



**ECNP**

**ECNP Seminar in  
Neuropsychopharmacology**

**21 – 23 October 2016**

**ANKARA, TURKEY**





# **ECNP Seminar in Neuropsychopharmacology**

**21-23 October 2016**

**ANKARA, TURKEY**



**ORGANIZATION SECRETARIAT**

**SERENAS Uluslararası Turizm Kongre ve Organizasyon A.Ş**

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## Introduction

ECNP is an independent, non-governmental, scientific association dedicated to the science and treatment of disorders of the brain. Founded in 1987, its goal is to bring together scientists and clinicians to facilitate information-sharing and spur new discoveries.

The objective of ECNP is to serve the public good by stimulating high-quality experimental and clinical research and education in applied and translational neuroscience. It seeks to do this by:

- Co-ordinating and promoting scientific activities and consistently high-quality standards between countries in Europe.
- Bringing together all those involved in or interested in the scientific study of applied and translational neuroscience by arranging scientific meetings, seminars, and study groups.
- Providing guidance and information to the public on matters relevant to the field.
- Providing a format for the co-ordination and for development of common standards in Europe.

To fulfil this aim ECNP organises, amongst others, yearly the ECNP Congress that comprises of 6 plenary lectures, 28 symposia and 7 educational update sessions. The annual meeting attracts around 5,000 psychiatrists, neuroscientists, neurologists and psychologists from around the world and is considered to be the largest congress on applied and translational neuroscience.

ECNP organises seminars, as the one you have been invited to participate, in areas of Europe where there are less opportunities for psychiatrists to participate in international meetings. Interaction is the keyword at these meetings and they have proved very successful both for the participants and for the experts. During the seminar we discuss clinical and research issues that the local organisers feel that are needed to be covered and using these topics as a model for teaching how to ask a research question and how to plan an effective study. Leading ECNP experts that are also talented speakers will facilitate mutual discussion in small groups allowing you to present your abstract and get feedback from your colleagues and local mentors.

So far, ECNP has organised this meeting in Poland, Estonia, Turkey, Bulgaria, Slovak Republic, Hungary, Czech Republic, Moldova, Romania, Greece, Russia, Latvia and recently in Macedonia, Armenia, Georgia, Serbia and Lithuania. In some countries we have organised it more than once.

ECNP also supports on an annual basis participation of 100 junior scientists and researchers in an intensive three-day Workshop in Nice. Other educational activities of ECNP include the journal *European Neuropsychopharmacology* that promotes scientific knowledge along with publishing consensus statements. In addition, since 2009 ECNP organises a summer school of neuropsychopharmacology in Oxford and since 2012 a school of child and adolescent neuropsychopharmacology in Venice. This autumn the second Workshop on Clinical Research Methods will take place in Barcelona, Spain.

ECNP will also continue the successful pilot of the ECNP Research Internships. A selected group of senior researchers will offer a short two week exploratory experience in their institutions. The hosting scientist is encouraged to establish a long term relationships with the applicant and teach a basic translational research method that the participant can use at home when he/she returns.

Please see the ECNP website ([www.ecnp.eu](http://www.ecnp.eu)) where you can find information about all the above initiatives and additional information and look for the activity that fits you.

I hope you have a fruitful and inspiring meeting in Turkey!

**Gil Zalsman**

Chair ECNP Educational Committee







**ECNP**



## PROVISIONAL PROGRAMME

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### Friday, 21 October, 2016

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19.00      **Arrival of participants and experts**  
**Welcome and dinner**

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### SATURDAY 22 OCTOBER 2016

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09.00 – 09.15    **What is ECNP?**  
**Introductions to the programme**  
*Speaker: Avi Avital*

09.15 – 10.00    **Cognition in unipolar depression: clinical implications and treatment**  
*Speaker: Carla Torrent*

10.00 – 10.45    **Treatment of bipolar disorder as a model of research question and design**  
*Speaker: Dina Popovic*

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**10.45 – 11.30    Coffee break**

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11.30 – 12.15    **How to plan a research study: From animal model of psychopathology to human study**  
*Speaker: Avi Avital*

12.15 – 12.30    **How to give a talk**  
*Speaker: Avi Avital*

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**12.30 – 13.30    Lunch**

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**Presentation participants in 3 groups in 3 parallel workshops**

<b>Round 1</b>	<i>Avi Avital</i>	<i>Carla Torrent</i>	<i>Dina Popovic</i>
13.30 – 15.00	<i>and</i>	<i>and</i>	<i>and</i>
	<i>Oguz Karamustafalioglu</i>	<i>Meran Can Saka</i>	<i>Kazim Yazici</i>
	<b>Group 1</b>	<b>Group 2</b>	<b>Group 3</b>

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**15.00 – 15.15    Break**

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15.15 – 15.45    **Panel discussion: How to prepare a clinical research project and how to publish it**  
*Chair: Avi Avital*  
*Panel members: Dina Popovic, Carla Torrent*

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**16:00 – 21.00    Social activity, group photo and dinner**

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## PROVISIONAL PROGRAMME

**Sunday, 23 OCTOBER, 2016**

**Presentations participants in 3 groups in 3 parallel workshops**

*(Experts rotate between the groups)*

<b>Round 2</b>	<i>Avi Avital</i>	<i>Carla Torrent</i>	<i>Dina Popovic</i>
08.30 – 10.00	<i>and</i>	<i>and</i>	<i>and</i>
	<i>Oguz Karamustafalioglu</i>	<i>Meran Can Saka</i>	<i>Kazim Yazici</i>
	<b>Group 1</b>	<b>Group 2</b>	<b>Group 3</b>

**10.00 – 10.30 Coffee Break**

<b>Round 3</b>	<i>Avi Avital</i>	<i>Carla Torrent</i>	<i>Dina Popovic</i>
10.30 – 12.00	<i>and</i>	<i>and</i>	<i>and</i>
	<i>Oguz Karamustafalioglu</i>	<i>Meran Can Saka</i>	<i>Kazim Yazici</i>
	<b>Group 1</b>	<b>Group 2</b>	<b>Group 3</b>

**12.00 – 14.00 Lunch and preparation for plenary session**

<b>Plenary</b>	14.00 – 14.20	<b>Group 1</b>
14.00 – 15.00		Presentation
	14.20 – 14.40	<b>Group 2</b>
		Presentation
	14.40 – 15.00	<b>Group 3</b>
		Presentation

15.00 – 15.30 **Break and faculty selection of awards winners. Completion of feedback forms**

15.30 – 16.00 **Awards ceremony, concluding remark and thanks**  
*Avi Avital & Oguz Karamustafalioglu*

**EXPERTS**



### Avraham Avital



Avi (Avraham) Avital is assistant professor in the Faculty of Medicine, the Technion - Israel Institute of Technology, and Emek Medical Center. As a board member The Israeli Society for Biological Psychiatry (ISBP), Avi is also the head of the young basic science leadership program, operating as part of the ISBP activities. Avi serves as a member of the ECNP education committee.

In his behavioural Neuroscience Lab, they study the effects of life circumstances on emotional and cognitive processes. Specifically, the research is focused on attention processes and social cooperation. On the translational aspect, the lab studies Schizophrenia and PTSD in animal models and clinical researches. Both basic and clinical studies are nurturing and being nurtured by each other. The entire research in the lab is involving technological equipment including software and hardware that are custom-made.

## HOW TO PLAN A RESEARCH STUDY: FROM ANIMAL MODEL OF PSYCHOPATHOLOGY TO HUMAN STUDY

Avraham AVITAL

*Behavioral Neuroscience Lab*

*Department of Physiology*

*The Bruce Rappaport Faculty of Medicine*

The exposure to stress at different developmental time points has long been postulated to have a crucial impact on various brain structures involved in mental disorders. The long-term specific effects seem to emerge as a function of timing and duration of the exposure to stress, as well as the characteristics of the stressor. Previous studies have addressed this issue with an effort to describe a single “hyper-sensitive” time point, and have led to disagreement on a particular sensitive period for stress exposure. The primary aim of our study was to investigate the hypothesis that indeed there is a developmental stress risk window.

We conducted a systematic mapping of the effects of an equivalent stress protocol, applied at 11 different time-points during development, on its long-term

consequences in adulthood. We found both behaviorally and physiologically that the pubescence time points are the most vulnerable to stress compared to all other tested time points along the developmental trajectory. Considering the comparison between rat and human age, our findings recommend focusing on the childhood-to-adulthood transition, which can exacerbate the predisposition for the development of major stress-induced psychopathologies. Next, we applied this stress sensitive time window in establishing animal model for PTSD.

Finally, one of the most prominent function that is impaired in the aforementioned psychopathologies (and in many others) is social functioning. Trying to depict this function in animal model, we established a full-computerized behavioral task.











