

German Association  
for Psychiatry, Psychotherapy  
and Psychosomatics



PROGRAMME

# DGPPN CONGRESS BERLIN

PSYCHIATRY, PSYCHOTHERAPY  
AND PSYCHOSOMATICS

27–30 November 2013 | ICC Berlin | Germany  
From therapy to prevention



World Psychiatric  
Association WPA



European Psychiatric  
Association EPA

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# CONTENTS

- 334 | **WELCOME ADDRESSES**
- 339 | **CONGRESS ORGANISATION**
- 339 | Congress President
- 339 | Scientific Congress Coordination
- 339 | English Programme
- 339 | Congress Organiser
- 339 | Press Office
- 339 | Scientific Committee
- 339 | Congress- and Exhibition Office
- 340 | **PROGRAMME STRUCTURE**
- 341 | **PRESENTATION FORMATS OF THE SCIENTIFIC PROGRAMME**
- 342 | **Programme Overview**
- 342 | Wednesday, 27 November 2013
- 344 | Thursday, 28 November 2013
- 346 | Friday, 29 November 2013
- 348 | Saturday, 30 November 2013
- 350 | **TOPIC LIST**
- 351 | **PROGRAMME OVERVIEWS BY TOPICS**
- 355 | **SPECIAL SESSIONS**
- 356 | Congress Opening
- 358 | Plenary Lectures
- 361 | President's Symposia
- 362 | Lectures
- 369 | Breakthroughs and Debates
- 370 | **PSYCHIATRY IN NATIONAL SOCIALISM – RETROSPECTION AND RESPONSIBILITY**
- 373 | **SCIENTIFIC PROGRAMME**
- 374 | Wednesday, 27 November 2013
- 379 | Thursday, 28 November 2013
- 385 | Friday, 29 November 2013
- 392 | Saturday, 30 November 2013
- 396 | **DGPPN SECTIONS**
- 398 | **COOPERATING ASSOCIATIONS AND SOCIETIES**
- 400 | **SUSTAINABILITY AT THE DGPPN CONGRESS**

## Programme References

The official congress language is German


**N** Session of the Young Academy


 Session with Q&A Module (see page 405)

- 403 | **GENERAL INFORMATION**
- 404 | Registration and Payment
  - 405 | Abstract-CD-ROM
  - 405 | Business Center
  - 405 | Cash Machine
  - 405 | Cloakroom
  - 405 | CME Certificates
  - 405 | CO CONGRESS ONLINE®
  - 405 | Congress- and Exhibition Office
  - 405 | Congress App
  - 406 | Congress Counter
  - 406 | Congress Kindergarten
  - 406 | Congress Language
  - 406 | Congress Venue
  - 406 | DGPPN Booth and Lounge
  - 406 | Disclosure Information
  - 406 | Exhibitions
  - 407 | Get-Together /Congress Party
  - 407 | Internet Service Center
  - 408 | Lunch
  - 408 | Media Center
  - 408 | Name Badges
  - 408 | Parking
  - 408 | Press Office
  - 408 | Programme Changes
  - 408 | Taxis
- 409 | **AUTHOR INDEX**
- BACK COVER:  
Floorplan of the ICC Berlin

### Simultaneous interpretations

 English › German

 German › English

 German › English and  
English › German



*As per October 2013*

## WELCOME ADDRESS



Dear Colleagues,

On behalf of the German Association for Psychiatry, Psychotherapy and Psychosomatics I would like to cordially invite you to attend this year's DGPPN congress in Berlin. The 2013 congress will deal first and foremost with the topic 'From therapy to prevention'.

Advances in illness-related research have paved the way for early recognition and intervention throughout medicine and thus enabled an increase in the number of healthy life years. Prevention is still mainly in the hands of health insurance companies and to some extent also in those of general practitioners. However, it is becoming increasingly clear that efficient primary and secondary prevention must be based on knowledge about specific illness processes. Alzheimer's disease, psychoses and eating disorders are current examples. Prevention programmes for eating disorders and suicidality will be presented in lectures (including a lecture by the EPA president, D. Wasserman). Primary prevention is also possible through health education, as will be shown by the bestseller author and director of the Max Planck Institute for Human Development, G. Gigerenzer, in his plenary lecture entitled 'Health as an educational problem?'

The central opening event will address this new social dimension. The neuroscientist A. Damásio, who is recognised internationally for his work on consciousness and the body-mind problem, will talk on the topic 'Thinking about feelings'. Using the Prinzhorn Collection as an example, Thomas Röske, the director of the collection, will showcase the creative works of people with mental illness. The colleagues of the Bavarian Doctors Orchestra will provide the artistic framework.

For months our field has been confronted with the development of a new remuneration system – Flat-rate Charges in Psychiatry and Psychosomatics ('Pauschalierende Entgelte Psychiatrie und Psychosomatik', PEPP) – which has generally been met with opposition. The current status of developments will be presented by representatives of the responsible self-administration of the health care system in the symposium 'Psych remuneration update'. The newly organised remuneration forum, which is primarily devoted to discussion, is looking for suggestions for alternatives and strategies. The platforms on remuneration and care, initiated by the DGPPN, will present the status and development trends in hospital financing and the health care system.

A comparison with other countries is instructive. Several care researchers from other countries will present and evaluate novel care structures and strategies. The President-Elect of the World Psychiatric Association (WPA), D. Bhugra, will talk about the future of psychiatric services.

An equally important topic concerning the treatment of mentally ill people is the much higher sensibility for autonomy, self-determination and patient rights. The implementation of the UN Convention on the Rights of Persons with Disabilities, the new guardianship law and the ongoing reform of the psychiatry-related state laws make these topics more relevant. In addition to the discussion of these ethical and legal questions in a national context, foreign experts will also discuss alternative solutions and international developments. There will be a series of international panels on these related topics with N. Sartorius.

The publication of the American diagnosis system, DSM-5, has also provoked an intense public debate in Germany about the diagnostics of mental disorders and the boundary between health and illness. This discussion will be continued at the congress, where the leading US psychiatrists A. Frances and A. Schatzberg will discuss controversial positions.

The enormous advances in the study of the neurobiological basis of interpersonal and social behaviour have greatly enriched the understanding of mental illnesses. The new discipline 'emotional and social neuroscience' is uncovering the neuronal principles of experience and behaviour, which are fundamentally changing the understanding of mental illnesses and of human behaviour in society and the economy. Plenary lectures by renowned scientists will highlight these relationships: the neurobiologist M. Meaney will talk about epigenetics and public health and the economist E. Fehr will speak on the role of fairness in markets, organisations and in individual decisions. Translational research is seen as the recipe for success throughout medicine. The application of advances in basic research and in the development of new intervention strategies for disease control also shapes clinical research in our field. A forum on 'Innovative treatment for depression' (A. Schatzberg, F. Holsboer) will present forward-looking perspectives. Additional innovative symposia will present groundbreaking research results (including A. Papassotiropoulos, J. Kornhuber, J. Steiner, N. Koutsouleris).

Further highlights include the plenary lectures and lectures by O. Kernberg on narcissistic personality disorder, by the forensic scientists U. Malt and H.-L. Kröber on the psychological origins of criminal violence and by R. Hertwig on the limits of neuroenhancement. State-of-the-art symposia with top-class scientists will round off the programme.

The close cooperation with our Austrian and Swiss colleagues in the ÖGPP and SGPP has again contributed to the high quality of the congress.

A special anniversary coincides with this year's congress: 100 years ago, Karl Jaspers published his epochal book 'General Psychopathology'. This book continues to be an important basis for our field. A symposium with high-ranking colleagues (including P. McHugh) will recognise the continued international importance of Karl Jaspers' psychopathological reasoning.

