

# **4<sup>th</sup> INTERNATIONAL FORUM ON MOOD AND ANXIETY DISORDERS**

**MONTE-CARLO, NOVEMBER 19-21, 2003**



**WEB SITE: [www.aim-internationalgroup.com/2003/ifmad](http://www.aim-internationalgroup.com/2003/ifmad)**



**Final Programme**



# IMPORTANT ADDRESSES

## **SCIENTIFIC AND ORGANIZING SECRETARIAT**

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## **CONGRESS VENUE**

Monte-Carlo Grand Hotel

12, Av. des Spélugues

98000 Monte-Carlo – Monaco

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On the cover : M.C. Escher “ The Node ”



# WELCOME

*It is our pleasure to welcome you in Monte-Carlo to the annual meeting of the International Forum on Mood and Anxiety Disorders (IFMAD).*

*IFMAD has become an important forum for the exchange of ideas on the latest developments in psychiatric treatments where international experts can address in an informal atmosphere some of the important topics in the field of mood and anxiety disorders. The meetings are particularly valued for the high quality of the scientific contributions and the opportunity for focused discussion of new data presented in a constructive and productive environment.*

*Attendees at previous meetings have appreciated the very efficient and agreeable formula provided by IFMAD meetings for keeping up to date with current treatment issues. We look forward to renewing old acquaintances at the next meeting and to welcoming an even wider audience.*

*We are pleased to have you with us again this year so that you have the opportunity to keep abreast of the latest advances.*

Siegfried Kasper  
Chairman

Stuart Montgomery  
Co-Chairman



**4<sup>th</sup> INTERNATIONAL  
FORUM ON MOOD  
AND ANXIETY  
DISORDERS**

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**CO-CHAIRMAN**

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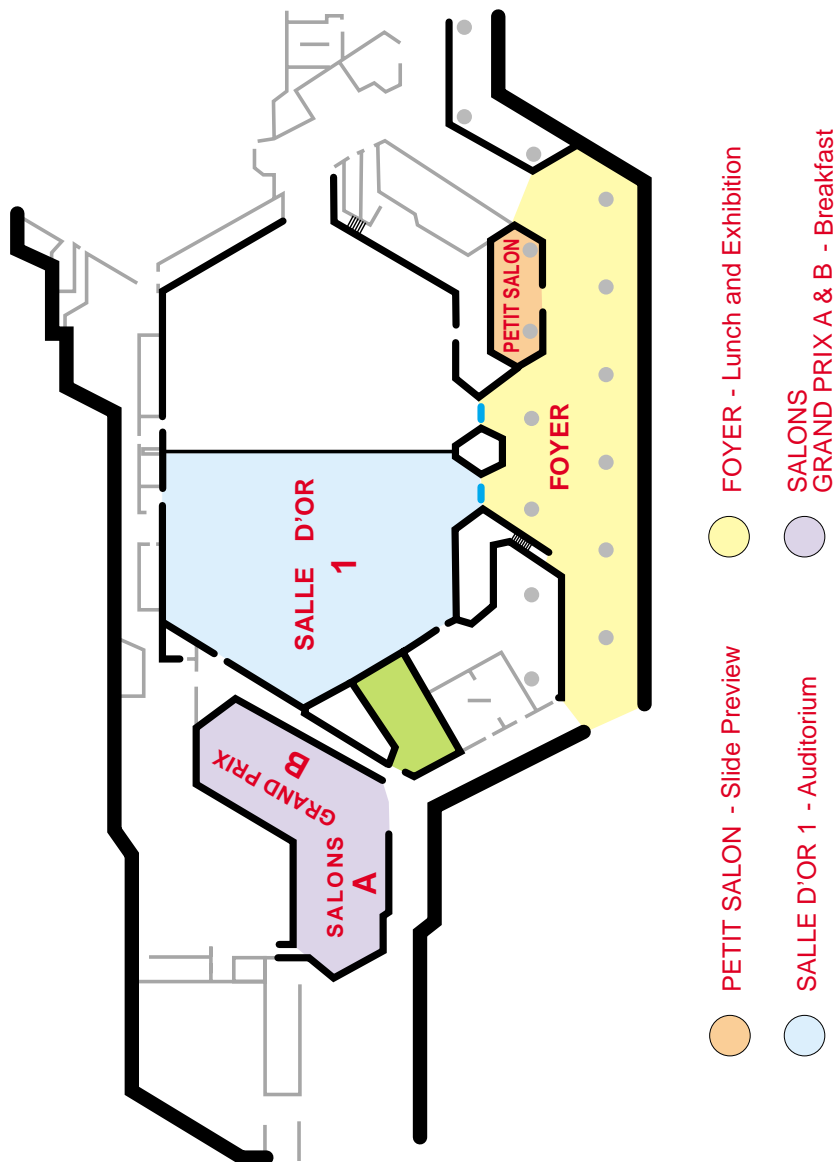


# CONTENTS

4	Forum Venue
5	Acknowledgements
6	Programme Overview
7	Scientific Programme
15	Posters
22	Scientific Information
23	General Information
26	Local Information



# FORUM VENUE





# ACKNOWLEDGEMENTS

*The Organising Committee express their gratitude  
to the following Companies*

**ASTRA ZENECA**  
**BOEHRINGER INGELHEIM and ELI LILLY and COMPANY**  
**H. LUNDBECK A/S**  
**JANSSEN CILAG and ORGANON**  
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**PIERRE FABRE MEDICAMENT**  
*for their valuable co-operation*

**WISEPRESS Ltd**  
*for their participation in the publication exhibition*



# PROGRAMME OVERVIEW

## Wednesday, November 19

13.30/15.30  
S01 "New bipolar  
antidepressants"

15.30/15.45  
A European  
Depression Day

15.45/16.00  
Coffee Break

16.00/18.00  
S02 "Monotherapy, new  
experience with  
Risperidone in  
bipolar disease"

18.00/19.00  
S03 Plenary Lecture  
"The search for genes  
of bipolar disorder:  
treatment implications"