### Outline

- Does stress=stress: Mapping the developmental trajectory for sensitive period.
- Implication of stress-sensitive period in an animal model for Schizophrenia.
- Recent findings (a surprise...).

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### Outline

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### Acknowledgments:

**Students and post-docs:**

Shani Raphaeli  
Talya Dolev  
Yael Hazan  
Inon Maoz  
Dr. Adi Cymerblit-Sabba  
Dr. Edward Ram

**Behavioral Neuroscience Lab's staff:**

Dr. Shlomit Aga-Mizrachi    Mr. Salman Zubedat



*This study is partially supported by:*

Israel's MOD Directorate for Defense Research & Development (DDR&D)



US-Army Research Office (ARO)




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Some animal models reproduce **physical stress** whereas others reproduce **psychological stress**, either in **acute** or **chronic** paradigms. In different studies, stressors were applied at **different time points** during development, together with various time points of evaluation of either **short- or long- term effects**.


**Defining a research Question**

**we aimed to map the long-term effects of an acute stress applied at different developmental time-points.**

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Stress protocol consisted of 3 different stressors applied during 3 consecutive days (Room light set at 1000±25lux):

**Relevant and valid manipulations**

Psychoneuroendocrinology, 2015

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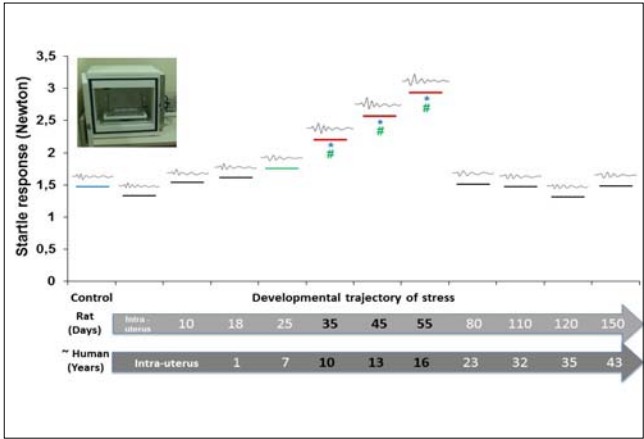
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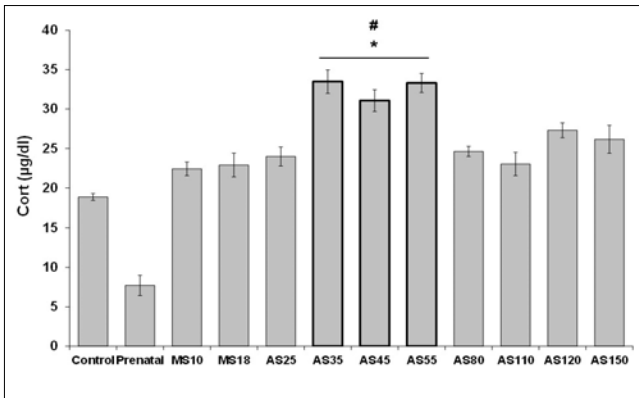
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Carefully considering the comparison between rat and human age (Quinn 2005, Holder and Blaustein 2014), our results reinforce the notion that the childhood-to-adulthood transition is the hypersensitive-stress developmental risk period with long-lasting behavioural and physiological effects.

**Thus, may predispose the appearance of psychopathology in adulthood.**

One research question is leading to another  
(better?)

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### Outline

- Does stress=stress: Mapping the developmental trajectory for sensitive period.
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**Prepubertal Chronic Stress and Ketamine Administration to Rats as a Neurodevelopmental Model of Schizophrenia Symptomatology**

❖ In the early development of the central nervous system, changes in function of glutamatergic NMDA receptors can possibly result in development of psychosis, cognitive impairment and emotional dysfunction in adulthood.


**The literature should support the scientific merit of the Q**

**We examined the behavioral consequences of the exposure to chronic stress (postnatal days 30-60) and ketamine administration (postnatal 41-45); both during the sensitive developmental time window.**

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### Dina Popovic, MD, PhD



Dr. Dina Popovic has received her degree in Medicine, cum laude, from the University of Bologna (Italy), has specialized in Psychiatry and was awarded a PhD with European label at the University of Pisa, Italy. Dr. Dina Popovic currently works as psychiatrist in Sheba Medical Center, Tel Aviv University and as clinical researcher at Bipolar Disorders Program of Hospital Clinic, University of Barcelona, Spain. Her scientific interests and publications primarily include mood disorders, psychotic spectrum disorders and dual pathology, with a special focus on clinical, pharmacological, genetic and neurophysiological aspects.

## TREATMENT OF BIPOLAR DISORDER AS A MODEL OF RESEARCH QUESTION AND DESIGN

Dina Popovic

<sup>1</sup>Bipolar Disorders Unit, Clinical Institute of Neuroscience, Hospital Clinic, University of Barcelona, IDIBAPS, CIBERSAM, Barcelona, Spain

<sup>2</sup>Psychiatry B, Sheba Medical Center, Tel Hashomer, Israel

**M**aintenance therapy is a critical part of treatment of Bipolar Disorder. Clinical practice requires deciding upon the most appropriate treatment for each patient, which is often challenging. Clinical markers for response to first-line therapy will be examined during this presentation. Another recurring issue in clinical practice is the difficulty in translating the results of research to therapeutic decision-making. For this reason, our group has developed Polarity Index, a metric retrieved by calculating Number Needed to Treat (NNT) for prevention of

depression and NNT for prevention of mania ratio, as emerging from the results of randomized placebo-controlled trials, which indicates the relative prophylactic efficacy profile of existing treatments, and its external validity was examined in a naturalistic study. The Polarity Index provides a measure of how much antidepressant versus antimanic an intervention is in bipolar disorder prophylaxis. The available evidence on how to choose the most effective treatment for each patient with bipolar disorder, in the era of personalized medicine, will be critically examined.



# TREATMENT OF BIPOLAR DISORDER AS A MODEL OF RESEARCH QUESTION AND DESIGN

Dina Popovic

<sup>1</sup>Bipolar Disorders Unit, Clinical Institute of Neuroscience, Hospital Clinic, University of Barcelona, IDIBAPS, CIBERSAM, Barcelona, Spain

<sup>2</sup>Psychiatry B, Sheba Medical Center, Tel Hashomer, Israel

## Clinical factors of response to Lamotrigine

- Chronicity of course, rapid cycling
- Comorbidity with anxiety disorders (panic disorder) and substance abuse
- Family history of schizoaffective disorder, recurrent depression, panic disorder

## Clinical factors of response to Clozapine

- Severe manic episodes with psychomotor agitation and psychotic symptoms of great intensity

Passmore, 2003; Zarate et al., 1995

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## Clinical markers related with response to treatment: state specifiers

- Mixed episode: Olanzapine, Asenapine<sup>1,2</sup>
- Agitation (in mania): Asenapine, loxapine, aripiprazole<sup>3-7</sup>
- High suicidal risk: lithium<sup>7</sup>

Grunze&Azrin 2014 (1); Kruger 2005 (2);  
Brown, 2013 (3); Gonzalez, 2013 (4); Kwentus  
2012 (5); McIntyre 2009 (6); Popovic (in press);  
Baldessarini 2006 (7)

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## Potential importance of early treatment

Rate of relapse increases with number of previous episodes



Bipolar affective disorder: rate of relapse leading to hospitalisation (after being discharged for 23 days) following first, second, third, fourth and fifth discharges

Kessing et al 2004

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### Predominant Polarity



Novak Djokovic



Bayern Munich

<b>Manic Polarity</b>	<b>Depressive Polarity</b>
Substance Misuse	Suicide Attempts
Psychotic Symptoms	Seasonal Pattern
Hospitalizations	Melancholic features
<b>Cognitive Impairment</b>	

*Colom, 2006; Rosa, 2008; Martinez-Aran, 2007; Goikolea, 2007.*

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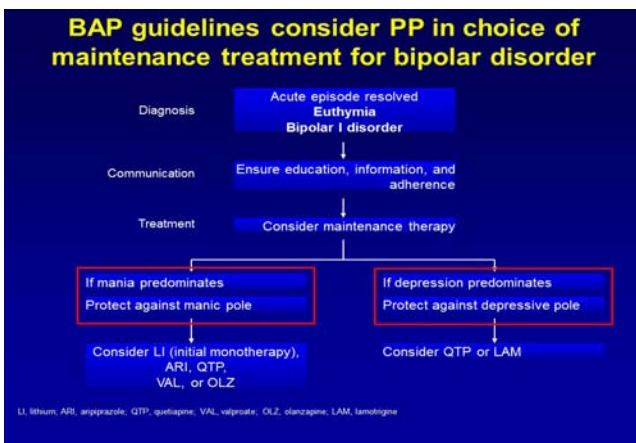
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### Maintenance treatment choice: pharmacologic considerations

