-- Girls' brains develop differently than boys' brains from puberty until old adulthood.
-- IQ may change from puberty and onwards.

A series of photos of four cousins, three of whom were born with only one month chronological difference, followed over 20 years from age almost 6 years in 1991 to age 26 years in 2011 do illustrate the individual differences as well as sex differences.

The variance of normality means that each child must be understood and supported according to his/her individual capacity/mental age and not according to the average norms of his/her chronological age. Of special importance is that mental age may change during development and become more congruent with chronological age from puberty. A low mental age usually goes hand in hand with a slow learning capacity and a high risk of school failure. If the child is not supported according to his/her mental age capacity he/she will suffer from emotional stress and is at risk to develop both behavioral symptoms and a negative self-image.

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Mo-L-13

Obsessive compulsive disorder: Developmental and dimensional perspectives

M.C.D. Rosario
Department of Psychiatry, Federal University of São Paulo, São Paulo, Brazil

Objective. -- Obsessive-Compulsive Disorder (OCD) has lifetime prevalence rates of 1–3%. OCD is a heterogeneous disorder, with many possible subgroups. Both categorical, such as the investigation of age of onset and comorbid disorders, and dimensional approaches have proven to be valuable in trying to establish more homogeneous subtypes.

Method. -- A comprehensive review of clinical, epidemiological, genetic and treatment studies investigating the dimensional hypothesis for OCD was performed.

Results. -- Many studies have consistently identified four to five OC symptom dimensions (Aggression; Sexual/Religious; Symmetry/ordering; Contamination/cleaning; and Hoarding). These studies have also shown that these dimensions are similar in children, adolescents and adults.

Conclusions. -- The description of more homogeneous phenotypes will help to understand how genetic and environmental factors interact for the etiology of OCD and to develop more specific treatment strategies. A dimensional approach to OC symptoms has proven to be a useful approach and has emphasized that OCD is a developmental disorder.

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Mo-L-14

Social signal processing and personal robotics for psychopathology: Signals, communicative acts and behaviours

M. Chetouani
Isis, Université Pierre et Marie Curie – Paris 6, Paris, France

Our research concerns the characterization, the detection and the analysis of social components of signals exchanged between a human and his partner (human-robot-virtual agent). The proposed models are rooted in an emerging field: social signal processing. We have proposed and tried to promote a specific area: atypical social signal processing. The idea is to converge, in the processing and modeling, knowledge from signal processing, machine learning, psychology and psychiatry. The theoretical issues (e.g. dynamic human communication modeling), application issues (e.g. differential diagnosis) and societal issues (e.g. design of assistive devices) are numerous. Our contribution focuses on the characterization of speech signals (emotions), dynamics of human communication (interactional synchrony) and social intelligence. The developed models and obtained results allow to define a research agenda on the analysis, the modeling and the prediction of multi-modal and dynamic components of social interaction.

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Tu-L-15

Le paradoxe des troubles psychiatriques: de la conduite adaptive en réponse à une menace sur l’homeostasie psychique à la tentative de détruire y compris soi-même pour se sentir exister

P. Jeammet
Paris, France

Psychiatric clinical practice, in particular among adolescents, can illustrate in spectacular and paradoxical manner the adaptive dimension of psychiatric disorders, which can explain, in my view, why the patient adheres to pathological behaviours however destructive they might be. Mental disorders are not the result of choice. They impose themselves on the subject, and belong to the register of destructiveness. What they have in common, apart from their stereotyped nature, is the amputation of part of the person’s potential, and an impoverishment of the individual. The constraint takes over for emotional reasons, linked to fear and the feeling of being threatened. Desires are overall not widely implicated.

But by imposing on the self, mental disorders enable the self to recover a form of control, and the illusion that even if the subject has not chosen them, they at least belong to him. Destructiveness is not solely physical and material. It also takes the form of all the behaviours, attitudes and beliefs that consist in erasing or reversing the emotions that might make us dependent on others – striving to be above sorrow, denying suffering, being stronger than disappointment, claiming indifference, and even being stronger than death by choosing that very option. Other possible manifestations are cynicism, misanthropy, disparagement, or refusal of all values except that of believing in that refusal itself. Thus, more or less insidiously, destructiveness can become the reference value, and can intoxicate a human being all the more easily when he has the illusion of being the sole agent in charge. Destructiveness, unlike creativity, has no limits; it escapes disappointment and expectations – the ultimate human narcotic.

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Tu-L-16

Asperger syndrome and high-functioning autism: Are they different?

H. Remschmidt
Marburg University, Marburg, Germany

There is an ongoing debate whether a differentiation of autistic subtypes, especially between Asperger Syndrome (AS) and high-functioning-autism (HFA) is possible and if so whether it is a categorical or dimensional one. The aim of our studies on this question was to examine the possible clustering or responses in different symptom domains without making any assumption concerning diagnostic appreciation.

They give a report on a study about 140 children and adolescents, incorporating 52 with a diagnosis of AS, 44 with HFA, 8 with atypical autism and 36 with other diagnoses related to developmental problems. Our study does not support the thesis that autistic disorders are discrete phenotypes. On the contrary it provides evidence that e.g. AS and autism are not qualitatively distinct disorders, but rather quantitative manifestations of the same basic condition. This will be exemplified by a review of the literature, statistical data and a case history.

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Tu-L-17

When wars target children, how effective are mental health weapons of intervention?

J. Fayyad
Psychiatry and Clinical Psychology, St George Hospital University Medical Center, PO Box, Beirut, Lebanon

While millions of children are exposed to wars in many regions of the world, the science behind mental health mass intervention has lagged behind. This