Presentation  
IFMAD Award

19.00/20.00  
Opening Reception

13.00/18.00  
Poster Display

## Thursday, November 20

08.30/10.30  
S04 "Recent advances  
in treatment of  
anxiety disorder"

10.30/10.45  
Coffee break

10.45/12.45  
S05 "Depression and  
anxiety disorders – the  
importance of fast  
and effective treatment"

12.45/13.45  
Lunch

13.45/15.45  
S06 "New treatments  
for GAD"

15.45/16.00  
Coffee Break

16.00/18.00  
S07 "Pain in psychiatric  
disorders"

18.00/20.00  
S08 "The neurobiology  
of depression: bridging  
brain and body to achieve  
and retain remission"

08.30/20.00  
Poster Display

## Friday, November 21

08.30/10.30  
S09 "Controlling  
placebo"

10.30/10.45  
Coffee break

10.45/12.45  
S10 "Controlling mania  
with antipsychotic  
treatment"

12.45/13.45  
Lunch

13.45/15.45  
S11 "New results  
in mania"

15.45/16.00  
Coffee Break

16.00/18.00  
S12 "New treatment for  
resistant or  
refractory depression"

18.00  
Closure

08.30/18.00  
Poster Display





**4<sup>th</sup> INTERNATIONAL  
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# **Scientific Programme**



# SCIENTIFIC PROGRAMME

**WEDNESDAY, November 19, 2003**

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**13.30 – 15.30 S01 NEW BIPOLAR ANTIDEPRESSANTS**

Chair : **J. Angst (Switzerland), H. Aschauer (Austria)**

S0101 Are atypical antipsychotics effective in bipolar depression?

**H. Aschauer (Austria)**

S0102 Long term treatment of bipolar depression

**G. Evoniuk (USA)**

S0103 The switch from depression to hypomania and mania: fact or fiction?

**J. Angst (Switzerland)**

S0104 Continuation treatment for mania: what happens to depression?

**E. Vieta (Spain)**

**15.30 – 15.45 PRESENTATION OF A EUROPEAN DEPRESSION DAY**

**M. Selo (Switzerland)**

*President of the Werner Alfred Selo Foundation*

**15.45 – 16.00 Coffee break**



## SCIENTIFIC PROGRAMME

### **16.00 – 18.00 S02 MONOTHERAPY, NEW EXPERIENCE WITH RISPERIDONE IN BIPOLAR DISEASE**

Chair: *S. Montgomery (United Kingdom)*

- S0201 The challenge of bipolar disorder for the patient if not properly diagnosed and treated  
*E. Vieta (Spain)*
- S0202 The use of atypical antipsychotics as monotherapy: new evidence for efficacy (short-term)  
*M. Eerdekens (Belgium)*
- S0203 The use of atypical antipsychotics as monotherapy: new evidence for efficacy (longer term)  
*S. Kasper (Austria)*
- S0204 Clinical trials vs clinical experience: special patient populations, defining the best dosage and best use of atypical antipsychotics in bipolar disorder  
*S. Montgomery (United Kingdom)*

*Sponsored by an unrestricted educational grant of JANSSEN-CILAG and ORGANON*

### **18.00 – 19.00 S03 PLENARY LECTURE**

Chair : *S. Kasper (Austria)*

The search for genes of bipolar disorder: treatment implications  
*J. Mendlewicz (Belgium)*

Presentation of the International Forum Award established with the generous collaboration of  
**MERCK SHARP & DOHME**

### **19.00 – 20.00 Welcome cocktail**



# SCIENTIFIC PROGRAMME

**THURSDAY, November 20, 2003**

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**08.30 – 10.30 S04 RECENT ADVANCES IN TREATMENT OF ANXIETY DISORDER**

Chair : *M. Bourin (France), E. Eriksson (Sweden)*

- S0401 Atypical antipsychotics in treating anxiety disorders  
*J. Zohar (Israel)*
- S0402 Is PMDD an anxiety disorder?  
*E. Eriksson (Sweden)*
- S0403 Recent advances in panic disorder  
*M. Bourin (France)*
- S0404 Recent advances in social phobia  
*C. Allgulander (Sweden)*

**10.30 – 10.45 Coffee Break**

**10.45 – 12.45 S05 DEPRESSION AND ANXIETY DISORDERS – THE IMPORTANCE OF FAST AND EFFECTIVE TREATMENT**

Chair : *D. Baldwin (UK), W. Burke (USA)*

- S0501 Priorities in treating depression  
*W. Burke (USA)*
- S0502 How can the treatment of depression be optimised?  
*S. Kasper (Austria)*
- S0503 Escitalopram - a unique mechanism of action  
*C. Sanchez (Denmark)*
- S0504 Unmet needs in anxiety disorders - how can we improve treatment ?  
*D. Baldwin (United Kingdom)*
- Sponsored by an unrestricted educational grant of  
H. LUNDBECK A/S*

**12.45 – 13.45 Lunch**



# SCIENTIFIC PROGRAMME

**THURSDAY, November 20, 2003**

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**13.45 – 15.45 S06 NEW TREATMENTS FOR GAD**

Chair : *S. Montgomery (UK), R. Nil (Switzerland)*

- S0601 Pregabalin compared with other anxiolytics in GAD  
*R. Kavoussi (USA)*
- S0602 SSRIs in the treatment of GAD  
*D. Baldwin (United Kingdom)*
- S0603 Discontinuation symptoms in SAD or GAD or depression  
*R. Nil (Switzerland)*
- S0604 Fast onset of response in GAD  
*S. Montgomery (United Kingdom)*

**15.45 – 16.00 Coffee Break**

**16.00 – 18.00 S07 PAIN IN PSYCHIATRIC DISORDERS**

Chair : *C. Allgulander (Sweden), A. Khan (USA)*

- S0701 Painful physical symptoms in depression  
*D. Perahia (United Kingdom)*
- S0702 Pregabalin and neuropathic pain  
*R. Kavoussi (USA)*
- S0703 Animal models and mechanisms  
*C. Sanchez (Denmark)*
- S0704 Venlafaxine and the control of pain  
*A. Partiot (USA)*