- ☐ Efficacy: NNT
- ☐ Safety : NNH
- ☐ Tolerability
- ☐ Efficacy for each pole: Polarity Index
- ☐ Combination of drugs: synergies, tolerability

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EFFECTIVENESS

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### Study Sample



257/604 patients present PP



Manic Polarity (114/257)	Depressive Polarity (143/257)
Bipolar I	Bipolar II
Primary Substance Misuse	Depressive onset
Psychotic Symptoms	Life events preceding I episode
Younger age/age at onset/ Age at I hospitalization	Melancholic features
>FGA, Olanzapine, Risperidone	SSRIs, SNRIs, TCAs, BDZ Lamotrigine,

*Popovic et al., 2014*

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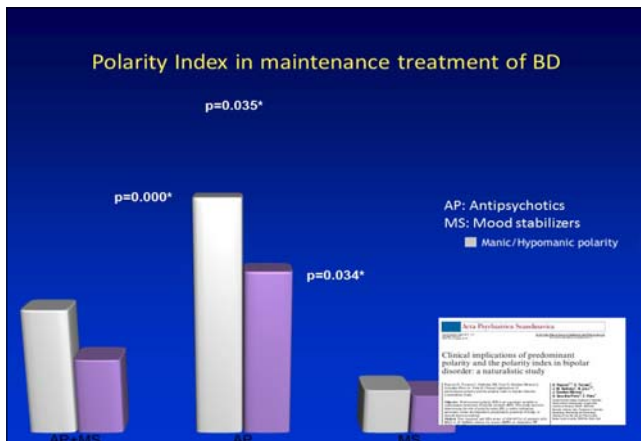
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## CONCLUSIONS

- Bipolar disorder is a complex condition that can be effectively managed under the paradigm of personalized medicine
- Patients can be stratified according to biological, clinical, and staging features
- The polarity index, a measure of the relative prophylactic efficacy of drugs, may be a useful tool to guide maintenance treatment according to predominant polarity
- Early intervention and maintenance treatment are crucial for prevention of recurrences and their neurobiological consequences

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**Personalized management of bipolar disorder**

STRATIFYING BY:

- ⑩ Psychopathological markers
- ⑩ Genetics
- ⑩ Epigenetics
- ⑩ Endophenotypes: neuropsychology (neurocognition) neuroimaging; neuroeconomy
- ⑩ Staging (life-span staging; functional staging)
- ⑩ Stratifying by predominant polarity
- ⑩ Stratifying by comorbidity
- ⑩ Stratifying by mixed features

*Vieta 2014; Hasler and Wolf, 2015; Schumann et al, 2013*

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Mood Stabilizers and Atypical Antipsychotics

**CLINICAL MARKERS OF RESPONSE**

**SALAR DE ATACAMA DESERT, CHILE**

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**Clinical markers of response to Lithium**

- Episodic clinical course with complete interepisodic remission. Mania-depression pattern
- Low comorbidity
- No rapid cycling
- Better efficacy in euphoric vs. dysphoric mania
- Bipolar family history with similar course of illness in the offsprings

*Graf, 2010; Perugi et al., 2001; Vieta et al., 2005; Kleindienst, 2005; Rybakowski, 2013*

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### Clinical markers of response to Lithium

- Later age at onset
- Low hospitalization rate
- Hyperthymic personality (Negative correlation with cyclothymic and anxious temperament)
- Preservation of cognitive functions and lack of cognitive disorganization

*Rybakowski, 2012, 2013*

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### Clinical factors of response to Carbamazepine

- ★ CBZ > LI
- psychiatric comorbidity
- mood-incongruent delusions
- EEG pathology, structural brain changes

★ Bipolar I: LI > CBZ

★ Bipolar II: LI = CBZ

### Clinical factors of response to Valproate

- ★ Atypical features ?
- ★ More manic or mixed episodes VPA > LI

*Kleindienst and Greil, 2000; Zarate et al., 1995; Rybakowski et al., 2013*

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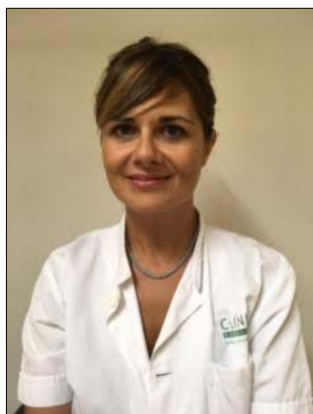
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### Carla Torrent



Carla Torrent has a PhD with European label in psychology, MA in Clinical Mental Health and postgraduate in clinical psychopharmacology and clinical neuropsychology at the University of Barcelona.

Since early 2014 is researcher at the Spanish National Health System with a contract Miguel Servet. It is also a research collaborator CIBERSAM (Center for Biomedical Research in Mental Health) at the Bipolar Disorder Unit headed by Prof. Eduard Vieta in the Hospital Clinic of Barcelona where she works since 2001.

She has published a large number of articles and book chapters on different aspects of eating behavior, adherence, psychological interventions with a special focus on the neuropsychological aspects of bipolar disorder. In this context she has developed and conducted a functional rehabilitation program that integrates aspects of cognitive training aimed at improving the psychosocial functioning of patients with bipolar disorder. She is a regular reviewer for several impact-factor rated international scientific journals. As teaching activity she has given several courses and workshops on mood disorders and has participated in several national and international conferences as a speaker.

## COGNITION IN UNIPOLAR DEPRESSION: CLINICAL IMPLICATIONS AND TREATMENT

Carla Torrent

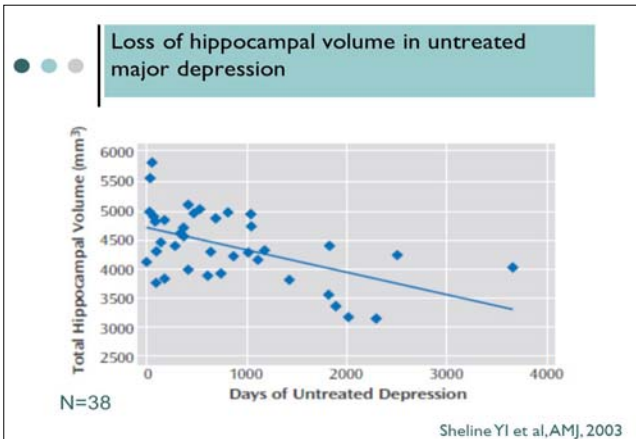
**M**ajor depressive disorder is a highly prevalent and disabling psychiatric disorder ranked as the first leading cause of years lost due to disability. This psychiatric condition is associated with higher rates of morbidity and mortality. Different studies conclude that only 30-40% of patients that are optimally treated with first line antidepressants achieve remission and more than one third of patients with depression are classified as treatment-resistant depression, although the rates may vary depending on the criteria used.

In this regard, most patients, continue suffering from residual subsyndromal symptomatology as well as presenting persistent functional impairment, being unable to achieving remission criteria. Some authors point out that sleepness, fatigue as well as executive dysfunctions constitute some of the most common residual symptoms presented in this group of patients. Hence, the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) included some cognitive symptoms, such as a diminished ability to think or concentrate, or indecisiveness, in the

diagnostic criteria for major depression, recognizing that cognitive impairment is a core feature associated to this condition. Nonetheless, it should be remarked that cognitive difficulties may persist in patients even when depressive symptoms have disappeared, with small to medium effect sizes for memory and medium to severe effect sizes for attention and executive function.

Despite the main cognitive dysfunctions in major depressive disorder are related to executive functions, attention, processing speed and memory domains are also significantly impaired. These cognitive problems compromise the individual's coping abilities and the likelihood of successfully returning to work, which in turn exert a huge impact on functional recovery. In this sense, it is well known that cognitive function represents one of the best predictors of functional outcome in psychiatric patients. For this reason cognitive impairment emerges as a potential target for both pharmacological and psychosocial treatments, with the final goal of improving functioning.