We have again prepared an exciting programme for students and young specialists and will continue to support them step-by-step on their career paths with specialised symposia, lectures, discussion round tables and workshops that help them in their careers.

For the first time the DGPPN Further and Continuing Education Academy will offer more than 100 workshops.

The DGPPN is also committed to the reconciliation of family and career; the congress kindergarten has meanwhile become a tradition at the ICC.

One of the new features of this congress deserves special attention: we have established a continuous English-language track that will cover the relevant thematic areas of our specialty (and include state-of-the-art symposia in English).

We are looking forward to welcoming you to Berlin and wish you an interesting and insightful time at the congress and productive exchanges with colleagues.

On behalf of the Executive Committee of the DGPPN and with best regards



Your

Prof. Dr. med. Wolfgang Maier, Bonn  
*German Association for Psychiatry, Psychotherapy and Psychosomatics (DGPPN)*

## WELCOME ADDRESS



### From therapy to prevention

In virtue of the current developmental trends of mental health in Germany, the German Medical Association welcomes the fact that this year's DGPPN congress will focus on the prevention of mental disorders.

Meanwhile every fifth child and every fifth adolescent show signs of a mental disorder. Eight percent of the adult population in Germany have depressive symptoms. After a long-lasting downward trend, the suicide rate in Germany has increased again. In the working world, the majority of sick days are related to mental disorders. Furthermore, mental disorders are responsible for 40% of early retirements. Finally, the large number of people with one of the many different dependence disorders and the increasing number of older people with a dementia disorder represent a growing challenge for our health care system.

Although we have good treatment concepts for most of the disorders mentioned above, therapeutic interventions alone do not suffice. Prevention is vital and is called for on the basis not only of health economic considerations but also of our medical-ethical convictions.

We are talking here not only about the early recognition of mental disorders: effective prevention rather has to include also the early identification of possible stress factors and corresponding interventions.

The available early recognition evaluations are aimed at the early recognition of disorders with a differentiated clinical picture; so far, mental disorders play only a marginal role.

However, the draft of a prevention law – which again failed – had planned to make the recording and assessment of stress factors that can affect health an integral component of health examinations in adults and children. Medical recommendations for prevention were to help people at risk gain access to suitable primary prevention offerings. By agreeing on appropriate health objectives it would have become possible to steer statutory health care funds also towards the primary prevention of mental disorders. Preliminary work on the health objective 'depressive disorders' has already been performed by the cooperation network 'gesundheitsziele.de'. The failure of the law to promote prevention means that this opportunity has been missed again.

And yet manifold activities for the primary prevention of mental illnesses already exist which are geared to the social living environments of affected people. Examples are the existing alliances against depression and the manifold activities in health promotion at work.

After all, prevention is not limited with respect to time or place and it can also not replace treatment and rehabilitation, because these also always include aspects of prevention in that they try to prevent progression or remission.

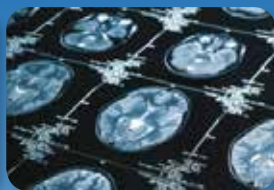
The treatment of mental illnesses requires a particular degree of human care and needs to be organised in a patient-oriented way. This results in different treatment courses, which are difficult to reflect in a compensation system. The results available so far on

the introduction of the flat-rate remuneration system in psychiatry and psychosomatics show that fundamental revisions of the financing systems and calculation bases are required. This year's DGPPN congress is sure to include critical discussions also of these topics.

I wish the DGPPN congress much success in examining this range of issues!



Prof. Dr. med. Frank Ulrich Montgomery  
*President of the German Medical Association  
and of the German Medical Assembly*



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# CONGRESS ORGANISATION

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## Press Office

During the congress the DGPPN will be  
represented in the press office.

## Scientific Committee

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Frank Bergmann, Aachen  
Martin Bohus, Mannheim  
Arno Deister, Itzehoe  
Peter Falkai, Munich  
Jürgen Fritze, Pulheim  
Wolfgang Gaebel, Düsseldorf  
Michael Grözinger, Aachen  
Oliver Gruber, Göttingen  
Iris Hauth, Berlin  
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# PROGRAMME STRUCTURE

## Information regarding the programme structure

The congress programme is structured by topics and within the scientific programme chronologically by days.

For better orientation the various sections have been colour coded.

The programme is sorted by:

› Day › Time and location › Type of event in the following order:

<b>Special Sessions</b>	<b>PR</b>	President's Symposia
	<b>PL</b>	Plenary Lectures
	<b>L</b>	Lectures
	<b>B</b>	Congress Opening, Breakthroughs and Debates
<b>Scientific Programme</b>	<b>HS</b>	Main Symposia
	<b>DF</b>	Discussion Forums
	<b>PC</b>	Pro-Con-Debates
	<b>S</b>	Symposia
	<b>ST</b>	State-of-the-Art-Symposia
	<b>FV</b>	Oral Presentations
	<b>P</b>	Poster Presentations
<b>Further Sessions</b>	<b>WV</b>	Press Sessions, Pupils' Congress/ Teachers' and Parents' congress, Assemblies, Information Day
<b>General Information</b>		

# PRESENTATION FORMATS OF THE SCIENTIFIC PROGRAMME

## President's Symposia 90 min

The president's symposia include events which expand on and develop the congress' main topic in a special way.

## Plenary Lectures 45 min

Eminent experts will present papers on the congress' main topics.

## Lectures 60 min

In this format, an expert gives a talk of about 40 minutes on a main topic of the congress. Afterwards questions can be addressed and discussed by the audience.

## Special Sessions

This category includes sessions, that provide concise information about relevant congress topics or belong to established session series.

## Main Symposia 90 min

The main symposia particularly reflect the congress' main topics.

## State-of-the-Art-Symposia 90 min

State-of-the-Art-Symposia on the most important mental illnesses will take place within the framework of the DGPPN congress.

## Symposia 90 min

Each symposium at the DGPPN Congress 2013 is scheduled for 90 minutes which equals four speakers chaired by two scientists.

## Discussion Forums 90 min

A discussion forum starts with short statements by experts followed by a discussion.

## Pro-Con-Debates 90 min

In this moderated discussion format, experts from a specialised field will debate open questions regarding diagnosis, clinical history and care of mental illnesses. When selecting the debaters, importance has been attached to nominating representatives who have already taken opposing positions in the run-up to the controversial questions.

## Oral Presentations 10 min + 5 min

The oral presentations have been selected by the Scientific Committee after abstract submissions have been reviewed. The 90-minute sessions are mainly grouped by topics and chaired by selected specialists. The time slot for a single presentation in a free communication is 15 minutes including discussion time.

## Poster Presentations

Each accepted poster will be exhibited at the DGPPN Congress 2013. The posters will be grouped into thematic Guided Poster Tours chaired by renowned specialists. The Guided Poster Tours will give the authors the opportunity to present their findings and discuss them with the audience.