## SCIENTIFIC PROGRAMME

### **18.00 – 20.00 S08 THE NEUROBIOLOGY OF DEPRESSION: BRIDGING BRAIN AND BODY TO ACHIEVE AND RETAIN REMISSION**

Chair : *S. Kasper (Austria)*

S0801 Recognising and diagnosing depression: a paradigm shift  
*S. Montgomery (United Kingdom)*

S0802 Is two better than one? Strategies to achieve remission  
*S. Kasper (Austria)*

S0803 Dual-action antidepressants: the new frontier for the  
treatment of depression  
*A. Leuchter (USA)*

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and COMPANY*



# SCIENTIFIC PROGRAMME

**FRIDAY, November 21, 2003**

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**08.30 – 10.30 S09 CONTROLLING PLACEBO**

Chair : *A. Khan (USA), S. Montgomery (UK)*

- S0901 Placebo trials in depression and anxiety  
*A. Khan (USA)*
- S0902 Rater training, certification and other myths  
*W. Potter (USA)*
- S0903 Severity increases assay sensitivity  
*A. Gerebtzoff (Switzerland)*
- S0904 Better monitoring, better patients  
*R. Buller (France)*

**10.30 – 10.45 *Coffee Break***

**10.45 – 12.45 S10 CONTROLLING MANIA WITH ANTIPSYCHOTIC TREATMENT**

Chair : *G.B. Cassano (Italy)*

- S1001 Pharmacology of atypical antipsychotics in mania  
*L. Pani (Italy)*
- S1002 Mania treatment: use of atypical antipsychotics  
*A. Rotondo (Italy)*
- Sponsored by an unrestricted educational grant of  
ASTRAZENECA ITALY*

**12.45 – 13.45 *Lunch***



# SCIENTIFIC PROGRAMME

**FRIDAY, November 21, 2003**

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**13.45 – 15.45 S11 NEW RESULTS IN MANIA**

Chair : *J. Loftus (Monaco), E. Vieta (Spain)*

- S1101 Risperidone in mania  
*M. Eerdekens (Belgium)*
- S1102 Quetiapine in mania  
*M. Brecher (USA)*
- S1103 Olanzapine in mania  
*M. Tohen (USA)*
- S1104 Ziprasidone in treatment of mania in bipolar disorder  
*S. Romano (USA)*

**15.45 – 16.00 Coffee Break**

**16.00 – 18.00 S12 NEW TREATMENT FOR RESISTANT DEPRESSION**

Chair : *J. Scott (UK), J. Tauscher (Austria)*

- S1201 Augmentation therapy with psychotherapy in resistant depression  
*J. Scott (United Kingdom)*
- S1202 Are atypical antipsychotics antidepressants?  
*G. Gharabawi (USA)*
- S1203 SSRI and atypical antipsychotics in bipolar depression  
*M. Tohen (USA)*
- S1204 Current status of lithium augmentation in resistant depression  
*J. Tauscher (Austria)*

**18.00 – 18.15 CLOSURE**





- P01. Borna disease virus in mood disorders and benefit of novel antiviral therapy  
**L. Bode<sup>1</sup>, A. Auer<sup>2</sup>, D.E. Dietrich<sup>3</sup>, H. Ludwig<sup>4</sup>** (<sup>1</sup>Robert Koch Institut, Berlin, Germany, <sup>2</sup>Psychiatrist in Practice, Linz, Austria, <sup>3</sup>Medical School of Hanover, Hannover, Germany, <sup>4</sup>Free University of Berlin, Berlin, Germany)
- P02. Risk factors for post traumatic stress disorder after a road traffic accident  
**R. Coronas, J.M. Santos, X. Terrades, M. Ramos, G. Garcia Pares** (Corporació Hospitalària Parc Taulí, Sabadell, Barcelona, Spain)
- P03. Pharmacological difference between escitalopram and citalopram  
**T.I.F.H Cremers, B.H.C Westerink** (Brainsonline/RuG, Groningen, The Netherlands)
- P04. Depletion of serotonin in platelets after sertraline administration  
**M. Dannawi** (Laboratory of Medical Analysis and Research, Tripolis – Lebanon)
- P05. Successful treatment of refractory depression by combination of predisone with SSRIs.  
**M. Dannawi** (Laboratory of Medical Analysis and Research, Tripolis – Lebanon)
- P06. Comparison of sexual functioning in patients receiving duloxetine or paroxetine: acute- and long-term  
**P.I. Delgado<sup>1</sup>, C.H. Mallinckrodt<sup>2</sup>, F. Wang<sup>2</sup>, P.V. Tran<sup>2</sup>, S.K. Brannan<sup>2</sup>, M.W. Wohlreich<sup>2</sup>, D.G. Perahia<sup>3</sup>, M.J. Detke<sup>2,4,5</sup>**  
(<sup>1</sup>Department of Psychiatry, Case Western Reserve University, Cleveland, OH, Usa, <sup>2</sup> Eli Lilly and Company, Indianapolis IN, USA, <sup>3</sup>Eli Lilly And Company, Erl Wood, UK, <sup>4</sup>Department of Psychiatry, Indiana University Medical School, Indianapolis, IN, USA, <sup>5</sup>Departments of Psychiatry, Mclean Hospital, Belmont, and Harvard Medical School, Boston, MA, USA)