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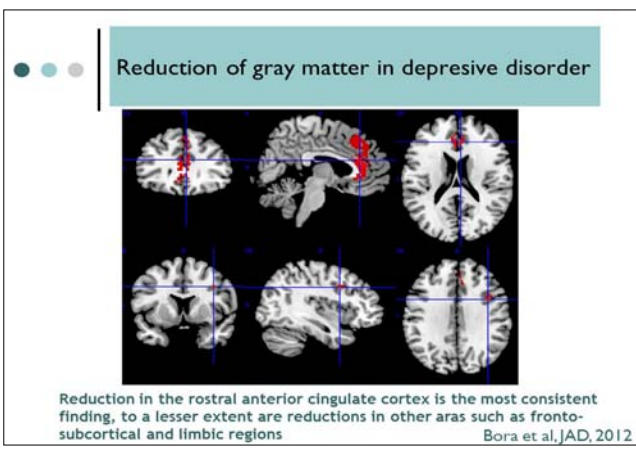
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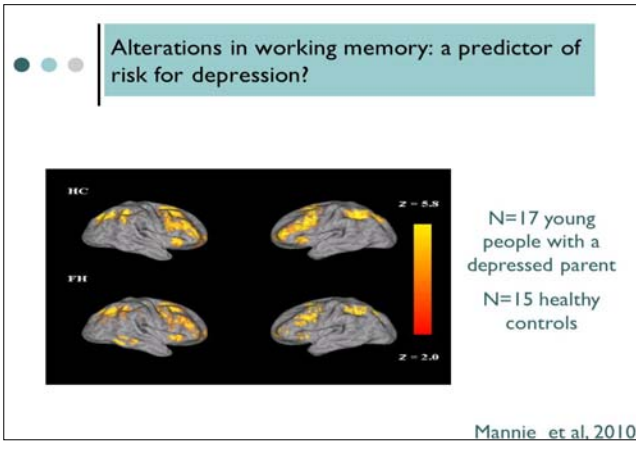
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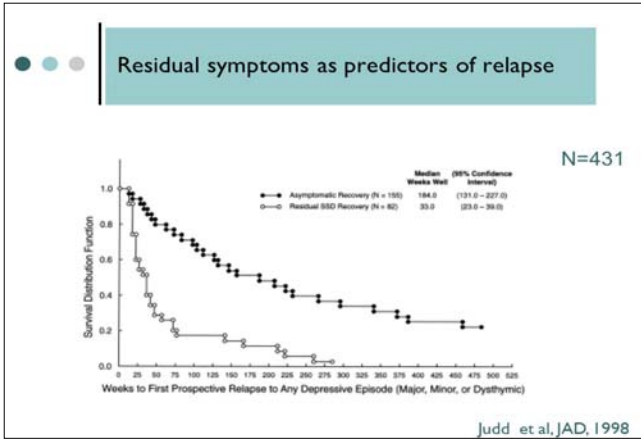
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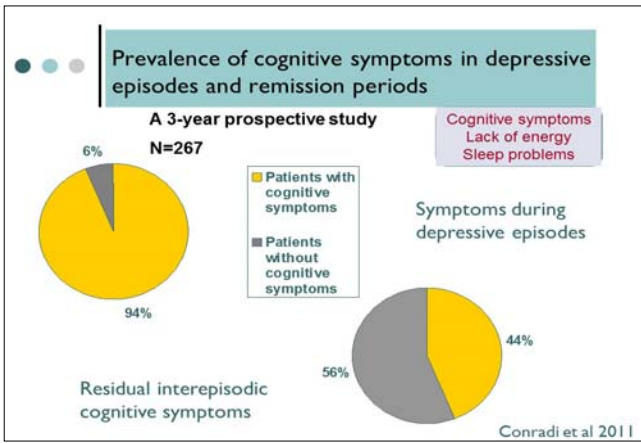
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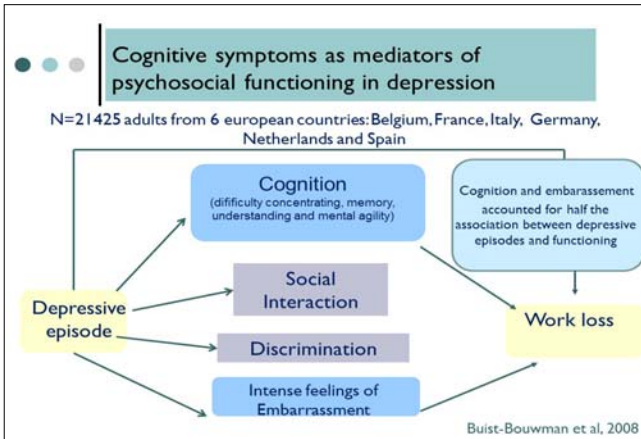
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**Possible treatments for cognitive dysfunctions in unipolar depression**

Modafinil (ADHD and SZ) Memantine Galantamine Donepezil Escopolamine Vortioxetine Desvenlafaxine Eritropoietinae(EPO) Lisdexamfetamine Intranasal Oxytocine	Omega-3 S-adenosil-metionina Cognitive rehabilitation Physical exercise Noninvasive brain stimulation techniques Ketamine Esketamine Lanicemine Glyx-13
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Solé et al., Eur Neuropsychopharm, 2015

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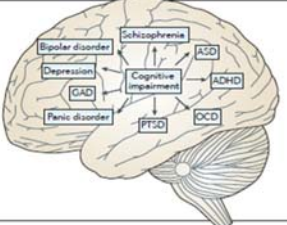
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**Cognitive deficits in psychiatric disorders**

- Attention
- Executive function
- Working memory, procedural and declarative
- Processing speed
- Social cognition
- Language



Genetics → Epigenetics → Developmental → Environmental

Adapted from Millan et al., Nature, 2012

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**Conclusions**

- ❖ Neurocognitive alterations are present in depressive phases and in remission and are associated with poor functional outcome
- ❖ Relapse prevention can help reducing the negative impact of multiple relapses in cognition and psychosocial functioning.

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### Conclusions (II)

- ❖ New drugs and cognitive rehabilitation could help improving cognitive deficits and subsyndromal symptoms, optimizing the daily functioning.
- ❖ Early intervention is essential.

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 Andrea Murru  
 Isabella Pacchiarotti  
 Rosa Palau  
 Dina Popovic  
 María Reinares  
 Jose Sánchez-Moreno  
 Brisa Solé  
 Carla Torrent  
 Imma Torres  
 Marc Valenti  
 Eila Vallis  
 Cristina Varo  
 Eduard Vieta




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### Introduction (I)

- ❖ UP affects 5-7% of adults every year.
- ❖ During their lifetime, 13-16% of adults will have one or more major depressive episodes
- ❖ For most patients major depression is **chronic** and /or **recurrent**.

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**Introduction (II)**

- ❖ For most patients, depression starts in second or third decade of life and impairs work productivity
- ❖ Major depression is one of the pathologies with more morbidity globally, it is important cause of disability and high social spending
- ❖ By 2020, major depression is projected to be the second leading cause of disability

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**Cognitive symptoms as a Criterion Item for a Major Depressive Episode in DSM-5**

Cognitive symptoms as 1 of the 9 diagnostic criteria for depression

- Depressed mood (anhedonia)
- Diminished interest or pleasure in activities
- Major depressive episode
- Cognitive symptoms
- Psychological symptoms
- Recurrent thoughts of death
- Feeling of worthlessness/excessive guilt

❖ The prevalence of cognitive deficits varies according the studies between 20 % until 70%  
 ❖ First-degree relatives of patients with unipolar depression would also be cognitively affected (Christensen et al., 2006)

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**Types of cognitive dysfunction in unipolar depression**

- ❖ **Cognitive bias.** A psychological effect of a deviation in processing related information with perception and attention, interpretation and memory.
  - ❖ Distorted information processing
  - ❖ Attentional allocation toward negative stimuli
- ❖ **Cognitive deficits**
  - ❖ Impairments in attention, short-tem memory and executive functioning

Murrough et al; 2011

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### Cognitive deficits in unipolar depression

- Fava et al., 2006
- Marazziti et al., 2010
- Murrough et al., 2011
- Lee et al., 2012
- Wagner et al., 2012
- Millan et al., 2012
- Wagner et al., 2012
- Weightman et al., 2014
- Ladegaard et al., 2014

Difficulty concentrating  
Memory difficulties  
Psychomotor speed  
Difficulty in making decisions  
**Deficit in cognitive flexibility**  
Verbal fluency  
Social cognition

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Psychosocial impairment

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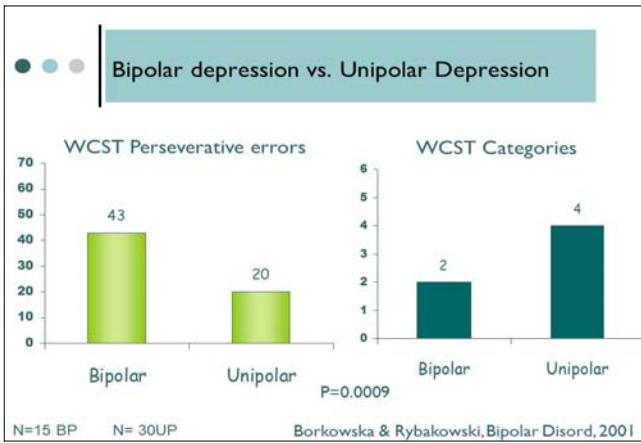
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### Clinical factors related to cognitive deficits in unipolar depression

- ❖ Age
- ❖ Frequency of episodes
- ❖ Subtype of major depression
- ❖ Age of onset
- ❖ Severity
- ❖ Childhood trauma
- ❖ Education level
- ❖ Chronicity
- ❖ Medical comorbidity
- ❖ Psychiatric comorbidity
- ❖ Clinical status
- ❖ Treatment

Depressed patients perform better than those who do not follow treatment but worse than controls

McIntyre RS et al, Depress Anxiety, 2013

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**SHORT SUMMARY of  
LOCAL EXPERTS**



## Curriculum Vitae

### **Oğuz Karamustafalıoğlu**

Dr.Oğuz Karamustafalıoğlu currently works as Professor of Psychiatry at Üsküdar University in Istanbul Turkey since December 2011 and as a teaching staff at Şişli Etfal Teaching and Research Hospital in Istanbul Turkey.He is graduate of Istanbul University Cerrahpaşa Medical School.He completed his residency of psychiatry at Istanbul Bakırköy Neuropsychiatry Teaching and Research Hospital between 1987-1991.He worked at the same hospital from 1991-1998 as head assistant at anxiety disorders program.He became the Chief of 2.Psychiatry Department at the same hospital and worked for 4 years (1998-2002). He was also the director of trauma program in Istanbul after the earthquake that occurred in 1999.He served as Chief of Psychiatry Department during 2002-2011 at Şişli Etfal Teaching and Research Hospital in Istanbul Turkey.