## PROGRAMME OVERVIEW

Wednesday, 27 November 2013

	Special Sessions	Scientific Programme	Young Academy	Further Sessions
8				
9	08.30–10.00 Special Sessions Breakthroughs in psychiatry	08.30–10.00 Main Symposia, Symposia, Oral Presentations	09.00–10.00 Introduction to the Congress	
10	10.15–12.00 Congress Opening			
11				
12				
13	12.15–13.45 Presidential Debate	12.15–13.15 Plenary Lecture	12.15–13.15 Lecture	12.30–13.30 Job Market for Hospitals and Practices
14		13.30–15.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Oral Presentations	13.30–14.30 Meet-the- Expert	13.30–15.00 Pupils' Congress
15	14.30–15.30 Lecture			14.00–15.00 Opening Press Conference
16	15.30–17.00 President's Symposium	15.30–17.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Oral Presentations, Pro-Con-Debates	15.30–17.00 Discussion Forum	
17	15.45–16.45 Lecture			
18	17.15–18.45 Lectures	17.15–18.45 Main Symposia, Symposia, State-of- the-Art-Symposia, Discussion Forum, Oral Presentations, Pro-Con-Debates	17.15–18.15 Mentors meet their Mentees	
19			18.30–19.30 The Young Academy introduces itself	19.00–21.00 Get-Together and Congress Party
20				
21				
	07.30–18.00 h: Congress Counter open		07.30–19.00 h: Media Center open	
	07.30–19.30 h: Congress Kindergarten open		Meeting of the DGPPN Sections, p. 294	

Academy		Sessions by the Industry	
			8
			9
<b>08.30–12.30</b>	<b>08.30–12.15</b>		10
1-Day-Workshops WS 100–104	2-Day-Workshops WS 200–215		11
			12
			13
			14
			15
<b>15.30–19.30</b>	<b>15.30–19.15</b>		16
1-Day-Workshops WS 105–109 <b>N</b> WS 106	2-Day-Workshops WS 216–231	<b>17.15–19.15</b>	17
		Satellite Symposia	18
			19
			20
			21
from 09.00 h: Poster Exhibition			
09.00–18.00 h: Technical Exhibition			

# PROGRAMME OVERVIEW

Thursday, 28 November 2013

	Special Sessions	Scientific Programme	Young Academy	Further Sessions
8				
9	09.00 – 10.00 Lecture	08.30 – 10.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Oral Presentations, Pro-Con-Debates		
10	10.15 – 11.45 President's Symposium Triolog Forum	10.15 – 11.45 Main Symposia, Symposia, State-of-the-Art- Symposia, Discussion Forum, Oral Presentations	10.15 – 11.45 Symposia	
12	12.00 – 13.00 Plenary Lecture		12.30 – 13.30 Job Market for Hospi- tals and Practices	12.00 – 13.00 Press Conference
14	13.30 – 14.45 Lecture Triolog Forum	13.30 – 15.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Discussion Forum, Oral Presentation	13.30 – 14.30 Meet-the- Expert 13.30 – 15.00 Symposia	13.15 – 14.45 Diskussions- forum 14.00 – 15.00 Press Con- ference 14.15 – 15.15 Teachers' and Parents' Congress
16		15.30 – 17.00 Symposia, State-of-the-Art- Symposia, Oral Presentations, Pro-Con-Debates	15.30 – 16.30 Lecture	15.30 – 17.00 Teachers' and Parents' Congress
18	17.15 – 18.45 Special Sessions	17.15 – 18.15 Lectures 17.15 – 18.45 Main Symposia, Symposia, State-of-the-Art- Symposia, Discussion Forum, Oral Presentations	17.15 – 18.45 Special Session	
19	19.00 – 21.00 DGPPN General Assembly			
21	08.00 – 18.00 h: Congress Counter open		07.30 – 19.00 h: Media Center open	
	08.00 – 19.30 h: Congress Kindergarten open		Meeting of the DGPPN Sections, p. 294	

Academy		Nursing Workshop	Sessions by the Industry
			07.30–08.30
			Breakfast Symposia
<b>08.30–12.30</b>	<b>08.30–12.15</b>		
1-Day-Workshops WS 110–114 <b>N</b> WS 111	2-Day-Workshops WS 200–215		
		13.00–15.00	
		Nursing Workshops	13.30–15.00
		PWS 300–304	Luncheon Symposia
<b>15.30–19.30</b>	<b>15.30–19.15</b>		
1-Day-Workshops WS 115–119 <b>N</b> WS 116	2-Day-Workshops WS 216–231		
			17.15–19.15
			Satellite Symposia
09.00–18.00 h: Poster Exhibition		13.30–15.00 h: Guided Poster Tours	
09.00–18.00 h: Technical Exhibition			

## PROGRAMME OVERVIEW

Friday, 29 November 2013

	Special Sessions	Scientific Programme	Young Academy	Further Sessions
8				
9	09.00–10.00 Lecture	08.30–10.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Oral Presentations	08.30–10.00 Symposia	
10	10.15–11.45 President's Symposium Special Session Breakthroughs in psychiatry	10.15–11.45 Main Symposia, Symposia, State-of-the-Art- Symposia, Discussion Forum, Oral Presentations	10.15–11.45 Symposia	
12	12.00–13.00 Plenary Lecture		12.00–13.00 Lecture	12.00–13.00 Press Conference
13			12.30–13.30 Job Market for Hospitals and Practices	13.00–15.00
14	13.30–15.00 Presidential Debate Special Session	13.30–15.00 Main Symposia, Symposia, State-of-the-Art- Symposia, Pro-Con-Debates	13.30–14.30 Meet-the-Expert	BVDP General Assembly
15	14.00–15.00 Lecture			
16	15.30–17.00 Special Session	15.30–16.30 Lecture	15.30–17.00 Symposia, State-of-the-Art- Symposia, Discussion Forum, Oral Presentations	
17				
18	17.15–18.45 Special Session	17.15–18.45 Main Symposia, Symposia, State-of-the-Art- Symposia, Oral Presentations	17.15–18.15 Lecture	
19				
20				
21				
	08.00–18.00 h: Congress Counter open		07.30–19.00 h: Media Center open	
	08.00–19.30 h: Congress Kindergarten open		Meeting of the DGPPN Sections, p. 294	





## PROGRAMME OVERVIEW

Saturday, 30 November 2013

	Special Sessions	Scientific Programme	Young Academy	Further Sessions
8				
9	08.30 – 10.00 Special Session	08.30 – 10.00 Main Symposia, Symposia, State-of-the-Art-Symposia, Oral Presentations	08.30 – 10.00 Symposia	
10	09.00 – 10.00 Lecture			
11	10.15 – 11.45 President's Symposium	10.15 – 11.45 Main Symposia, Symposia, State-of-the-Art-Symposia, Discussion Forum, Oral Presentations, Pro-Con-Debate	10.15 – 11.45 Symposia	
12	12.00 – 13.00 Plenary Lecture		12.00 – 13.15 Discussion Forum	12.00 – 13.30 Information Day for Affected Persons, Families and Interested People
13				
14	13.30 – 14.30 Lecture	13.30 – 15.00 Main Symposia, Symposia, State-of-the-Art-Symposia, Discussion Forum, Oral Presentations	13.30 – 15.00 Symposia	
15				
16				
17				
18				
19				
20				
21				
	08.00 – 16.00 h: Congress Counter open		07.30 – 13.30 h: Media Center open	
	08.00 – 17.30 h: Congress Kindergarten open		Meeting of the DGPPN Sections, p. 294	

Academy			
			8
			9
<b>08.30–12.30</b>	<b>08.30–12.15</b>		10
1-Day-Workshops	2-Day-Workshops		11
WS 129–133	WS 232–247		12
<b>N</b> WS 121			13
			14
<b>13.30–17.30</b>	<b>13.30–17.15</b>		15
1-Day-Workshops	2-Day-Workshops		16
WS 134–137	WS 248–261		17
			18
			19
			20
			21
09.00 – 12.00 h: Poster Exhibition		12.00 – 14.00 h: Poster Removal	
09.00 – 14.00 h: Technical Exhibition			