- P07. Duloxetine vs placebo in the prevention of relapse of major depressive disorder  
**M.J. Detke<sup>1,2</sup>, I. Gilaberte<sup>1</sup>, D.G. Perahia<sup>1</sup>, F. Wang<sup>1</sup>, T.C. Lee<sup>1</sup>, P. Tran<sup>1</sup>, C. Miner<sup>1</sup>, S. Montgomery<sup>1</sup>**, (<sup>1</sup>Eli Lilly and Company, Indianapolis, IN, USA, <sup>2</sup>Department of Psychiatry, Indiana University Medical School, Indianapolis, IN, USA)
- P08. Open-label pharmacokinetic study of quetiapine plus divalproex in patients with schizophrenic/schizoaffective disorders or bipolar disorder  
**C. L. DeVane<sup>1</sup>, H. Winter<sup>2</sup>, M. A. Smith<sup>2</sup>** (<sup>1</sup>Institute of Psychiatry, Medical University of South Carolina, Charleston, SC, USA, <sup>2</sup>AstraZeneca, Wilmington, DE, USA)
- P09. Potentiation of antidepressant treatment in resistant depression: a comparative study of seroquel versus lithium  
**J.P. Dorée, S.V. Tourjman, J. Desrosiers, R. Elie, S. Kuniki, C. Vanier** (Centre de Recherche Fernand Seguin, Montréal, QC, Canada)
- P10. Olanzapine/fluoxetine combination in rapid cycling bipolar disorder  
**S. Dubé<sup>1,2</sup>, P.E. Keck<sup>2</sup>, S.W. Andersen<sup>1</sup>, A.R. Evans<sup>1</sup>, M. Tohen<sup>1,3</sup>** (<sup>1</sup>Lilly Research Laboratories, Indianapolis, IN, USA, <sup>2</sup>Western Psychiatric Institute and Clinic, University of Pittsburgh, Pittsburgh, PA, USA, <sup>3</sup>Department of Psychiatry, Harvard Medical School/McLean Hospital, Belmont, MA, USA)
- P11. Adjunctive ziprasidone in treatment-resistant depression: pilot study  
**D.L. Dunner<sup>1</sup>, J.D. Amsterdam<sup>2</sup>, R.C. Shelton<sup>3</sup>, H. Hassman<sup>4</sup>, M. Rosenthal<sup>5</sup>, S.J. Romano<sup>6</sup>** (<sup>1</sup>University of Washington, Seattle, WA, USA, <sup>2</sup>University of Pennsylvania, Philadelphia, PA, USA, <sup>3</sup>Vanderbilt University, Nashville, TN, USA, <sup>4</sup>Comprehensive Clinical Research CNS, Clementon, NJ, USA, <sup>5</sup>BMR Health Quest, San Diego, CA, USA, <sup>6</sup>Pfizer Inc, New York, NY, USA)



- P12. Comprehensive pooled analysis of remission data: venlafaxine vs SSRIs (comparison)  
**R. Entsua<sup>1</sup>**, **C. Nemeroff<sup>2</sup>**, **I. Willard<sup>2</sup>**, **M. Demitrack<sup>2</sup>**, **M. Thase<sup>3</sup>**, **A. Lenox-Smith<sup>4</sup>** (<sup>1</sup>Wyeth Research, Collegeville, PA, USA, <sup>2</sup>Emory University School of Medicine, Atlanta, GA, USA, <sup>3</sup>University of Pittsburgh Medical Center, Pittsburgh, PA, USA, <sup>4</sup>Wyeth Pharmaceuticals, Taplow, UK)
- P13. Meta-Analyses of duloxetine in the treatment of MDD  
**B. Fallisard<sup>1</sup>**, **M. Lothgren<sup>2</sup>**, **D. Perahia<sup>3</sup>**, **A. Garcia-Cebrian<sup>4</sup>** (<sup>1</sup>Département de Santé publique, Hôpital Paul Brousse, Paris, France, <sup>2</sup>European Health Economics Ltd, Weybridge, UK, <sup>3</sup>Eli Lilly & Co. Ltd, European Operations Medical, UK, <sup>4</sup>Eli Lilly & Co. Ltd, European Health Outcomes Research, UK)
- P14. Quetiapine monotherapy for mania associated with bipolar disorder  
**M. Jones**, **K. Huizar** (Pharmaceuticals, L.P, Wilmington, DE, USA)
- P15. Factors of profession deficiency in panic disorder with agoraphobia  
**M. Latas**, **V. Starcevic** (Institute of Psychiatry KCS, Serbia and Montenegro)
- P16. Cognitive impairment in late-onset depression  
**J. Loftus**, **G.Colazzo** (Service de Géroto-psychiatrie, Centre Hospitalier Princesse Grace, Monaco)
- P17. Quetiapine combined with lithium or divalproex for the treatment of acute mania associated with bipolar disorder  
**J. Mullen**, **B. Paulsson** (AstraZeneca Pharmaceuticals, L.P., Wilmington, DE, USA)
- P18. Does age of onset affect the course and severity of major depressive disorder?  
**H. Oskarsson**, **H. Kolbeinsson**, **E. Lín<sup>1</sup>**, **T.H. Thorgeirsson**, **J. Gulcher**, **K. Stefansson**, **J.G. Stefansson** (deCode genetics, Reykjavík, Iceland)



- P19. Relationship between suicidality and co-morbid disorders  
**H. Oskarsson, H. Kolbeinsson, E. Línal, T.H. Thorgeirsson, J. Gulcher, K. Stefansson, J.G. Stefansson** (deCode genetics, Reykjavík, Iceland)
- P20. Escitalopram and venlafaxine XR in the treatment of major depressive disorder (MDD) in a randomized, double-blind, fixed-dose study  
**R. J. Bielski<sup>1</sup>, D. Ventura<sup>2</sup>, C-C. Chang<sup>2</sup>, L. Penatzer<sup>2</sup>** (<sup>1</sup>Summit Research Network, <sup>2</sup>Forest Laboratories, Inc., MI, USA)
- P21. Psychiatric effects of three different interferon subtypes in chronic hepatitis patients: a comparison  
**G.I. Perini<sup>1</sup>, C. Pavan<sup>1</sup>, G. Ferri<sup>1,2</sup>, S. Zanone Poma<sup>1</sup>, E. De Toni<sup>2</sup>, L. Chemello<sup>2</sup>, E. Berardinello<sup>2</sup>, F. Bergamaschi<sup>1</sup>, A. Gatta<sup>2</sup>, P. Amodio<sup>2</sup>** (<sup>1</sup>Dept. of Neuroscience-Section of Psychiatry-University of Padova, Italy, <sup>2</sup>Dept. of Clinical and Experimental Medicine, University of Padova, Italy)
- P22. Prazosin effects on specific symptoms in chronic combat trauma PTSD  
**M.A. Raskind<sup>1,2</sup>, R.F. Barnes<sup>1,2</sup>, E.R. Peskind<sup>1,2</sup>, E.C. Petrie<sup>1,2</sup>, C. Thompson<sup>1,2</sup>, E. Kanter<sup>1,2</sup>, A. Radant<sup>1,2</sup>** (<sup>1</sup>VA VISN 20 Mental Illness Research, Education and Clinical Center, Seattle, WA, USA, <sup>2</sup>University of Washington School of Medicine, Seattle, WA, USA)
- P23. The role of the R- and S-enantiomers in the efficacy of citalopram versus escitalopram  
**C. Sánchez, K.P. Bøgesø, B. Ebert, E.H. Reines, C. Bræstrup** (H. Lundbeck A/S, Valby Copenhagen, Denmark)
- P24. Clinical and neurobiological hypothesis in two cases of Cotard syndrome  
**M. Sarchiapone, G. Camardese, V. Carli, C. Cuomo, V. Faia, P. Madia, S. De Risio** (Institute of Psychiatry, Catholic University of Sacred Heart, Roma, Italy)