He takes part in many local and international organizations. He is the ambassador of ECNP for Turkey since 5 years. He has been the cochair of Turkish Psychopharmacology meetings since last 4 years. He was the cochair of Anxiety Disorders and Rational Treatments in Psychiatry Meeting in 2014. He was the Chair of Summit of Psychiatry in Antalya in 2-6 March 2016. He will be the chair of the meeting in 2017.He was one the Turkish delegates in WHO European Ministerial Conference on Mental Health Facing the Challenges , Building Solutions Helsinki ,Finland 2005. He has published more than 200 international and local papers.

## Curriculum Vitae

### **Meram Can Saka**

Meram Can Saka has completed specialization in psychiatry at Hacettepe University Department of Psychiatry in 2001 and has been working at Ankara University Department of Psychiatry since. Has been appointed as Associate Professor in 2008 and Professor in 2013. He had worked with the Executive Committee of Turkish Association of Psychiatry for four years. Besides being a full time clinician his research interest has been etiology and treatment of psychosis. He has published several research papers and some textbook and practice guides on this topic. He has been the workpackage leader for the EU-GEI project.

## Curriculum Vitae

### M. Kazım Yazıcı

	Hacettepe University Faculty of Medicine, Ankara
1982-1984	Ondokuzmayıs University Faculty of Medicine, Samsun
1984-1986	General Practitioner, Ordu
1986-2002	Residency in Hacettepe University Faculty of Medicine, Department of Psychiatry, Ankara
1992-1993	Instructor, Hacettepe University Faculty of Medicine, Department of Psychiatry, Ankara
1993-1994	Research Fellow, Mental Health Clinical Research Center, The University of Iowa, Iowa City, USA
1995-2001	Assistant Professor, Hacettepe University Faculty of Medicine, Department of Psychiatry, Ankara
2001-2004	Associate Professor, Hacettepe University Faculty of Medicine, Department of Psychiatry, Ankara
2004-	Professor, Hacettepe University Faculty of Medicine, Department of Psychiatry, Ankara

### International articles:

- Anıl Yağcıoğlu AE, Yoca G, Ayhan Y, Karaca RÖ, Çevik L, Müderrisoğlu A, Göktaş MT, Eni N, Yazıcı MK, Bozkurt A, Babaoğlu MO. Clozapine-Associated Leukopenia Agranulocytosis Study Group. Relation of the Allelic Variants of Multidrug Resistance Gene to Agranulocytosis Associated With Clozapine. *J Clin Psychopharmacol.* 2016;36(3):257-61.
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# **Abstracts**

## **participants**



## ALPER ALNAK

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<b>First name</b>	Alper
<b>Family name</b>	Alnak
<b>Institute</b>	Istanbul University Istanbul Medicine Faculty
<b>City</b>	Istanbul
<b>Country</b>	Turkey

### **ABSTRACT**

#### **Understanding the Factors of Pharmacotherapy Adherence in Adhd Children**

Use of antipsychotics in children worldwide has doubled in the last decade; yet very little is known about its long term outcomes, including neuromotor adverse events. Among them, Tardive Dyskinesia is a rarely recognized condition in young population, which actually may respond to early intervention. This is a case presentation of an adolescent girl with Autism Spectrum Disorder who developed TD with risperidone and then successfully treated with clozapine.

The aims of this presentation are: increasing awareness of TD in children with long term neuroleptic use, identifying particularly vulnerable subpopulations and its clinical management and raise interest for further research

## FERHAT CAN ARDIÇ

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<b>First name</b>	Ferhat Can
<b>Family name</b>	Ardıç
<b>Institute</b>	Bağcılar Education and Research Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

Virtual reality (VR) exposure has been proposed as an alternative to standard in vivo exposure. VR integrates real-time computer graphics, body tracking devices, visual displays, and other sensory input devices to immerse a participant in a computer-generated virtual environment.

Our aim is using VR exposure to treat a subject with a specific phobia using a low cost DIY VR system.

## BAŞAR AYRIBAŞ

<b>First name</b>	Başar
<b>Family name</b>	Ayrıbaş
<b>Institute</b>	Marmara University
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

Epilepsy is a neurodegenerative disorders with a prevalence of 1% and %25 of epilepsy cases are regarded as resistant to treatment. Pharmacodynamic and pharmacokinetic properties of current antiepileptic drugs limits their use and this issue revives the idea of new antiepileptic drug options. Oxytocin is one of the proposed treatments in this context. There are studies showing that oxytocin reduces seizure activity in some epilepsy animal models. Even its neurobiological aetiology is well established, some studies show that seizure frequency may be effected by the stress and environmental factors. But the neurophysiologic mechanism of this effect is still unknown.

In this project we aim to investigate the effect of intraventricular oxytocin on seizure activity in two different settings of rearing environment and parental caring with using kindling model of epilepsy. We will have four groups with 6 rats in each. Groups will be differentiated according to reared in enriched and poor environment and growth with or without parental care. After 90 days of growth, an epilepsy model will be produced by amygdala kindling. In rats we able to generate temporal lobe epilepsy, two groups will be divided as intraventricular placebo and intraventricular oxytocin administration. With this design, we try to observe any differential effect of intraventricular oxytocin on seizure activity. We hope that our findings will contribute to the efforts of new physiological based drug developments in epilepsy, a disease which has drugs with mostly limited use in many cases and cause significant impairments in both patient's and community.

## YASİN HASAN BALCIOĞLU

<b>First name</b>	Yasin Hasan
<b>Family name</b>	Balcioğlu
<b>Institute</b>	Bakirkoy Research and Training Hospital for Psychiatry, Neurology and Neurosurgery
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### ABSTRACT

Oxidative damage in the brain may contribute in part to the pathological process in schizophrenia. Studies suggest that oxidative stress in schizophrenia may result from mitochondrial dysfunction-impaired energy production. Expression of many electron transport chain complex subunits in neuronal mitochondria was dysregulated in schizophrenia. Dorsolateral prefrontal cortex (DLPFC) is pointed as one of the hotspots in symptomatology of schizophrenia. A variety of molecular changes have been noted in the DLPFC of schizophrenic patients, including alterations in overall cell density, in the number of specific receptors and changes in gene expression. Current study aimed to reveal neuronal oxidative stress in DLPFC of schizophrenia patients. Age, gender and postmortem delay matched 30 subjects with an antemortem diagnosis of schizophrenia and 30 controls without any antemortem history of mental disorder were included. Postmortem dorsolateral DLPFC tissue samples obtained from autopsies. The oxidation reaction levels of antioxidants and oxidants (TAS-TOS) in the samples spectrophotometrically measured in automatic analyzers. TAS, TOS levels and oxidative stress index (OSI) were compared between two groups.

### References

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- 2- Wang, J. F., Shao, L., Sun, X., & Young, L. T. (2009). Increased oxidative stress in the anterior cingulate cortex of subjects with bipolar disorder and schizophrenia. *Bipolar disorders*, 11(5), 523-529.

## ÇİĞDEM ÇELİK YAŞAR

<b>First name</b>	Çiğdem
<b>Family name</b>	Çelik Yaşar
<b>Institute</b>	Maltepe University
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

Evaluation of violence in hospital indicate that it is much more common in emergency services than other deparments. Core belief or schemas of people may lead to cognitive distortions and these cognitions can be appearant when working memory is processing wrong or ineffectively. Purpose of this study is determinate between anger or violance tendency and cognitions. Surveys will be fulled with patient's relatives waiting for inspeciton at emergency services . Conclusion of this study can guide to improving emergency services conditions and some educational programmes may produced for waiting people.

