Moroccan clients following their stay in Morocco, which was linked to uncoordinated eclectic health care consumption in Morocco, the pursuit of personally more acceptable diagnoses, somatic checkups or medication, and the occasional use of (stress-inducing) traditional healing methods. Rif-Project is based on the assumption of providing continuation of care to its Moroccan clients who spend their summer months in Morocco, through strategic positioning of TCH care-deliverers across the kingdom. Their activities include the continuation of the treatment program that was initiated in the Netherlands, visiting clients in their preferred environment and system, psycho-education and preventive activities. By monitoring their clients health care consumption, coordinating services in collaboration with local institutions, treatment interventions and psycho-education, TCH-workers were successful in providing and maintaining stability to their clients, which reduced the incidence of deterioration and crisis.

Keywords: Rif-Project, Morocco, migrants, continuation, transcultural, outreaching

S38.04

Culturally sensitive psychopharmacological research

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In recent years there has been increased recognition of the importance of developing culturally sensitive treatment in European psychiatry. A key area that requires further attention, however is related to the efficacy and security of psychopharmacological agents. It is increasingly well understood that drug metabolism can vary considerably across populations groups. At the same time, psychopharmacological research, from initial development of a new molecule to efficacy and security studies, to the identification of new indications, is generally carried out in Europe or North America, primarily using research subjects who are of White European descent. Furthermore, the development of the medication is predicated on the specific clinical issues that are of relevance to the target population. The upshot of this is that psychopharmacological research may be of limited relevance for those patients who are not of European or European American descent. To make psychopharmacological research more relevant requires that clinical issues relevant to the target population are included in the research protocol, that genetic variations are taken into consideration and identified, that the instruments used to measure the disorder in question are culturally valid, and that the overall research project is designed with the objective of understanding how cultural and genetic differences can impact pharmacodynamics and pharmacokinetics. This presentation will conclude with a brief description of a culturally sensitive ethnopsychopharmacological research project.

W12. Workshop: A ROAD MAP FOR EUROPEAN COLLABORATIVE RESEARCH IN SCHIZOPHRENIA (Organised by the AEP Section on Neuroimaging)

W12

A road map for European collaborative research in schizophrenia

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Background and Aims: Neuroimaging is one of the most promissing avenues for exploring psychiatric disorders in general and schizophrenia in particular both in terms of aetiology but also pathophysiology and treatment response.The aim of this workshop is to discuss possible avenues for Europe-wide collaborative research in neuroimaging and the implications it has for training and general infrastructure

Methods: The workshop leaders with discuss at their individual presentations the current vision for more uniform approach to neuroimaging across Europe, steps already taken towards it and plans for the future.

Results: The organisers of the workshop hope that a consensus view will emerge to move neuroimaging research in schizophrenia into a Europe wide platform.

Conclusions: The future rests is collaborative large scale multicentre research.

S39. Symposium: INTERNET PSYCHOTHERAPY: A NEW PSYCHOTHERAPEUTIC APPROACH IN PSYCHIATRY

S39.01

Is stepped care the right format for internet delivered cognitive behavioural therapy for anxiety disorders and depression?

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The database supporting Internet delivered minimal therapist contact cognitive behavioral therapy (CBT) is growing rapidly. Several randomized trials show that this novel treament approach can work for anxiety disorders and major depression of mild to moderate character. However, in clinical practice the implementation of Internet delivered CBT is not straightforward, as it can be difficult to target the right audience and client might worsen following or during the first ''low cost'' treatment attempt. The aim of this talk is to describe a model for the stepped care implementation of Internet CBT and data supporting the model. Results from a randomised trial on major depression will be presented as well as a summary of the available evidence regarding Internet CBT vs. regular CBT in individual or group format and the potential for stepped care. The data obtained so far raises some doubts regarding the widespread implementation of stepped care. For example, it is not clear why more intensive therapist contact should work when minimal contact therapy has not. However, at the same time stepped care approaches can help us think more clearly regarding different levels of intervention and cost effectiveness. Further research in this field is encouraged.

S39.02

Can we benefit from internet to increase accessibility to an effective non-pharmacological treatment for major depression and anxiety disorders?

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