- P25. Bibliotherapy - cognitive-behavioral selfhelp in patients with partially remitted depression  
**M. Schlogelhofer<sup>1</sup>, G. Wiesegger<sup>1</sup>, U. Bailer<sup>1</sup>, H. Eder<sup>1</sup>, U. Itzlinger<sup>1</sup>, G. Jorgl<sup>1</sup>, F. Leisch<sup>2</sup>, M. Priesch<sup>1</sup>, A. Schosser<sup>1</sup>, K. Hornik<sup>2</sup>, U. Willinger<sup>1</sup>, H.N. Aschauer<sup>1</sup>** (<sup>1</sup>University Hospital for Psychiatry, Department of General Psychiatry, Vienna, Austria, <sup>2</sup>Department for Statistics and Probability Theory, Vienna University of Technology, Austria)
- P26. Respiratory and autonomic panic disorder subtypes: clinical correlates and response to alprazolam-XR  
**E. Schweizer<sup>1</sup>, B. Klee<sup>2</sup>, C. Kremer<sup>2</sup>** (<sup>1</sup>University of Connecticut, Farmington, CT, USA, <sup>2</sup>Pfizer Inc, New York, NY, USA)
- P27. Ziprasidone in mania: 21-day randomized, placebo-controlled trial  
**S. Segal<sup>1</sup>, R.A. Riesenber<sup>2</sup>, K. Ice<sup>3</sup>, P. English<sup>3</sup>** (<sup>1</sup>Segal Institute for Clinical Research, North Miami, FL, USA, <sup>2</sup>Atlanta Center for Medical Research, Decatur, GA, USA, <sup>3</sup>Pfizer Global Research and Development, New London, CT, USA)
- P28. The speed of onset of action of alprazolam-XR compared to alprazolam-CT in panic disorder  
**D. Sheehan, K. Harnett-Sheehan, A. Raj** (University of South Florida, College of Medicine Dept. Psychiatry, Tampa, FL, USA)
- P29. Panic cognitions and response to pharmacotherapy of panic disorder with agoraphobia  
**V. Starcevic<sup>1</sup>, C. White<sup>2</sup>, L. Birner<sup>2</sup>, M. Latas<sup>2</sup>, D. Kolar<sup>2</sup>** (<sup>1</sup>Nepean Hospital, University of Sydney, Penrith, NSW, Australia, <sup>2</sup>University of Newcastle, Newcastle, NSW, Australia)
- P30. Anxiety and the prevalence of major depressive disorders  
**J.G. Stefansson<sup>1</sup>, H. Kolbeinsson<sup>1</sup>, H. Oskarsson<sup>2</sup>, E. Línal<sup>1</sup>, Th. Thorgeirsson<sup>3</sup>, J. Gulcher<sup>3</sup>, K. Stefansson<sup>3</sup>** (<sup>1</sup>Landspítali-University Hospital Reykjavík, <sup>2</sup>Therapeia and <sup>3</sup>deCode Genetics, Reykjavík, Iceland)



- P31. Milnacipran in adolescents suffering from major depression and/or dysthymia  
**S. Tauscher-Wisniewski<sup>1</sup>, M.H. Friedrich<sup>1</sup>, J. Tauscher<sup>2</sup>** (Depts. of <sup>1</sup>Neuropsychiatry for Children & Adolescents, and <sup>2</sup>General Psychiatry, University of Vienna, Austria)
- P32. Remission in placebo-controlled trials of duloxetine with an SSRI comparator  
**M.E. Thase<sup>1</sup>, Y. Lu<sup>2</sup>, M.J. Joliat<sup>2</sup>, T. Treuer<sup>2</sup>, M.J. Detke<sup>2,3,4</sup>** (<sup>1</sup>Department of Psychiatry, University of Pittsburgh Medical Center, Pittsburgh, PA, USA, <sup>2</sup>Eli Lilly and Company, Indianapolis, IN, USA, <sup>3</sup>Department of Psychiatry, Indiana University Medical School, Indianapolis, IN, USA, <sup>4</sup>Departments of Psychiatry, McLean Hospital, Belmont, MA and Harvard Medical School, Boston, MA, USA)
- P33. Olanzapine versus placebo for relapse prevention in bipolar depression  
**M. Tohen<sup>1,2</sup>, C. Bowden<sup>2</sup>, J. Calabrese<sup>3</sup>, JC-Y Chou<sup>4</sup>, T. Jacobs<sup>1</sup>, R.W. Baker<sup>1</sup>, D. Williamson<sup>1</sup>, A.R. Evans<sup>1</sup>** (<sup>1</sup>Research Laboratories, Indianapolis, IN, USA, <sup>2</sup>Dpartment of Psychiatry, Harvard Medical School/McLean Hospital, Belmont MA, USA, <sup>3</sup>Dept. Of Psychiatry, Case Western Reserve Univ. Univ. Hospitals of Cleveland, OH, USA, <sup>4</sup>NYU School of Medicine, New York, NY, USA)
- P34. Olanzapine versus lithium in relapse prevention in bipolar disorder  
**M. Tohen<sup>1,2</sup>, A. Marneros<sup>2</sup>, C. Bowden<sup>3</sup>, R.W. Baker<sup>1</sup>, A.R. Evans<sup>1</sup>, G. Cassano<sup>4</sup>** (<sup>1</sup>Lilly Research Laboratories, Indianapolis, IN, USA, <sup>2</sup>Department of Psychiatry, Harvard Medical School/McLean Hospital, Belmont, MA, USA, <sup>3</sup>Department of Psychiatry, University of Texas Health Science Center, San Antonio, TX, USA, <sup>4</sup>Department of Psychiatry, University of Pisa, Pisa, Italy)
- P35. Quetiapine treatment of borderline personality disorder  
**E. Villeneuve, S. Lemelin** (Clinique Le Faubourg St-Jean, Centre Hospitalier Robert-Giffard, Québec, Canada)