## ELVAN ÇİFTÇİ

<b>First name</b>	Elvan
<b>Family name</b>	Çiftçi
<b>Institute</b>	Erenkoy Mental State Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### ABSTRACT

**Audio- visual Features as Potential Predictors of Treatment Response in Bipolar Disorder, Manic episode and their association with neurocognitive function**

**Introduction:** Bipolar disorder(BD) is a serious disorder which effects emotional regulation and neurocognitive functions.

**Aim:** This study examines clinical appearance of BD, manic episode with audio-visual features and neurocognitive functions throughout the treatment period.

**Method:** Subjects are thirty patients with BD, manic episode and thirty healthy control. Audio-visual features will be labelled with values of psychiatric rating scales. Neurocognitive functions will be assessed using the computerized Cambridge Neurocognitive Test Automated Battery (CANTAB).

**Hypothesis:** Audio-visual features and neurocognitive functions are potential predictors of treatment response in BD, manic episode.



## FİKRET POYRAZ ÇÖKMÜŞ

<b>First name</b>	Fikret Poyraz
<b>Family name</b>	Çökmüş
<b>Institute</b>	Celal Bayar University Faculty of Medicine, Department of Psychiatry,
<b>City</b>	Manise
<b>Country</b>	Turkey

### ABSTRACT

#### **Comparison of Serum miRNA Expression Profiles Before and After Treatment in Panic Disorder Patients**

**Aim:** The aim of the study was to determine the differences between expression levels of certain miRNAs, as their association with panic disorder, and to investigate their relation to treatment success in panic disorder patients.

**Methods:** Research will be carried out with panic disorder patients (n=50) who must be drug naived (psychotropic and others) and newly diagnosed. Patients were excluded any psychiatric disorder, any chronic diseases, traumatic brain injury, neurologic disorders and mental retardation. We collect peripheral blood samples three times (At first, a month after and finally three month after). The blood samples were centrifuged for 20 min at 4°C and 3000 rpm. After centrifuge, miRNA cDNA synthesis and Real-time PCR will be completed by department of medical genetic.

## MİHRİBAN DALKIRAN

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<b>First name</b>	Mihriban
<b>Family name</b>	Dalkiran
<b>Institute</b>	Sisli Hamidiye Etfal Training and Research Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

#### **Facial Emotion Recognition in Master Degree Students of Psychology and Psychiatrists**

Recognizing the emotions through facial expressions particularly the basic emotions such as sadness, disgust, anger, fear and surprise is crucial for successful relationships and healthy psychological functioning (Frith C 2009, John SC 1999) and a prerequisite of intact social behaviour (J Diehl 2007).

In this study, we specifically aimed to evaluate the ability of facial emotion recognition in psychology professions.

150 master degree students of Psychology and 100 psychiatrist were asked to perform facial emotion recognition test after filling out socio-demographic questionnaire. The Facial Emotion Recognition Test was constructed by using a set of photographs from Ekman and Friesen's "Pictures of Facial Affect".

## İREM NURŞAH ERAT

<b>First name</b>	İrem Nurşah
<b>Family name</b>	Erat
<b>Institute</b>	Bağcılar Education and Research Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

Research of 24-OH-VitD level of outpatient clinic patients with major depression who visits Bagcilar EAH Psychiatri policlinics in six months

## GAMZE ERZİN

<b>First name</b>	Gamze
<b>Family name</b>	Erzin
<b>Institute</b>	Dışkapı Yıldırım Beyazıt Education and Research Hospital
<b>City</b>	Ankara
<b>Country</b>	Turkey

### **ABSTRACT**

I am graduated from Bolu Abant İzzet Baysal University, Faculty of Medicine in 2011. Following my graduation, I started my training on Psychiatry in Ankara Numune Education and Research Hospital. In April 2016, I completed my training on Psychiatry with my thesis about cytokine levels in bipolar disorder. I am now working as a Psychiatrist M.D. in Dışkapı Yıldırım Beyazıt Education and Research Hospital. I am a member and also board member of Psychiatry Association of Turkey since 2012. I attended cognitive and behavioural therapy, sexual therapy, and familial therapy trainings during my psychiatry specialization. I also attended scientific congresses regularly both national and international. I attended last two EFPT forums and I am in the organization committee of EFPT Forum Istanbul in 2017.

## AHMET GÜRCAN

<b>First name</b>	Ahmet
<b>Family name</b>	Gürçan
<b>Institute</b>	Hacettepe University Faculty of Medicine
<b>City</b>	Ankara
<b>Country</b>	Turkey

### ABSTRACT

#### **Dimensions of Anhedonia and Major Depressive Disorder**

Anhedonia is a core component of depressive symptomatology according to both DSM-5 and Research Domain Criteria (RDoC). However it is a quite subjective concept and we don't have reliable and consistent measurement tools for clinical practise, and plenty of studies mention several dimensions of anhedonia for different psychiatric conditions. Because of the subjectivity problem of anhedonia evaluation scales, tasks are improved. We aimed to evaluate different dimensions of anhedonia by using an anhedonia scale (Snaith Hamilton Pleasure Scale – Modified for Clinician Administration) which measures hedonic capacity and a task (Probabilistic Reward Task) which evaluates ability to modulate behavior with reward for three groups: Depression group, remitted depression group and control group with no depression history. We will investigate primarily how results of these two tools will differentiate between groups. Our secondary outcome will be possible relations between anhedonia and other clinical features in depression group. In conclusion, we hope that our study will contribute literature about evaluation of anhedonia as a neuroscientific and clinical phenomenon for depression.

## MEHMETCAN KAÇAR

<b>First name</b>	Mehmetcan
<b>Family name</b>	Kaçar
<b>Institute</b>	Bakırköy Mazhar Osman Mental Health and Neurological Diseases Education and Research Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### **ABSTRACT**

Psychotic disorder due to synthetic cannabinoid use is a growing problem in our country with increasing number of patients. It is not known if proinflammatory cytokines can be used for early diagnosis of patients at high risk for psychosis. This study will investigate the levels of proinflammatory cytokines and potential biomarkers endocannabinoid system such as N-acyl phosphatidylethanolamine phospholipase (NAPE), fatty acid amide hydrolase (FAAH) and monacylglycerol lipase (MAGL) in patients with synthetic cannabinoid-induced psychotic disorders (SCPDs) and synthetic cannabinoids users without psychosis to detail the link between cannabinoid use, psychosis and inflammation.

## DERYA KAYNAK

<b>First name</b>	Derya
<b>Family name</b>	Kaynak
<b>Institute</b>	Sisli Hamidiye Etfal Training and Research Hospital
<b>City</b>	İstanbul
<b>Country</b>	Turkey

### ABSTRACT

#### **Rates and Predictors of Conversion to Bipolar Disorder After the First Lifetime Episode of Depression**

**Objective:** Bipolar disorder is a common psychiatric disorder, although the diagnosis is often delayed until. Especially depressed and hypomanic episodes misdiagnosis are very frequent. Depression conversion to bipolar disorder is crucial determinants of poor outcome. This study aimed to determine the cumulative incidences and clinical predictors of these long-term outcomes after the first episode of depression.

**Methods:** Patients who diagnosed as major depressive disorder according to DSM-IV in first admission and patients asked to complete the HSL-32 and complete medical treatment history was assessed using the Treatment Response to Antidepressants Questionnaire (TRAQ). Family history of psychiatric illness was evaluated using a modification of the family history method.

**Results:** answers were compared according to HSL-32 bipolar group had significantly higher rate of answering 'yes' to following question; the increase in self-esteem, increased energy, psychomotor activation, increased talkativeness, creativity and elevated mood. Also a family history of affective disorder, psychotic symptoms, treatment resistance and early age of onset have been found to increase the risk for conversion to bipolar disorder.

**Conclusion:** The identified clinical characteristics of the first lifetime episode of depression should guide patients and clinicians for long-term individualized tailored treatment.

## İLKEY KELEŞ ALTUN

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<b>First name</b>	Ilkay
<b>Family name</b>	Keleş Altun
<b>Institute</b>	Kanuni Research and Training Hospital Trabzon
<b>City</b>	Trabzon
<b>Country</b>	Turkey

### **ABSTRACT**

**Introduction:** Panic disorder and agoraphobia are unlinked in DSM-5. The co-occurrence of panic disorder and agoraphobia is now coded with two diagnoses. The aim of this study is observing the cognitive and temperamental variations between these two diagnosis according to this separation.

**Method:** 20 panic disorder 20 agoraphobic and 20 healthy controls will be interviewed using the SCID ,TEMPS-A, ATQ (automatic thoughts questionnaire) MCQ-30 (metacognition questionnaire) BDI, STAI.



## BURCU KÖK

<b>First name</b>	Burcu
<b>Family name</b>	Kök
<b>Institute</b>	Istanbul University Istanbul Medical Faculty
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<b>Country</b>	Turkey

### ABSTRACT

#### **Family and Environment Related Predictors of Drug Induced Weight Gain and Metabolic Syndrome in Prepubertal Children Treated With Risperidone**

Risperidone is the most popularly prescribed drug for disruptive behavior in youth with autism and mental disabilities in Turkey. The aim of this research to assess familial, environmental risk factors of drug-induced weight gain and metabolic side effects specific to Turkish youth.