## TOPIC LIST

- |          |  |          |   |
|----------|--|----------|---|
| TOPIC 1  | Organic mental disorders, dementia, F0                       | TOPIC 13 | Neurobiology, neurogenetics, epidemiology       |
| TOPIC 2  | Mental disorders due to psychoactive substance use, F1       | TOPIC 14 | Psychotherapy                                   |
| TOPIC 3  | Psychotic disorders, F2                                      | TOPIC 15 | Pharmacotherapy                                 |
| TOPIC 4  | Affective disorders, F3                                      | TOPIC 16 | Other psychiatric therapies                     |
| TOPIC 5  | Neurotic, stress-related and somatoform disorders, F4        | TOPIC 17 | Forensic psychiatry                             |
| TOPIC 6  | Eating disorders, sleep disorders and others of category, F5 | TOPIC 18 | Social psychiatry                               |
| TOPIC 7  | Personality disorders, F6                                    | TOPIC 19 | Health services research and health care policy |
| TOPIC 8  | Disorders closely related to childhood and adolescence, F7-9 | TOPIC 20 | Prevention                                      |
| TOPIC 9  | Comorbidity of psychic and somatic disorders, psychosomatics | TOPIC 21 | Young psychiatrists and academic training       |
| TOPIC 10 | Gerontopsychiatry  | TOPIC 22 | Philosophy, history and ethics                  |
| TOPIC 11 | Other disorders  | TOPIC 23 | Suicidality                                     |
| TOPIC 12 | Brain imaging, neurophysiology, neuropsychology              | TOPIC 24 | Diagnostics and classification                  |
|          |  | TOPIC 25 | Nursing   |
|          |  | TOPIC 26 | Health care professions                         |
|          |  | TOPIC 27 | Mental illness in literature, film and music    |
|          |  | TOPIC 29 | Other topics                                    |

# PROGRAMME OVERVIEW BY TOPICS

## TOPIC 1

Organic mental disorders, dementia, Fo

**S-091 | Symposium** \_\_\_\_\_ 381

Imaging Alzheimer's disease: from details towards a bigger picture

**S-161 | Symposium** \_\_\_\_\_ 386

Preclinical diagnosis of neuropsychiatric disorders, an essential requirement for the target selection and design of preventive trials

**S-174 | Symposium** \_\_\_\_\_ 388

Alzheimer's Disease: diagnosis, prevention and early treatment

**ST-028 | State-of-the-Art-Symposium** \_\_\_\_\_ 391

Dementia

---

## TOPIC 2

Mental disorders due to psychoactive substance use, F1

**ST-020 | State-of-the-Art-Symposium** \_\_\_\_\_ 384

Addictive disorders

**FV-024 | Oral Presentations** \_\_\_\_\_ 391

Substance and non-substance related addictions

---

## TOPIC 3

Psychotic disorders, F2

**ST-010 | State-of-the-Art-Symposium** \_\_\_\_\_ 379

Psychotic disorders

**S-103 | Symposium** \_\_\_\_\_ 382

Migration and psychosis

**HS-017 | Main Symposium** \_\_\_\_\_ 383

The way into psychosis: from unusual subjective experiences to a psychotic disorder

**S-166 | Symposium** \_\_\_\_\_ 388

Cognitive behaviour therapy for psychosis: novel approaches and neural correlates

**S-168 | Symposium** \_\_\_\_\_ 388

Of mice and men – translational research in psychiatry involving human and animal models

**S-187 | Symposium** \_\_\_\_\_ 390

Schizophrenia as immunological disorder

---

## TOPIC 4

Affective disorders, F3

**B-001 | Special Session** \_\_\_\_\_ 374

Breakthroughs in psychiatry: depression – overcoming roadblocks in the development of truly novel anti-depressant strategies by research

**ST-003 | State-of-the-Art-Symposium** \_\_\_\_\_ 376

Treatment of major depression

**ST-015 | State-of-the-Art-Symposium** \_\_\_\_\_ 380

Bipolar Disorder

**P-13 | Poster Presentations** \_\_\_\_\_ 381

Depressive disorders II

**P-12 | Poster Presentations** \_\_\_\_\_ 389

Depressive disorders I

---

## TOPIC 5

Neurotic, stress-related and somatoform disorders, F4

**S-092 | Symposium** \_\_\_\_\_ 381

Trauma-related psychopathology – new aspects

**ST-022 | State-of-the-Art-Symposium** \_\_\_\_\_ 385

Anxiety disorders and OCD

---

## TOPIC 7

Personality disorders, F6

**ST-006 | State-of-the-Art-Symposium** \_\_\_\_\_ 378

Borderline personality disorder

**S-100 | Symposium** \_\_\_\_\_ 382

The future of personality disorders

**FV-023 | Oral Presentations** ..... 390  
 Personality disorders and trauma

---

**TOPIC 8**

Disorders closely related to childhood and adolescence, F7-9

**FV-021 | Oral Presentations** ..... 387  
 Disorders in relation to childhood and youth

---

**TOPIC 12**

Brain imaging, neurophysiology, neuropsychology

**S-025 | Symposium** ..... 375  
 Psychosocial and genetic determinants of brain structure and activation

**S-049 | Symposium** ..... 377  
 Single symptom approaches in schizophrenia: neuronal correlates of auditory hallucinations and language related symptoms

**FV-029 | Oral Presentations** ..... 392  
 Stress symptoms and depressive diseases

**S-249 | Symposium** ..... 394  
 Self-regulation of brain activity using neurofeedback: experimental approaches and clinical applications

**FV-035 | Oral Presentations** ..... 394  
 Brain imaging and neurogenetics

---

**TOPIC 13**

Neurobiology, neurogenetics, epidemiology

**PL-002 | Plenary Session** ..... 380  
 Parental regulation of the structure and function of the genome in the offspring: implications for familial transmission and treatment programs

**PL-003 | Plenary Session** ..... 387  
 Social and biological foundations of fairness

**S-190 | Symposium** ..... 390  
 Psychiatric epigenetics – from bench to bedside

**L-016 | Lecture** ..... 393  
 Is our brain a neuro-social organ? Neuroscientific and psychiatric investigations

**PR-004 | President's Symposium** ..... 393  
 The social brain

**S-237 | Symposium** ..... 393  
 Interaction of the endogenous and exogenous factors in pathogenesis of the mental disorders: from research to therapy and prevention

---

**TOPIC 14**

Psychotherapy

**FV-008 | Oral Presentations** ..... 379  
 Psychotherapy and pharmacotherapy

**PL-004 | Plenary Session** ..... 394  
 Narcissistic personality disorder: clinical presentation and treatment

---

**TOPIC 15**

Pharmacotherapy

**S-142 | Symposium** ..... 385  
 Applying genetic testing to improve psychiatric drug treatment and reduce health-care costs