- P36. Anxiolytic activity of propoten: involvement of GABA in this effect  
**T.A. Voronina, G.M. Molodavkin, J.L. Dugina, S.A. Sergeeva, O.I. Epstein** (Institute of Pharmacology RAMS, NPF “Materia Medica Holding”, Moscow, Russia)
- P37. Adjunctive ziprasidone for acute bipolar mania: randomized, placebo-controlled trial  
**R. Weisler<sup>1</sup>, J. Dunn<sup>2</sup>, P. English<sup>2</sup>** (<sup>1</sup>University of North Carolina at Chapel Hill, Department of Psychiatry, Raleigh, NC, USA, <sup>2</sup>Pfizer Global Research and Development, New London, CT, USA)
- P38. Onset of improvement in emotional and painful physical symptoms of depression with duloxetine treatment  
**M.M. Wohlreich<sup>1</sup>, S.K. Brannan<sup>1</sup>, C.H. Mallinckrodt<sup>1</sup>, M.J. Detke<sup>1,2,3</sup>, Y. Lu<sup>1</sup>, J.G. Watkin<sup>1</sup>, T. Treuer<sup>3</sup>, G. Tollefson<sup>1</sup>** (<sup>1</sup>Eli Lilly and Company, Indianapolis, IN, USA, <sup>2</sup>Department of Psychiatry, Indiana University Medical School, Indianapolis, IN, USA, <sup>3</sup>Eli Lilly and Company, Vienna, Austria)
- P39. Bright light therapy in seasonal affective disorder – does it suffice?  
**E. Pjrek, D. Winkler, A. Konstantinidis, N. Thierry, A. Heiden, S. Kasper** (Department of General Psychiatry, University of Vienna, Vienna, Austria)
- P40. Seasonality of birth in seasonal affective disorder  
**E. Pjrek, D. Winkler, J. Stastny, A. Heiden, M. Willeit, A. Konstantinidis, N. Thierry, S. Kasper** (Department of General Psychiatry, University of Vienna, Vienna, Austria)
- P41. The preliminary report of an outpatient, double-blind, placebo-controlled study comparing 30 mg and 45 mg of nemifitide versus placebo in major depression  
**S.A. Montgomery<sup>1</sup>, J.P. Feighner<sup>2</sup>, L. Sverdlov<sup>2</sup>** (<sup>1</sup>Imperial College, London, UK; <sup>2</sup>Innapharma, Park Ridge, USA)



# SCIENTIFIC INFORMATION

## **Audio-Visual Facilities**

Equipment for computerised Power Point presentations is provided during the scientific sessions. Floppy disks and Cd-Rom for Power Point presentations can be tested prior to presentation in the slide preview room. Floppy disks or Cd-Rom must be handed over to the Slide preview Room at least forty minutes before the beginning of the sessions and must be collected directly by the speakers at the end of the session.

**It is essential for the smooth running of the sessions that all speakers hand in their Power Point presentation in due time.**

## **European Accreditation**

Following accreditation by EACCME, 15 credits have been granted in order to allow participants to validate the credits obtained at this activity in their own country. Those interested in obtaining these credits are required to fill in a special feedback rating form available in the congress bags or at the Secretariat Desk. Each medical specialist should claim only those hours of activity that he/she actually spends on the educational activity.

## **Certificate of Attendance**

A certificate of attendance is provided on request at the registration desk on the last day of the congress.

## **Posters**

All the accepted abstracts are scheduled for poster presentation. An area (Foyer) has been prepared for poster exhibition for viewing and discussing with the authors (especially during lunchtime and coffee breaks).

Set up and removal times are as follows:

Wednesday, November 19 from 09.00 to 11.00

Friday, November 21 at 18.15

**Poster size : cm 150 height - cm 90 base**

Authors should be registered to the congress.





# GENERAL INFORMATION

In alphabetical order

## **Badges**

Participants are requested to wear their badge during all forum activities and social events. The participants' registration fee includes admission to all scientific session and exhibition, forum material, welcome reception, coffee breaks and working lunches. Euro 30,00 is charged for replacement of a lost badge.

Congress badges are distinguished as follows:

Participants : Transparent

Speakers: Blue

Exhibitors: Green

Staff : Red

## **Congress Venue and Secretariat**

The Congress Venue is the Monte Carlo Grand Hotel and all Congress material and documentation are available from the forum registration desk located in the foyer of the Hotel.

### *Opening hours*

Wednesday, November 19, 2003      11.00/20.00

Thursday, November 20, 2003      08.00/20.00

Friday, November 21, 2003      08.00/18.00

## **Coffee breaks and Lunches**

During the Congress session breaks, coffee breaks and lunches are served free of charge to all registered participants, wearing Congress badges.



# GENERAL INFORMATION

## **Electricity**

The standard voltage in Monaco is 220 V.

## **Language**

The official language of the Congress is English. No simultaneous translation is provided.

## **Insurance**

The Congress organisers cannot accept liability for personal injuries sustained, or for loss or damage to property belonging to Congress participants, either during or as a result of the Congress. Registration does not include insurance.