**Method:** Drug-naïve prepubertal children who are indicated to start risperidone, and for control their siblings with the closest age and their parents will be included in the study. Comparison with prepubertal healthy siblings is planned in order to eliminate the effect of normal growth on gained weight. Height, weight, BMI, waist circumference will be measured. Physical activity and 3-day calorie intake will be assessed by a dietician. Glucose, HbA1C, Insulin, lipids, liver function tests will be assessed. All the baseline procedures will be repeated at 1., 3., 6., and 12th months.

## EMRE MUTLU

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### **ABSTRACT**

The objective of the planned study is to compare the clinical efficacy of paliperidone palmitate (PP) to the oral form of paliperidone (OP) in recently diagnosed patients with schizophrenia, through evaluations of symptom severity and general functioning with special emphasis on the cognitive domain. Additionally, secondary aim is to investigate the effects of PP and OP on frontal lobe neurometabolite levels using MR spectroscopy and frontal lobe white matter integrity using diffusion tensor imaging. This will be a 12-month randomized-controlled open phase IV study. Ratio of relapsing patients, N-acetylaspartate levels and frontal lobe fractional anisotropy values will be main outcomes.

## HAKAN ÖĞÜTLÜ

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### **ABSTRACT**

#### **Future Biomarker of Attention Deficit Hyperactivity Disorder: Neurogranin**

Attention Deficit Hyperactivity Disorder (ADHD) is a complex disorder which composed of attention deficit, hyperactivity, impulsivity, learning deficit and memory problems.

Neurogranin (Ng) that is a postsynaptic neuronal protein, affects Calcium and NMDA receptors. It plays an important role in regulation of cognitive function and synaptic plasticity. Ng is responsible for long term potentiation and spatial learning.

Our hypothesis is that Ng deficiency is the main reason of learning deficit and memory problems which are observed in ADHD. Ng deficiency is an etiologic factor of ADHD.

Aim of the study is comparing Ng blood levels between ADHD and control groups, determining the relationship between ADHD and Ng, investigating availability of serum Ng as a biomarker of ADHD.

## İPEK ÖZÖNDER

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### **ABSTRACT**

Metabolic syndrome plays a role in decreased survival rate of schizophrenia patients when compared to the general population. High prevalence of metabolic syndrome is associated with antipsychotic drugs, genetic, psychotic process and physical inactivity. Deficits in cognition, perception, affect and volition make it especially difficult for people with schizophrenia to exercise regularly, while self-stigma has a negative impact on individuals with severe mental illness and is related to decreased self-efficacy, lower social and vocational functioning and physical inactivity. In our study we aimed to evaluate the effect of self-stigma of mental illness on sedentary lifestyle of patients beyond the well known contributions of negative symptoms.

## DİLEK SARIKAYA VARLIK

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### **ABSTRACT**

Cognitive deficits are core symptoms in patients with schizophrenia but specific and approved treatments for cognitive deterioration are scarce. Experimental and clinical evidence suggests that aerobic exercise may help to reduce psychopathological symptoms and support cognitive performance.

The purpose of this study was to examine the effects of 8 weeks of physical exercises programme (3 times a week) on clinical symptoms, cognitive performance and quality of life of individuals with schizophrenia. 20 schizophrenia patients will be planned to include in exercise programme. They will be compared 20 patients who doesn't participate in the programme. Cognitive parameters and psychopathology scores of all participants will test in pre- and post-testing sessions and then will compare with a waiting control group.

## HARUN OLCAY SONKURT

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### **ABSTRACT**

I was born in Bursa, 08.04.1988. I went to Altiparmak Fethi Acancicek Elementary School and Canaydin Elementary School. I continued my high school education in Bursa Erkek Lisesi between years 2002 and 2006. I started my college education in 2007, in Manisa Celal Bayar University Medical School. I graduated from Medical School in 2013, and started working in Eskisehir Osmangazi University Psychiatry Department as a research assistant in November 2014. Since then, I've been working as a research assistant doctor in the field of psychiatry.

I've been a reviewer in Journal of Cognitive Behavioral Psychotherapy and Research. And I've participated in Psychiatric Association of Turkey's spring symposium in 2016.

Affiliations:

The Psychiatric Association of Turkey

## ALI BARAN TANRIKULU

<b>First name</b>	Ali Baran
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### **ABSTRACT**

For all typical antipsychotics increase prolactin levels significantly. Among second-generation antipsychotics amisulpiride, sulpiride, risperidone and paliperidone increase prolactin levels similar to typical antipsychotics. Hyperprolactinemia may be asymptomatic or it may cause galactorrhea, amenorrhea, sexual dysfunction, decrease in bone mineral density.

The aim of our study was to assess follow up and compare of prolactin levels in the patients who take once-monthly paliperidone injection and risperidone LAI. First year of treatment the process is running with fluctuations.

Hyperprolactinemia could impair compliance to treatment especially in young female patients. Therefore frequent investigation of possible symptoms and close monitoring considerably important in these patients.

## MERYEM GÜL TEKSİN BAKIR

<b>First name</b>	Meryem Gül
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### ABSTRACT

**Introduction:** Many people suffer from psychiatric problems because of traumatic terror events in our country. In times of crisis the fundamental need for humans is to communicate and reach correct information. Today the most common tool to reach information source is undoubtedly internet and social media.

**Aim:** Our aim with this study which will be carried out online is to research the effect of traumatic events on university students and the relationship between Post-Traumatic Stress Disorder (PTSD), depression, anxiety and smartphone and internet addiction symptoms.

**Methodology:** Students will be asked to fill out sociodemographic data form, Beck Depression scale, Beck Anxiety Scale, Clinician Administered PTSD Scale, Smartphone Addiction Scale and Young's Internet Addiction Scale.

**Hypothesis:** The main hypothesis of our study is to show trauma, depression and anxiety degrees of symptoms are related and positive correlated with smartphone and internet frequency of usage.



## ASLI TUTAN

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### ABSTRACT

#### **Trichotillomania and EMDR (Eye Movement Desensitization and Reprocessing)**

**Objective:** Several studies have suggested that significant part of trichotillomania patients have a psychologic traumatic experience in their past history. Trichotillomania, might have been developed in order to cope with anxiety and intrusive thoughts associated with trauma. The primary objective of this study is to determine the efficiency of EMDR therapy in trichotillomania patients who have a psychologic trauma.

**Method:** The trichotillomania outpatients who diagnosed with DSM-5 criteria will be enrolled in our study. List of traumatic events, Traumatic Stress Symptoms Scale and The Massachusetts General Hospital (MGH) Hairpulling Scale will be applied to our patients in this study.

## TUĞBA UYAR

<b>First name</b>	Tugba
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<b>Institute</b>	Rize Kackar State Hospital
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<b>Country</b>	Turkey

### ABSTRACT

#### **Impact of Aerobic Exercise on the Performance of Alzheimer's Daily Living Activities**

**Background:** Neuroscience suggests that aerobic exercise could manage the pathophysiology of Alzheimer's disease (AD) and improve cognition. There are no clinical practice guidelines for aerobic exercise prescription and training in older adults with AD. A few existing studies showed that older adults with AD can participate in aerobic exercise and improve dementia symptoms, but lack adequate descriptions of their aerobic exercise training programs and their clinical applicability. In our Rize Kackar State Hospital we are going to start new project 'I'm active: Live happy, healthy and longer' is related with elder people which are older than 65 years old with mild and moderate AD. This neurorehabilitation project aims to improve social support and cardiorespiratory fitness of the participants.

**Methods/design:** We are planning to recruit two groups which occur twenty five patients with mild and moderate AD. After completion of the baseline measurements, participants going to make an aerobic exercise program and relaxation program in a rehabilitation centre. Both programs are applied three times a week during 3 months. Measurements take place at baseline (entry of the study), after three months (end of the exercise program). We are planning measure primarily cognitive functioning; psychomotor speed and executive functioning; (instrumental) activities of daily living, and quality of life. Secondary outcomes include physical, neuropsychological, and rest-activity rhythm measures.

**Hypothesis:** This study is the first study and project in Turkey to offer exercise programs to patients with mild to moderate AD. We expect this study to supply evidence regarding the effects of aerobic exercise and relaxation programme on the symptoms of AD, influencing quality of life.

## SABİDE DUYGU UYGUN

<b>First name</b>	Sabide Duygu
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<b>Country</b>	Turkey

### ABSTRACT

#### **The Relationship Between Serum Ferritin Levels and Anxiety Disorders in Children and Adolescents**

**Introduction:** Anxiety disorders characterized by fear and anxiety, cause significant stress and deterioration in academic or social function. Although the reasons underlying the biochemical pathways of anxiety disorders have not yet sufficiently clarified, depression that has high comorbidity rates with them has been reported to be associated with low serum ferritin levels.

