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Symposium

Best of 2020 Research that advanced psychiatry and changed our practice

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Abstract

BOEPA001

Addiction

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Addiction: what did we learn in 2020? Every year several thousand scientific papers on alcohol, drugs, and nicotine are published. The picking of five papers must obviously be arbitrary and subjective. However, the scientific literature of 2020 cannot be regarded without acknowledging the many papers concerning the COVID-19 pandemic. Some studies on alcohol, drug, and nicotine show a small increase, some a small decrease, but many no change. The addiction consequences of the pandemic and the societal lockdowns may thus be less dramatic than feared. This is true even if many papers reported higher mental distress during the pandemic and there is a close relationship between mental distress and substance use, a relationship that has been further confirmed in studies from the past year. Furthermore, a review concerning the addictive potential of cannabis has further alarmed us of the current liberalization also affecting Europe. A new figure of "1 in 3" cannabis users getting hooked may possibly replace the old "1 in 10". Furthermore, the year has brought even more solid knowledge of the transition from substance-induced psychosis (SIP) to schizophrenia, teaching psychiatrists in acute psychiatry an important lesson on how to view SIP. As many as 1 in 3 patients with SIP will eventually receive a diagnosis of schizophrenia, making SIP the most powerful risk factor for schizophrenia known. Lastly, the lecture will present a very novel and unexpected finding regarding alcohol elimination, that may change how we treat intoxications with different alcohols.

Disclosure: No significant relationships.

BOEPA003

Bipolar affective disorder

A. Young

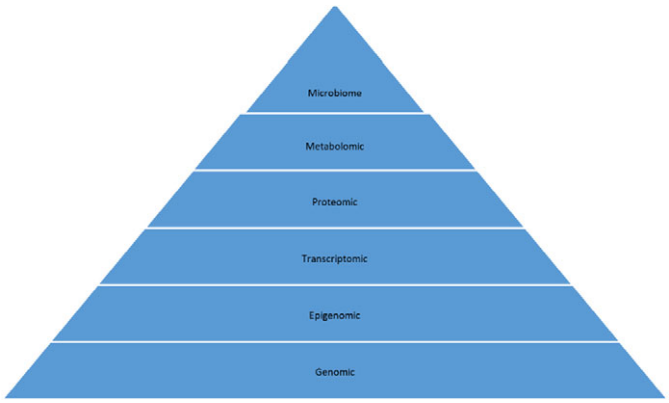
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Abstract Body: Abstract: Biomarkers for diagnosis and treatment of Bipolar Disorder: hope or hype? Professor Allan Young, Centre for Affective Disorders, IoPPN, KCL London, SE5 8AF. allan.young@kcl.ac.uk The use of "biomarkers" (biological markers) in basic and clinical research as well as in clinical practice has become so commonplace in many areas of medicine that their presence as primary endpoints in clinical trials is now widely accepted. In clinical disciplines where specific biomarkers have been well characterized and repeatedly shown to correctly predict relevant clinical outcomes across a variety of treatments and populations, this use is entirely justified and appropriate. However, the validity of biomarkers in most psychiatric disorders continues to be evaluated. This lecture will review the current conceptual status of biomarkers as clinical and diagnostic tools for bipolar disorder and as surrogate endpoints in clinical research in bipolar disorder. The conceptual background in terms of current diagnostic categories and research domain criteria will be discussed and the various approaches with putative value (e.g., brain imaging, genetics, and neuroendocrinology) reviewed (1, 2). The lecture will end with a discussion of approaches to evaluating biomarkers of lithium response (3).

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References: Wise et al, Mol Psychiatry. 2016 May 24. doi: 10.1038/mp.2016.72. [Epub ahead of print]; Young AH. Harv Rev Psychiatry. 2014 Nov-Dec;22(6):331–3 Bellivier F, Young AH, et al, Bipolar Disord. 2020 Oct 23. doi: 10.1111/bdi.13023. Online ahead of print.

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NPA Symposium: COVID-19 Pandemic and psychiatry in Europe: Challenges, experiences and future perspectives from different European countries

NPA0002

The role of professionals' associations under extraordinary situations: Contingency, capacity, and collaboration

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COVID-19 pandemic, with its profound effects on almost every sphere of individual and social life, is a significant challenge and threat to mental well-being. Although mass disasters with similar traumatic effects are not exceptional incidents globally, the rate of the spread of infection, the scale of the effects of the disease and precautions, and uncertainty concerning the nature, prevention from, and treatment of the disease render the psychosocial effects unique. As it is the case for the individual's response to the stressful events, the psychiatric communities initially addressed this challenge by adapting their usual responses to mass trauma, through their capacity acquired from earlier experiences and training. Although the response to the pandemic is expected to be orchestrated by the public authorities, in many countries, either the administration was not sufficiently cognizant of the psychosocial consequences of the pandemic, or the health-care system was unable to function properly due to the excessive burden. Therefore, the associations of mental health professionals, with varying degrees of preparedness to cope with such a challenge, had to recruit their full resources. As many associations worldwide did, the Psychiatric Association of Turkey prepared written and audiovisual resources for psychiatrists, health professionals, and the general population related to the mental health effects of the pandemic and precautions, often including strategies to cope with stress-related difficulties. Many associations, also provided distant-access psychological support to health-care workers on the frontlines and the general population. These were achieved through a fast-organized collaboration among its members and between associations worldwide.

Disclosure: No significant relationships.

NPA0003

Ethical issues under the pressure of COVID-19 pandemic

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The pandemic has highlighted with particular evidence the vulnerability of people with mental disorders and a series of specific ethical concerns regarding their condition. First of all, the risk of receiving poor medical care due to the double stigma of being affected by a mental disorder and Covid infection, in addition to the many other additional barriers, including poverty, marginal housing, and food insecurity. Moreover, in some countries, in a situation where demands for intensive care exceeded the treatment facilities available, the tragical ethical dilemma regarding the choice of people to be saved was resolved with the option in favor of healthier and/or younger people who have more chances of recovery, thus excluding, among others, aged people with severe mental disorders such as dementias. In other countries, ethical concerns emerged related to the enhanced risk of involuntary hospital admission of individuals with severe mental illness mainly due the high likelihood of these patients violating physical-distancing and other safety rules. Social distancing measures have determined, among others, relevant obstacles for direct access to psychiatric care services, with the consequent adoption of the so called "telepsychiatry" of "tele mental health" by mental health services, a measure which unfortunately has cut off a large amount of patients who have not been able to benefit from these innovative methods of care both because of barriers posed by their own serious mental conditions, and by the impossibility of having the necessary technology.

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