## **Mobile phones**

Delegates are kindly requested to keep their mobile phones in off position in the Room where the scientific sessions are held.

## **Smoking Policy**

The *4th International Forum on Mood and Anxiety Disorders* wishes to be a non-smoking congress. Participants are kindly requested to refrain from smoking in the congress venue, including exhibition area and restrooms.

## **Welcome Cocktail**

All delegates are cordially invited to attend the Welcome Cocktail of the congress, which is held on Wednesday, **November 19** at **19.00** in the foyer of the Monte Carlo Grand Hotel



# GENERAL INFORMATION

## **Useful Telephone Numbers:**

**Ambulance and Fire Services**

Ph +377 93301945 and 18

**Police**

Ph +377 93153015 and 17

**Monaco Hospital**

Ph +377 97989769



# LOCAL INFORMATION

## What to do in Monaco

### Sites and attractions

The Principality has many interesting attractions: the Exotic Gardens, the Japanese Gardens situated right alongside the Mediterranean, and also the tourist train which will take you to explore the streets of Monaco. Visit the Old town where you can discover, in the narrow medieval alleyways, the Picturesque Place of Saint Nicolas and placette Bosio, the Cathedral, the Prince's Palace and the Changing of the Guards which takes place every day at 11:55.

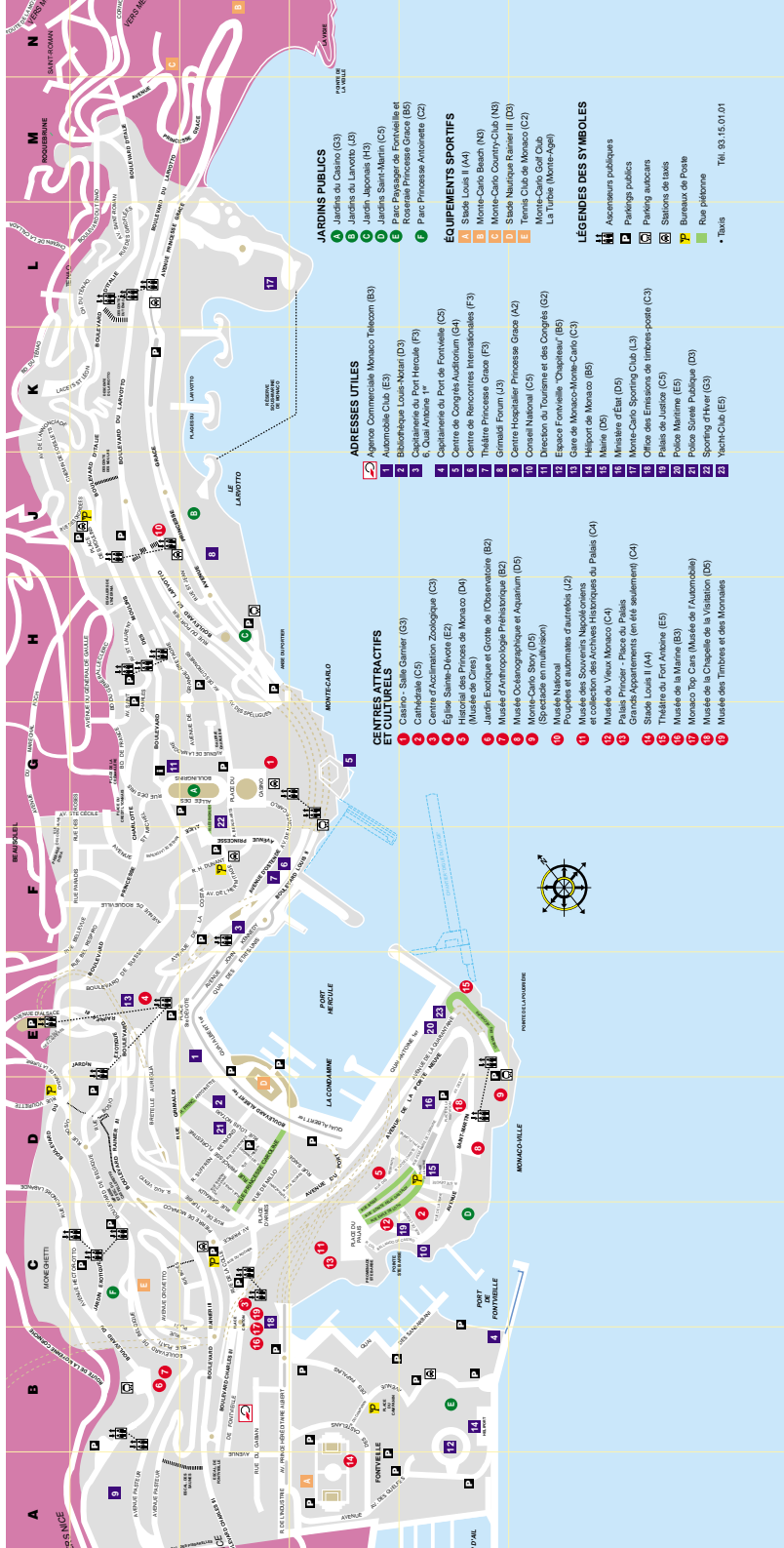
### Museums

- The Oceanographic Museum dedicated to Marine science and rare species of fish
- The Wax museum depicting the history of Monaco's princes and scenes from the Grimaldi dynasty
- The Exhibition of H.S.H. the Prince of Monaco's Private collection of Classic cars: a collection of around 100 vehicles of all ages
- The Museum of Napoleonic Souvenirs: a collection of objects and documents relating to the 1st Empire
- The Naval Museum displaying over 180 models of famous boats
- The Museum of Prehistoric Anthropology with its collection of human and extinct animal remains from the archeological excavations of the region

But also outdoor sporting activities are enjoyed thanks to a very mild climate

- Tennis in the unique setting of the Monte-Carlo Country Club
- Golf on the 18 hole course of the Monte-Carlo Golf Club

And finally the pleasure of shopping in the excellent choice of stores present in the Principality: whether you are looking for clothes, or souvenirs, there are shopping centres and designers shops to satisfy all tastes.



