpace and Facebook. How do we maintain the status of the textbook when students look for answers on Wikipedia? Who will read a journal paper describing a particular gene when they can log into GenBank? What is the role of the clinical reference work when doctors carry PDAs loaded with guidelines and treatment algorithms? The publishing house that successfully answers these questions will be the one that survives to face the challenges of the next decade.

### W01.04

Why books?

G. Stanghellini. *Department of Biomedical Sciences, University of Chieti, Florence, Italy*

In the context of this Joint Section Workshop – jointly organized by the AEP Sections 'Women's Mental Health' and 'Philosophy and Psychiatry' - on 'Scientific reading and writing in psychiatry' the title of this talk poses the question of the rapport between two kinds of knowledge: theoretical knowledge and practical knowledge. Some clinical problems and a paradox derive from this: Does theoretical knowledge stand in the way of practical skills like the immediate grasping of the other's experience as in empathic understanding? Does theoretical knowledge act as a set of prejudices tackling "taking inside" the other's thoughts and feelings? The paradox is the following: Do we understand other persons thanks to our prejudices (or a set of commonly shared prejudices)? A tentative way out from these problems and paradoxes are Giordano Bruno's concept of "docta ignorantia" or Edmund Husserl's definition of the phenomenologist as an "eternal beginner". The notion of epoché, i.e. bracketing one's background knowledge in order to highlight it, may prove useful too.

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## Workshop: Danish national schizophrenia project, 5 years follow up

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### W02.01

The Danish national schizophrenia project – two- and five-year follow-up

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**Background:** The Danish National Schizophrenia project for persons with a first episode psychosis within the schizophrenia spectrum (F20-29) has initially collected data for 562 persons, included consecutively in a 2 years period (1997-1999). The investigation covers 45% of the Danish population.

**Objectives:** To present a prospectively investigation of three types of treatment: Psychodynamic Psychotherapy, Integrated Treatment and Treatment as usual.

**Results:** Measurements of psychopathology, social functioning, and psychological functions (Rorschach and WAIS) showed that the group of patients who were treated by the intervention methods did better than the group who received the Treatment as usual. Preliminary 5 years data will also be indicated.

**Conclusion:** After two years patients receiving integrated treatment and the psychodynamic treatment will do better than the group of patients getting Treatment as usual. Integrated treatment is superior compared with the two other modes of treatment. After five years only minor advantages of adding psychodynamic treatment to Treatment as usual can be shown on the general symptom and social functioning scales.

### W02.02

Mental health services in Denmark. Where are people with schizophrenia treated in the Danish national schizophrenia project?

A. Koster. *Psychiatric Center, Rigshospitalet, Copenhagen, Denmark*

Mental health services in Denmark are rapidly changing in terms of heightened focus on outpatient and assertive treatment. Community mental health services are closely connected with inpatient treatment and comprises comprehensive services with easy accessibility. There is a strict division between the responsibility of mental health services and social services concerning the individual patient. This puts emphasis on the necessity to provide continuity and to coordinate services between the sectors. The changes in service delivery which has been taking place during the 10 years since the start of Danish National Schizophrenia project will be described and related to key issues of the treatment as usual.

### W02.03

The Danish national schizophrenia project. Premorbid functioning and early course in first episode psychosis

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**Background:** Investigations in the premorbid and early phases of psychosis are important for enhancing early intervention programmes. The purpose of the present study was to examine premorbid functioning in a large sample of individuals admitted to their first treatment for psychosis.

**Method:** 184 first-episode psychotic patients participated in the study. The relationship between premorbid adjustment, initial presentation and one-year outcome was examined using Premorbid Adjustment Scale (PAS), Positive and Negative Symptoms Scale (PANSS) and Global Assessment of Functioning (GAF). Social and academic dimension of PAS was analysed. Cluster analyses were used to identify patterns of premorbid adjustment over four developmental periods.

**Results:** A poorer premorbid adjustment was consistently related to more negative symptoms at initial presentation and more negative symptoms and poorer social functioning at one-year outcome. PAS contributed to outcome at one year independent of initial presentation. No relationship between premorbid adjustment and DUP was found and DUP was associated only with positive symptoms at one year. A stable-poor and a deteriorating premorbid adjustment course lead to a similar poorer initial presentation and poorer outcome at one year compared to a stable-good premorbid adjustment. The social dimension seems to contribute more importantly to outcome than the academic dimension.

**Conclusions:** The results support a heterogenetic view of schizophrenia where premorbid adjustment and DUP could be understood as influencing different rather independent pathological domains. The findings point to a possible need for early intervention in case of social maladjustment, independent of later transition to psychosis.

### W02.04

Danish national schizophrenia project. Psychiatric service development in Denmark during the course of DNS

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**Background:** Conceptualisation of disorders amongst the public as well as service delivery are in some undefined way related to outcome in a naturalistic long term multicenter study, as the Danish National Schizophrenia project. DNS was planned from 1995-1997. Patients were included from 1997-1999. The follow up took place until