**B-015 | Special Session** ..... 387  
 Presidential Debate: arising questions on antidepressant therapy

**S-211 | Symposium** ..... 392  
 Cognitive enhancement in health and disease

**S-250 | Symposium** ..... 394  
 www.medicawiki.eu: a psychopharmacological decision support system

---

**TOPIC 16**

Other psychiatric therapies

**HS-007 | Main Symposium** ..... 376  
 Brain stimulation techniques and the human reward system

---

<b>TOPIC 17</b>	
Forensic psychiatry	
<b>HS-008   Main Symposium</b> _____	377
Amok acts and perpetrators of terrorism	
<b>L-006   Lecture</b> _____	379
What can psychiatry contribute to the understanding of extreme violence?	
<b>S-082   Symposium</b> _____	380
International perspectives on prison psychiatry	
<hr/>	
<b>TOPIC 18</b>	
Social psychiatry	
<b>S-042   Symposium</b> _____	376
Clinical work with lesbian, gay, bisexual and transgender (LGBT) populations in Canada and the United States	
<b>S-195   Symposium</b> _____	391
Fighting stigma and discrimination	
<b>S-225   Symposium</b> _____	392
Psychiatry in post-Soviet states: common past – different future?	
<hr/>	
<b>TOPIC 19</b>	
Health services research and health care policy	
<b>PL-001   Plenary Session</b> _____	375
Health as an educational problem? The century of the patient	
<b>S-028   Symposium</b> _____	375
Actual trends in the field of psychiatric rehabilitation	
<b>B-009   Special Session</b> _____	383
Conflicts of interest – European approaches	
<b>B-010   Special Session</b> _____	383
Psychiatry in Australia and nearby lands	
<b>L-009   Lecture</b> _____	383
Future of psychiatric services in the 21st century	
<b>S-125   Symposium</b> _____	384
Psychiatric care for people with intellectual disabilities – an international perspective	
<b>S-145   Symposium</b> _____	386
Psychiatry without compulsory treatment? Experience and findings	
<b>S-154   Symposium</b> _____	386
Right to medical treatment and right to autonomy	
<b>S-170   Symposium</b> _____	388
Mental Health Care – cross-european perspectives	
<hr/>	
<b>TOPIC 20</b>	
Prevention	
<b>S-013   Symposium</b> _____	374
Mental health promotion and suicide prevention targeting adolescents: results of the SEYLE multi-center research project	
<b>L-004   Lecture</b> _____	376
Prevention of eating disorders	
<b>S-054   Symposium</b> _____	378
The influence of sociocultural contextual factors on lesbian, gay, bisexual and transgender's (LGBT) mental health	
<hr/>	
<b>TOPIC 21</b>	
Young psychiatrists and academic training	
<b>S-090   Symposium</b> _____	381
Challenges and perspectives for psychiatrists within and outside Europe	
<hr/>	
<b>TOPIC 22</b>	
Philosophy, history and ethics	
<b>PR-001   President's Symposium</b> _____	375
Jaspers' General Psychopathology – international perspectives	
<b>HS-009   Main Symposium</b> _____	377
Coercive Treatment – European perspectives	
<b>L-011   Lecture</b> _____	385
Mental disorders and their care through history in Egypt	
<b>L-017   Lecture</b> _____	394
The Association of German Neurologists and Psychiatrists and its attitude toward psychotherapy 1935-1941	

## TOPIC 23

## Suicidality

**L-007 | Lecture** \_\_\_\_\_ 380

Mental health of European youth and scientific evidence for the suicide treatment and prevention

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## TOPIC 24

## Diagnostics and classification

**B-004 | Special Session** \_\_\_\_\_ 374

Presidential Debate: new psychiatric classifications – who is served, who is disserved?

**L-003 | Lecture** \_\_\_\_\_ 376

The uses and misuses of psychiatric diagnosis

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## TOPIC 29

## Other topics

**PR-002 | President's Symposium** \_\_\_\_\_ 379

Positive meanings of psychiatry

**PR-003 | President's Symposium** \_\_\_\_\_ 385

Prevention of mental disorders resulting from occupational stress

**L-014 | Lecture** \_\_\_\_\_ 389

Why aren't we smarter already?  
Evolutionary trade-offs and cognitive enhancements

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# SPECIAL SESSIONS

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# CONGRESS OPENING

## ALL PARTICIPANTS ARE CORDIALLY INVITED

Wed, 27 Nov 2013 | 10.15 – 12.00 h | Hall 2



### Mental disorders 2013 – Growing importance, new prioritisation

*Wolfgang Maier, Bonn (Germany)*

### Award Ceremony „Wilhelm-Griesinger-Medaille“

*Wolfgang Maier, Bonn (Germany)*

This medal is presented to people, who are honoured for their life achievements in the field of psychiatry and psychotherapy.

### Ludwig van Beethoven, Concerto in C Major for Piano and Orchestra op.15

*Rainer Rupprecht, Piano*

*Reinhard Steinberg, Conductor*

*BÄO Bavarian Doctors' Orchestra*



### Thinking about feelings

*António Damásio, Los Angeles (USA)*

Feelings are mental experiences of body states that signify physiological need (for example, hunger), tissue injury (for example, pain), optimal function (for example, well-being), threats to the organism (for example, fear or anger), or specific social interactions (for example, compassion, gratitude or love). Feelings can be evoked by primary physiological stimuli and by a number of situations that have been learned in association with such stimuli. Feelings constitute a crucial component of the mechanisms of life regulation, from simple to complex. Their neural substrates can be found at all levels of the nervous system, from individual neurons to subcortical nuclei and cortical regions.



## **QD+E** The Prinzhorn Collection – Past and present of art by people with psychiatric experience

*Thomas Röske, Heidelberg (Germany)*

The Heidelberg Prinzhorn Collection, part of the Department of General Psychiatry, is the most extensive and, because of its historical pieces, worldwide most important collection of art by people with a diagnosis of mental illness. The collection, started in 1919 by the art historian and doctor Hans Prinzhorn (1886-1933) and presented in his book 'Bildneri der Geisteskranken' ('Artistry of the Mentally Ill'), stimulated discussions already among expressionist and surrealist artists. It survived the period of National Socialism because its pieces were misused as comparative material in the exhibition 'Degenerated Art'. Not until the 1960s did the exhibition organiser Harald Zseemann draw attention to the collection again. The inventory has been growing again since 1980. These days the museum, opened in 2001, organises three to four exhibitions annually on topics from the realm of art and psychiatry. The presentation will trace the development of the collection and elucidate its relevance for the history of art and society in the 20th and 21st centuries. The outlook will address the most recent relationships with the city of Berlin.

## Ludwig van Beethoven, Concerto in C Major for Piano and Orchestra op.15

*Rainer Rupprecht, Piano*

*Reinhard Steinberg, Conductor*

*BÄO Bavarian Doctors' Orchestra*



### **BÄO Bavarian Doctors' Orchestra**

Founded in 1967 by Reinhard Steinberg, in his first semester of medicine at the LMU Munich, as the 'Orchestra of Munich Medical Students' with 22 fellow students. The orchestra played music on a very respectable symphonic level until 1973. The start of working life and the years of medical learning and changing workplaces, however, made the weekly rehearsals of the academic orchestra impossible for many and the orchestra disbanded, to prevent it lapsing into musical agony. In 1975 the orchestra was reformed, now as the 'BÄO Bavarian Doctors Orchestra', and started working together once a year. With its 180 active members from Bavaria and the whole of Germany, almost all of whom are doctors and several of whom are even from the second generation of players, the BÄO is a large symphony orchestra with a special affinity for romantic and modern music.

Wed, 27 Nov 2013 | 12.15 – 13.15 h | Hall 3



 **Health as an educational problem?**

**The century of the patient**

*Gerd Gigerenzer, Berlin (Germany)*

*Chairs: Frank Schneider, Aachen (Germany)*

*Andreas Meyer-Lindenberg, Mannheim (Germany)*

Efficient health care requires well-informed doctors and patients. The health care system bequeathed to us by the 20th century does not fulfil either of these requirements. Many doctors, and even more patients, do not understand the available medical data and research findings. Seven 'sins' share responsibility for this lack of knowledge: profit-oriented financing; misleading reporting in medical journals, patient brochures and the media; conflicts of interest; and defensive medicine and doctors, who have an inadequate understanding of statistical evidence. Tax increases or rationing of health care are often considered to be the only practicable alternatives to the cost explosion in health care. There is, however, a third option: better education can facilitate better health care for less money. The 21st century should be the century of the patient.