#### JARDINS PUBLICS

- 1 Jardins du Casino (G3)
- 2 Jardins de Larvotto (J3)
- 3 Jardin Japonais (H3)
- 4 Jardin de la Chapelle (G3)
- 5 Parc Païssagier de Fontvieille et Roseaux Princesses Grace (B5)
- 6 Parc Princesses Antonette (C2)

#### ÉQUIPEMENTS SPORTIFS

- 1 Stade Louis I (A4)
- 2 Monte-Carlo Country-Club (N3)
- 3 Monte-Carlo Country-Club (N3)
- 4 Stade Nautique Hanriot (H1)
- 5 Monte-Carlo de Monaco (C2)
- 6 Le Tubie (Monte-Agil)

#### LEGENDES DES SYMBOLES

- 1 Ascenseurs publics
- 2 Parkings publics
- 3 Parking publics
- 4 Bureaux de Poste
- 5 Stations de Police
- 6 Rue piétonne
- 7 Taxibus

#### ADRESSES UTILES

- 1 Agence Commerciale Monaco Telecom (B3)
- 2 Automobile Club (E3)
- 3 Bibliothèque Louis-Notari (D3)
- 4 Casernes du Port Hercule (F3)
- 5 Capitainerie du Port de Fontvieille (C5)
- 6 Centre de Congrès Auditorium (G4)
- 7 Centre de Rencontres Internationales (F3)
- 8 Théâtre Princesses Grace (F3)
- 9 Gémali Forum (J3)
- 10 Centre Hospitalier Princesses Grace (A2)
- 11 Consal National (C5)
- 12 Direction du Tourisme et des Congrès (G2)
- 13 Espace Fontvieille "Capiteur" (B5)
- 14 Gare de Monaco-Monte-Carlo (C3)
- 15 Hôpital de Monaco (B5)
- 16 Maire (D5)
- 17 Monte-Carlo Eclair (D5)
- 18 Monte-Carlo Sporting Club (J3)
- 19 Office des Emissions de timbres-poste (C3)
- 20 Palais de Justice (C5)
- 21 Police Maritime (E5)
- 22 Police Sûreté Publique (D3)
- 23 Sporting d'Hiver (G3)
- 24 Yacht-Club (E5)

#### CENTRES ATTRACTIFS ET CULTURELS

- 1 Casino - Salle Garnier (G3)
- 2 Cathédrale (C5)
- 3 Centre d'Animation Zoologique (C3)
- 4 Eglise Sainte-Dévote (E2)
- 5 Musée de l'Art et d'Archéologie de Monaco (D4)
- 6 Musée de l'Art et d'Archéologie de Monaco (D4)
- 7 Jardin Exotique et Grotte de l'Observatoire (B2)
- 8 Musée d'Anthropologie Préhistorique (B2)
- 9 Monte-Carlo Story (D3)
- 10 Musée d'Art Moderne et d'Art Contemporain (D3)
- 11 Musée d'Art Moderne et d'Art Contemporain (D3)
- 12 Musée des Souverains Napoléoniens et collection des Archives Historiques du Palais (C4)
- 13 Musée du Vieux Monaco (C4)
- 14 Palais Princier - Place du Palais
- 15 Palais National des Arts et des Métiers (en l'été d'été d'été) (C4)
- 16 Stade Louis I (A4)
- 17 Théâtre du Fort Antoine (E5)
- 18 Musée de la Marine (B3)
- 19 Monaco Top Cars (Musée de l'Automobile)
- 20 Musée de la Chapelle de la Visitation (D5)
- 21 Musée des Timbres et des Monnaies



# **ANNOUNCEMENT OF NEXT FORUM**

**The 5<sup>th</sup> International Forum  
on Mood and Anxiety Disorders  
will be held in Monte-Carlo,  
November 18-20, 2004**



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# Cipralex®

– Fast, Effective and excellent Tolerability



Ref: Jack Gorman et al. Efficacy comparison of escitalopram and citalopram in the treatment of major depressive disorder. Pooled analysis of placebo-controlled trials. CNS spectrums; 2002; 7 (suppl 1): 40-44. Ulla Lepola et al. Escitalopram (10-20 mg/day) is effective and well tolerated in a placebo-controlled study in depression in primary care, Int. Clin. Psychopharmacology, 2003; 18; 211-217.

#### Cipralex® Abbreviated Prescribing Information

**Presentation:** "Cipralex", tablets containing 10 mg escitalopram (as oxalate).  
**Indications:** Major depression. Panic disorder with or without agoraphobia. **Dosage:** Usual dose 10 mg once daily. Maximum dose 20 mg/day. In the elderly (>65 years), in panic disorder patients and in patients with reduced hepatic function an initial dose of 5 mg/day is recommended. Caution in patients with severely reduced renal function. Not recommended in children and adolescents (<18 years). When stopping treatment

with escitalopram, the dose should be gradually reduced over a period of one or two weeks. **Contraindications:** Hypersensitivity to escitalopram. Concomitant treatment with non-selective MAOIs. **Pregnancy and lactation:** Careful consideration prior to use in pregnant women. Breast-feeding women should not be treated. **Precautions:** The special warnings and precautions which apply to the class of SSRIs. **Drug interactions:** Reversible, selective MAOIs. Segeline (irreversible MAO-B inhibitor). Medicinal products lowering the seizure threshold. St. John's Wort. Enzyme inhibitors (e.g. omeprazole and cimetidine) may require reduction of escitalopram dose. Drugs metabolised by enzymes CYP 2D6 or 2C19. **Adverse events:** Adverse events, most frequent during first or second weeks, comprise the SSRI class adverse events, e.g. nausea, diarrhoea, and constipation. **Overdosage:** Dose of 190 mg escitalopram has been taken without any serious symptoms. Consult full prescribing information before prescribing. H. Lundbeck A/S, Copenhagen, Denmark. **Date of preparation:** October 2003.