**Objective:** This study aims to evaluate serum ferritin levels and blood hemoglobin levels in children and adolescents diagnosed with anxiety disorders.

**Materials and Methods:** Serum ferritin level, blood hemoglobin (Hb) and mean corpuscular volume (MCV) in 40 children and adolescents diagnosed with anxiety disorders according to DSM-IV criteria and 40 healthy controls similar to age and gender, all of whom have normal intelligence are going to be compared. Children's depression inventory (GDI), State-Trait Anxiety Inventory for Children (STAIC) and Kiddie-Sads-Present and Lifetime Version (K-SADS-PL) are going to be applied to the participants in order to ensure objectivity of diagnostic assessment. Serum ferritin levels are going to be measured by using chemiluminescence method. Measurements of blood haemoglobin (Hb) and mean corpuscular volume (MCV) are going to be performed on CBC device.

**Hypothesis:** We believe that we will find low serum ferritin levels in children and adolescents diagnosed with anxiety disorders compared to healthy controls.

## EMEL UYSAL

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### **ABSTRACT**

**Introduction:** It is obvious that number of treat response studies that associated to symptom structure and clinical features for this mental disorder which is chronic and has a quite heterogenous nature such as OCD. This study aims to examine metacognition and neurocognitive features of OCD patients who have autogenous and reactive features that offer more current subgrouping opportunity for OCD.

**Method:** 40 OCD patients presenting with autogenous features, 40 OCD patients presenting with reactive features and 80 healthy controls will be interviewed using the SCID, Y-BOCS, BDI, BAI, Wisconsin Card Sorting Test, Stroop Test, Rey Auditory-Verbal Learning Test, Trail Making Test, MCQ-30.

## GÜLŞEN TEKSİN ÜNAL

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### ABSTRACT

**Introduction and Aim:** Sexual dysfunction is a disorder restraining pleasure during sexual response cycles due to anatomical, physiological and psychological reasons. In the literature, there are studies showing the relationship between childhood traumas and sexual dysfunctions. Self-esteem is the state of liking that arises from one's self-evaluation, result of which is the approval of self-conception. In addition, some studies show that, self esteem is affected by sexual dysfunctions. In our study, we aimed to compare self-esteem levels and childhood traumas of patients with sexual dysfunctions and healthy control group. In addition, relationship between sexual dysfunction types and self-esteem variables and childhood traumas sub-groups is planned to be investigated.

**Methodology:** 24 healthy patients and 30 patients with sexual dysfunctions conforming to inclusion and exclusion criteria, and matched statistically in terms of age and gender, are selected from patients consulting to Sexual Dysfunctions Outpatient Clinic of Bakırköy Prof. Dr. Mazhar Osman Psychiatric and Neurological Disease Training and Research Hospital. All patients will be given sociodemographic questionnaire, Rosenberg Self-Esteem Scale (RSE) and Childhood Traumas Questionnaire (CTQ-28)

**Hypothesis:** We believe that, patients with sexual dysfunctions has higher childhood trauma score and lower self-esteem level compared to healthy control group. In the treatment of sexual dysfunctions, considering childhood traumas may be important regarding the treatment and prognosis. In addition, we believe that sexual dysfunctions and self-esteem is strongly correlated and treatment of sexual dysfunctions would contribute to self-esteem.

## MELİS ÜNLÜ ÇİLESİZ

<b>First name</b>	Melis
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### **ABSTRACT**

There is increasing evidence that both immune and neurochemical alterations are involved in the pathogenesis of schizophrenia especially in the early periods of the illness.

We aimed to evaluate neuroimmune changes in a study on children of patients with schizophrenia. We will separate the sample of children as two groups if they are at ultra high risk for psychosis or not and compare these groups according to the values of inflammatory biomarkers such as tumor necrosis factor-alpha and interleukin-6. This may help for the development of preventive strategies for early intervention in psychosis.

## EMRE ÜRER

<b>First name</b>	Emre
<b>Family name</b>	Ürer
<b>Institute</b>	Ankara University School of Medicine
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### **ABSTRACT**

I'm graduated from Ondokuz Mayıs University School of Medicine in 2011, "The degree is 3rd of the school". Following my graduation, I started my training on Urology in Ankara Atatürk education and research hospital(June 2011-July 2015). Then, I started my training on Child and adolescent psychiatry in Ankara University School of Medicine. I'm working as an child and adolescent psychiatry research assistant now. I'm a member of Psychiatry Association of Turkey and Child and Adolescent Psychiatry Association of Turkey since 2015. I attended child and adolescent cognitive and behavioural therapy and familial therapy training. I also attended scientific congresses regularly both national and international. I attended last two EFPT forums and I am in the organization committee of EFPT Forum Istanbul in 2017.

## AYŞE DİLARA YALÇIN

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### **ABSTRACT**

**Erasmus+ 2014 Key Action 2 (KA2), Strategic Partnerships Project**

Outcome of selection process

Project Name: When Looks Get in the Way: Optimising patient outcomes through the training of health care professionals

adlı projeye katılmaktayım.



## ÜMİT HALUK YEŞİLKAYA

<b>First name</b>	Ümit Haluk
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### **ABSTRACT**

**Hyphotesis:** What is The role of inflammmotion in substance depent psychosis?

**Entry:** Acording to dsm4; substance psychosis, the symptoms should continue for a significant period (4 weeks) after acut intoxication or withdrawal. As is wellknown, cells of nflammation has been increasing during acute intoxication so does these cells change within this period?

**Aim:** Our aim in this study was to investigate whether the impact of inflammation on clinical presentation

**Method:** Wbc- leymphocyte ratio measurement period in the acute phase and after treatment and compare with healthy people.

## HELİN YILMAZ

<b>First name</b>	Helin
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### ABSTRACT

#### **Prediction of tic exacerbation after treatment of Methylphenidate via caudate volumes in children with Attention deficit/hyperactivity disorder comorbid with chronic tic disorder**

**Background:** Psychostimulant treatment of children with ADHD comorbid with CTD can be challenging, because of apprehensions about worsening tic severity. Thus, prediction of clinical worsening after treatment with psychostimulant may be important in these children.

**Objective:** To evaluate whether caudate nucleus volumes can predict the worsening of tics which exists after methylphenidate (MPH) treatment in children with ADHD comorbid with CTD.

**Methods:** In a prospective study, basal ganglia volumes of 100 children with ADHD comorbid with CTD will be measured on high-resolution magnetic resonance images. According to clinical response after 8 weeks of treatment with MPH, they will be classified as tic exacerbated and non-exacerbated ones. Treatment effects will be assessed with Yale Global Tic Severity Scale for tic disorder and Conners Teacher's and Parent's Rating Scale for ADHD. One-way analysis of variance (ANOVA) will be used to assess group differences in age, caudate, putamen, globus pallidus, thalamus, and total brain volume.

#### **Reference**

1. Murphy TK, Lewin AB, Storch EA, Stock S. Practice parameter for the assessment and treatment of children and adolescents with tic disorders. *J Am Acad Child Adolesc Psychiatry.* 2013;52(12):1341-1359. doi:10.1016/j.jaac.2013.09.015.

## RABIA MELTEM YILMAZ

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### **ABSTRACT**

**Aim of the study:** The aim of this study is to determine the difference between the intensity of the personality characteristics before and during treatment of patients who met DSM-5 criteria for major depression.

**Method:** Diagnosed with major depression according to DSM-5, at least 18 years and literate patients will be included to the study. Patients will be applied Hamilton Rating Scale for Depression and SCID-II personality questionnaire before antidepressant treatment. Examination will be repeated with the patients and Hamilton Rating Scale for Depression and SCID-II personality questionnaire will be applied again after 3 and 6 months since starting treatment.

## NIHAL YURTERİ

<b>First name</b>	Nihal
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### **ABSTRACT**

#### **Assessment of Life Quality After Long Acting Methylphenidate Use in the Children with Attention Deficit Hyperactivity Disorder**

**Objective:** In the present study, the life quality of children and adolescents with ADHD will be compared before and after long acting methylphenidate use.

**Method:** 200 ADHD diagnosed children and adolescents- aged between 8-16- years will be enrolled in this prospective study. Individuals with chronic physical illness, Mental Retardation, Pervasive Developmental Disorders, Bipolar Disorder, Psychotic Disorder or Substance Use Disorder will be excluded. The diagnostic assessments of psychiatric disorders will be made according to the DSM-V criteria and the Kiddie-Schedule for Affective Disorders and Schizophrenia for School-Age Children-Present and the Lifetime (K-SADS PL). WISC-R and Pediatric Quality of Life Scale for Children (PedsQL 4.0 TM) will be applied to all cases.

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