**Award Ceremony:**

**DGPPN-Award for Research on Medical Care and Epidemiology of mental illnesses**

*Laudation: Frank Schneider, Aachen (Germany)*

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Thu, 28 Nov 2013 | 12.00 – 13.00 h | Hall 2



**E** **Q**E→D **Parental regulation of the structure and function of the genome in the offspring: implications for familial transmission and treatment programs**

*Michael Meaney, Quebec (Canada)*

*Chair: Peter Falkai, Munich (Germany)*

*Andreas Meyer-Lindenberg, Mannheim (Germany)*

Maternal care directly alters the development of stress responses as well as multiple forms of learning and memory, including fear-related learning. These effects involve stable and tissue-specific changes in transcription. Thus, in the adult hippocampus there are prominent 'maternal' effects on glucocorticoid receptor (GR) expression in brain regions in the rat that regulate stress responses, as well as in the expression of genes that encode for sub-units of various glutamate receptors involved in synaptic plasticity and learning. The stable effects of variations in maternal care associate with epigenetic modifications at the level of DNA methylation and post-translational modifications to histones. Recent findings suggest significant effects on levels of 5-hydroxymethylation, as well as histone methylation in the promoter for the GR gene as well as that for *Grm1*, which encodes for a metabotropic glutamate receptor (mGluR1). Differences in the hippocampal expression of GR and mGluR1 are directly linked to maternal effects of stress responses and hippocampal neuronal function.

Translational studies show comparable effects of parent – offspring interactions in humans, including effects child maltreatment on the epigenetic state of multiple GR gene promoters. Genome-wide analyses of the epigenome with human samples show effects of parental care, as well as of intervention programs that associate with specific endophenotypes. Analysis of these samples also suggests clusters of co-methylated sites that appear to form operative transcriptional networks that are influenced by childhood experience.

Finally, studies in rodent models suggest an epigenetic basis for individual differences in maternal behaviour as well as for the trans-generational transmission of such variations. These results of these studies are consistent with those of intervention programs that directly or indirectly target the quality of parent – offspring interactions with effects on the mental health of the offspring.

**Award Ceremony:**

**DGPPN Award for Neurobiological Research in Psychiatry**

*Laudation: Peter Falkai, Munich (Germany)*

## PLENARY LECTURE

Fr, 29 Nov 2013 | 12.00 – 13.00 h | Hall 2



### **QD→E Social and biological foundations of fairness**

*Ernst Fehr, Zürich (Switzerland)*

*Chairs: Peter Falkai, Munich (Germany)*

*Andreas Meyer-Lindenberg, Mannheim (Germany)*

I will document the increasing evidence suggesting an important role of fairness (i.e. social preferences) in human social interaction. Social preferences have profound effects on the behavior of individuals, organisations and markets. However, their social and economic impact is contingent on the prevailing legal and institutional environment, implying that under strong forms of market competition they are largely irrelevant even if a majority of the people cares for fairness. In addition, fairness-oriented, altruistic and norm compliant behavior requires the functional integrity of specific brain areas that have been shown to be causally involved in these behaviors. The scientific tools used to create this knowledge and the substantive knowledge about the social and biological foundations of these behaviors may also be valuable for psychological and psychiatric research and practice.

**Award Ceremony:**

**DGPPN Doctoral Thesis Award – Hans-Heimann Award**

*Laudation: Peter Falkai, Munich (Germany)*

Sa, 30 Nov 2013 | 12.00 – 13.00 h | Hall 2



### **QD→E Narcissistic personality disorder: clinical presentation and treatment**

*Otto F. Kernberg, White Plains (USA)*

*Chairs: Sabine C. Herpertz, Heidelberg (Germany)*

*Arno Deister, Itzehoe (Germany)*

This presentation will summarize the Transference Focused Psychotherapy (TFP) for Borderline Personality Disorder, an empirically validated psychodynamic psychotherapy for severe personality disorders. The general technical approach, its differences with other therapeutic approaches to borderline patients, and the current state of correspondent clinical and research development will be outlined. One major focus of this presentation will be the technique of transference/counter transference interpretation from a technical neutral standpoint.

**Award Ceremony:**

**DGPPN Award for Medical Psychotherapy**

*Laudation: Sabine C. Herpertz, Heidelberg (Germany)*

Wed, 27 Nov 2013 | 15.30 – 17.00 h | Hall 3

**E** **Q&A** **E→D** **Jaspers' General Psychopathology – international perspectives**

*Chairs: Wolfgang Maier, Bonn (Germany)  
Martin Heinze, Rüdersdorf (Germany)*

**Award Ceremony:**

**DGPPN-Award for Philosophy in Psychiatry**

*Laudation: Wolfgang Maier, Bonn (Germany)*

**Karl Jaspers – on the road to psychopathology and beyond**

*Heinz Häfner, Mannheim (Germany)*

**Teaching American psychiatrists about Karl Jaspers**

*Paul R. McHugh, Baltimore (USA)*

**Jaspers' perspectivism: its contemporary relevance**

*Osborne P. Wiggins, Louisville (USA)*

Thu, 28 Nov 2013 | 10.15 – 11.45 h | Hall 2



**E** **Q&A** **E→D** **Positive meanings of psychiatry**

*Chairs: Norman Sartorius, Geneva (Switzerland)  
Wolfgang Maier, Bonn (Germany)*

**Evidence-based primary prevention of mental disorders**

*Clemens M. H. Hosman, Nijmegen (The Netherlands)*

**Suicide prevention in Europe**

*Ulrich Hegerl, Leipzig (Germany)*

**Paradigms lost: lessons learned in the fight against stigma**

*Heather Stuart, Ontario (Canada)*

**Recovery – together we are stronger**

*Michaela Amering, Vienna (Austria)*

Wed, 27 Nov 2013 | 15.45 – 16.45 h | Hall 2



**E** **Q&A→D** **The uses and misuses of psychiatric diagnosis**

*Chairs:* Wolfgang Gaebel, Düsseldorf (Germany)

Fritz Hohagen, Lübeck (Germany)

*Speaker:* Allen J. Frances, Coronado (USA)

We will begin with a history of psychiatric diagnosis starting with the Shaman and ending with the modern shrink. We will then discuss the conceptual issues that underlie psychiatric diagnosis with particular emphasis on two questions: 1) Why is it so difficult to translate the explosively expanding findings of neuroscience into biological tests for psychopathology? and, 2) What is a mental disorder and why is it so hard to define? We will then critique DSM 5 for being a radical document that greatly expands the reach of psychiatry by incorporating into mental disorder much of what is now considered normal. DSM 5 includes many new mental disorders: Each of these blurs the fuzzy boundary between illness and normality. In aggregate, these newly invented „disorders“ would result in diagnostic inflation with the addition of tens of millions of newly minted „patients“, many of whom will be false positive misidentifications. None of these alleged „disorders“ has a substantial research base to indicate how they should be defined or what impact they will have. None has an effective treatment. All present serious risks—especially excessive use of potentially dangerous medication, and stigma. Some of the new „diagnoses“ have devastating forensic implications because they blur the boundary between mental disorder and criminality. All would result in the misallocation of mental health resources away from the truly ill who badly need them toward the misidentified who would be better off without them. Many of the new diagnoses may promote fads and the false notion that there is a pervasive and spreading epidemic of mental disorder. lowering the threshold of existing disorders: DSM 5 displays a consistent pattern across disorders of loosened definitional requirements that will dramatically increase the rates and dilute the meaningfulness of psychiatric diagnosis. DSM 5 has suffered from a combination of excessive ambition to accomplish a paradigm shift and poor planning and execution. A paradigm shift in psychiatry is premature until we have a much firmer grasp of the causes of psychopathology.

**Learning Objectives**

- 1) The participant will learn the history of psychiatric diagnosis.
- 2) The participant will learn why it has been so difficult to translate the findings of neuroscience into improvements in clinical practice.
- 3) The participant will learn the difficulty in defining mental disorder and the epistemology of psychiatric diagnosis.



Wed, 27 Nov 2013 | 17.15 – 18.45 h | Hall Madrid



### **E** 24th Anna-Monika Award Ceremony and lecture of the Award Winner

*Chairs:* Florian Holsboer, Munich (Germany)  
Rainer Rupprecht, Regensburg (Germany)

*Speaker:* Alan F. Schatzberg, Stanford (USA)

Major depression with psychotic features represents a severe disorder with high morbidity and mortality. This presentation reviews recent work on the disorder, with a particular emphasis on the role that excessive HPA Axis activity may play in the pathogenesis of the disorder and the response to novel therapies. A major biological component to the disorder has been hypercortisolemia as indicated by high rates of dexamethasone nonsuppression and very high post-dexamethasone levels, elevated Afternoon Cortisol Test and 24 hour urinary cortisol levels, elevated evening and nighttime plasma cortisol levels, etc. A number of years ago we hypothesized that elevated cortisol was responsible for the development of psychotic thinking and that blocking cortisol's effects in brain could ameliorate symptoms. We have pursued the use of a glucocorticoid receptor (GR) antagonist—mifepristone. Treatment for 7 days has resulted in improvement in psychotic symptoms at 1-8 weeks in a number of studies although there are failed trials as well. Recent reports indicate that higher doses and drug blood levels may be required to maximize response rates and clinical trials with higher doses continue. Elevated cortisol is also associated with impaired neuropsychological performance, including on verbal and visual memory measures. A recent report by others points to dosing mifepristone for 7 days results in improved visual memory at 8 weeks in bipolar depressives. Last, the elevated cortisol levels in delusional depression allows an avenue for exploring the role that HPA Axis genes may play in the risk for developing either or both hypercortisolemia and psychosis. We report on the association of specific GR allelic variation with both elevated cortisol levels as well as psychosis in a mixed cohort of patients and controls. Moreover, allelic variation for CRH-R1 appeared to be associated with both depression and psychosis. Implications for these findings are discussed.

#### **Laudation to Alan F. Schatzberg:**

*Florian Holsboer, Munich (Germany)*

#### **Award Ceremony:**

*Michael Bommers, Düsseldorf (Germany)*

#### **Lecture of the Award Winner:**

**The role of the Hypothalamic-Pituitary-Adrena (HPA) axis in the pathogenesis and treatment of delusional Major Depression**

*Alan F. Schatzberg, Stanford (USA)*

Thu, 28 Nov 2013 | 09.00 – 10.00 h | Hall 2



**E Q&A→D** What can psychiatry contribute to the understanding of extreme violence?

*Chairs:* Thomas E. Schläpfer, Bonn (Germany)  
Bernhard Bogerts, Magdeburg (Germany)

*Speaker:* Ulrik Fredrik Malt, Oslo (Norway)

Extreme violence is rare, but shocking when it occurs. Among the general public, insanity, but also sadism, political or religious fanaticism, are often suggested to explain the terrible acts. Other factors, mostly suggested by mental health workers, include personality disorders, e.g. antisocial or narcissistic personality disorders, or impulsive violence under the influence of psychoactive substances. Professionals adopting a psychological perspective may emphasize an acute fit of rage (“warm aggression”); hate (“cold aggression”) or cruelty (absence of empathy aggression). However, one single explanation rarely if ever explains extreme violence. More often a deadly mix of personality traits, mental disorders, experiences of being offended, neglected or traumatized, inferior feelings and contemporary social influences (e.g. not only politics or religion, but also influence of movies or PC games) may lead to extreme violence. Acquired brain dysfunction or developmental disorders may also play a crucial role in some instances. The different etiologies require knowledge of both psychology, the whole spectrum of psychiatric disorders and neurological injury and disease. Only plain forward assessments of personality (e.g. MMPI, NEO-PI), personality disorders (e.g. SCID-II) or the most frequent mental disorders (e.g. MINI, SCID) will not cover all possibilities. Skilled psychiatrists with additional training in psychology and neuropsychiatry have unique potentials to provide crucial information that may help to understand extreme violence. This presentation will be illustrated with case-stories elucidating how the mix of some of the factors mentioned above have lead to extreme acts of violence.

Thu, 28 Nov 2013 | 13.30 – 14.45 h | Hall 2



**E** **Q** **E** **D** **Mental health of European youth and scientific evidence for the suicide treatment and prevention**

*Chairs:* Peter Falkai, Munich (Germany)  
Wolfgang Gaebel, Düsseldorf (Germany)

*Speaker:* Danuta Wasserman, Stockholm (Sweden)

There is a critical need for scientific-based approaches in the treatment and prevention of suicide and suicidal behaviours, particularly, among youth. In the EU funded European multi-centre study called Saving and Empowering Young Lives in Europe (SEYLE), possible suicide preventive interventions in schools were studied. The programme comprised of three active interventions directed towards gatekeepers (teachers and school staff) and referred to as QPR (Question, Persuade & Refer), awareness training on mental health promotion for adolescents (Awareness) and screening for at-risk behaviours and mental health problems in adolescents by health professionals (ProfScreen). 12,395 pupils recruited from randomized schools in 11 European countries: Austria, Estonia, France, Germany, Hungary, Ireland, Israel, Italy, Romania, Slovenia and Spain, with Sweden serving as the coordinating centre, were enrolled into three intervention arms and one control arm.

Data analyses concerning risk behaviours and mental health problems identified three distinct groups of adolescents. Fifty eight percent of pupils showed low or very low frequency of risk-behaviours; the second group comprised 13% of pupils with very high frequency of all risk-behaviours, such as excessive alcohol use, illegal drug use, heavy smoking, poor diet, etc. In the third group, 29% of pupils who showed risk-behaviours, such as high media use, sedentary behaviour and reduced hours of sleep were identified. The behaviours in the latter group, which we called the invisible risk group, are often overlooked by external observers, due to the perception that these behaviours are not dangerous. Alarming results showed that pupils in the invisible group, in comparison with the high risk group, had similar prevalence of suicidal thoughts (42.2% vs. 44%), anxiety (8% vs. 9.2%), sub-threshold depression (33.2% vs. 34%) and depression (13.4% vs. 14.7%). Prevalence of suicide attempts was 5.9% in the invisible group, 10.1% in the high risk group and 1.7% in the low risk group. Prevalence of all risk-behaviours increased with age and was significantly more frequent among boys. Girls were significantly more frequently affected by psychiatric symptoms. Professional screening identified approximately 12% of pupils as having severe mental health problems that required mental healthcare. The above-mentioned results underscore the need for both treatment and prevention activities.

## LECTURES

The European Psychiatric Association (EPA) guidance on suicide treatment and prevention article summarizes existing evidence, which supports the efficacy of pharmacological treatment and cognitive behavioural therapy (CBT) in preventing suicidal behaviour. Some other psychological treatments are promising, but the supporting evidence is currently insufficient. Antidepressant treatment decreases the risk for suicidality among depressed patients; however, treatment with antidepressants of children and adolescents should be given under supervision of a specialist. Long-term treatment with lithium has been shown to be effective in preventing both suicide and attempted suicide in persons with unipolar and bipolar depression.

Multidisciplinary treatment teams including psychiatrists and other professionals such as psychologists, social workers, and occupational therapists are always preferable, as integration of pharmacological, psychological and social rehabilitation is recommended, especially for patients with chronic suicidality. Moreover, the suicidal person, independent of age, should always be motivated to involve family in the treatment. Psychosocial treatment and support is recommended, as the majority of suicidal patients have problems with relationships, work, school and lack functioning social networks.

The preliminary results of the SEYLE study also showed the effectiveness of two educational activities, namely, the QPR intervention, directed towards school gatekeepers and the Awareness intervention, directed towards pupils. Both interventions significantly prevented attempted suicide among ordinary school pupils.

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Wed, 28 Nov 2013 | 17.15 – 18.15 h | Hall 2



**E** **Q&A** **E→D** **Future of psychiatric services in the 21st century**

*Chairs:* Wolfgang Maier, Bonn (Germany)  
Meryam Schouler-Ocak, Berlin (Germany)

*Speaker:* Dinesh Bhugra, London (United Kingdom)

Psychiatry is medical speciality with broader imperatives of biological, psychological and social factors and is strongly influenced by how society sees deviance. Psychiatrists are generally expected to carry out risk assessments and risk management of their patients to keep the society safe. Social, economic and political changes in the society strongly influence resources, potential scientific advances and delivery of mental health care services. In addition social and economic changes in the 21st century related to globalisation, migration, urbanisation and industrialisation bring about a number of demographic changes with perhaps an increase in rates of certain psychiatric disorders and increasing burden. Other developments in the 21st century which will influence clinical practice as well as help seeking include psychopharmacogenomics and newer treatments such as web based psychotherapies i.e. treatments without therapists and social media. Stigma towards mental illness, mentally ill and mental health professionals and discrimination against mentally ill continues though there are some early signs of shift towards slightly positive attitudes. Shortage of trained professionals and increasing demand will challenge the ways in which services are planned and delivered. Younger generations learn in different ways and will also have different attitudes to work-life balance thereby affecting health care planning and delivery. The patients are more aware of their conditions and treatments relative thus bringing about changes in the doctor-patient relationship. Services in community and public mental health agenda and quality improvement add other dimensions which need to be addressed.

Fr, 29 Nov 2013 | 09.00 – 10.00 h | Hall 2



**E Q E→D** **Mental disorders and their care through history in Egypt**

*Chairs:* Iris Hauth, Berlin (Germany)  
Peter Falkai, Munich (Germany)

*Speaker:* Tarek A. Okasha, Cairo (Egypt)

In Ancient Pharaonic Egypt, 5000 years ago, mental disorders were cared for, treated and never stigmatized. The origin of the word Egypt will be discussed as in Arabic it is called „MISR“ and in the Old Testament it is „Mitstrain“.

The salient points about Ancient Egyptian Gods and Goddesses related to medicine and psychiatry will be clarified as well as some Pharaonic habits at that time. There is no known physician's title in the Pharaonic times suggesting specialization in mental disorders. However, the heart and mind meant the same thing, so all mental disorders were described in the book of the heart "Eber's papyrus", and hysteria was described in "Kahoun's papyrus" dealing with the uterus long before Hippocrates.

There was no difference between Soma and Psyche as mental disorders were treated as physical ones, so there was no stigma because of mental illness. Treatment mainly took the forms of purification, baths, sleep using herbs and dream interpretation according to the mystical beliefs at that time. The presentation will allude to the book of dreams and negative confessions regarding the typology of sins during that time. This will be followed by mental illnesses in the Islamic era (591 A.D.) reviewing the approach and concept of mental illness in Islam. The psyche (ELNAFS) was mentioned 185 times in the Koran. The first mental hospital was built in Baghdad 705 A.D. then in Cairo 800 A.D. Following the Arab and Islamic influence in Spain, the first mental hospitals in Europe was in Seville 1409, Saragossa and Valencia 1410, Barcelona 1412 then Toledo 1483. The 14th century Kalawoun hospital in Cairo had 4 medical branches; medicine, ophthalmology, surgery and mental disorders, 600 years before Europe had any psychiatric departments in a general hospitals. The influence of Arab clinicians such as Rhazes, Avicenna and their textbooks translated to Latin were taught in Europe until the 17th century.

The Pharaonic medicine influenced the Greek medicine and the Arab medicine influenced the European medicine. This presentation will try and take you on a journey of mental health and care over the past 5000 years.

Wed, 27 Nov 2013 | 08.30 – 10.00 h | Hall 2

**E** **Q&E→D** Breakthroughs in psychiatry: depression – overcoming roadblocks in the development of truly novel antidepressant strategies by research

Chairs: *Thomas E. Schläpfer, Bonn (Germany)*  
*Rainer Rupprecht, Regensburg (Germany)*

**An update on recent efforts in novel treatment development**  
*Alan F. Schatzberg, Stanford (USA)*

**Neurotarget structures that emerge from genetic and genomic research**  
*Florian Holsboer, Munich (Germany)*

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Wed, 27 Nov 2013 | 12.15 – 13.45 h | Hall 2

**E** **Q&E→D** Presidential Debate: new psychiatric classifications - who is served, who is disserved?

Chairs: *Wolfgang Maier, Bonn (Germany)*  
*Andreas Heinz, Berlin (Germany)*

**Better safe than sorry**  
*Allen J. Frances, Coronado (USA)*

**The DSM-5 debates: much to do about nothing**  
*Alan F. Schatzberg, Stanford (USA)*

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Fr, 29 Nov 2013 | 13.30 – 15.00 h | Hall 3

**E** **Q&E→D** Presidential Debate: arising questions on antidepressant therapy

Chairs: *Thomas E. Schläpfer, Bonn (Germany)*  
*Eckart Rüther, Feldafing (Germany)*

**Antidepressants: are the benefits worth the risks?**  
*Irving Kirsch, Hull (United Kingdom)*

**Pharmacological treatment of depression: a remarkable success story**  
*Elias Eriksson, Gothenburg (Sweden)*

**Antidepressants: clinical Problems and Research Realities**  
*David Healy, Cardiff (United Kingdom)*

**The important role of antidepressants in the treatment of depression: research problems**  
*Hans-Jürgen Möller, Munich (Germany)*

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## PSYCHIATRY IN NATIONAL SOCIALISM – RETROSPECTION AND RESPONSIBILITY

*Under the auspices of the German Federal President, Joachim Gauck, the German Association for Psychiatry, Psychotherapy and Psychosomatics (DGPPN), in conjunction with the Foundation Memorial to the Murdered Jews of Europe and the Topography of Terror Foundation, is developing a travelling exhibition that will focus on those victims who for a long time played only a marginal role in the public interest and memory.*

### Opening of the travelling exhibition

27th January 2014

Opening in the Paul-Löbe-Haus of  
the German Bundestag

25th March 2014

Opening in the Topography of  
Terror Foundation

### Contact

Contact person at the DGPPN:  
Prof. Dr. Dr. Frank Schneider, Aachen  
(Germany), fschneider@ukaachen.de

Curator of the exhibition:  
Petra Lutz, Berlin (Germany)

Scientific assistant:  
Sophie Plagemann, Berlin (Germany)  
s.plagemann@dgppn.de

[WWW.DGPPN.DE/AUSSTELLUNG](http://WWW.DGPPN.DE/AUSSTELLUNG)

### Travelling exhibition

**Registered, Persecuted, Annihilated:  
The Sick and the Disabled under  
National Socialism**

Between 1933 and 1945, more than 360,000 people were forcibly sterilised and more than 200,000 were murdered. The guiding principle for the selection of patients was the person's alleged "value". Doctors, nursing staff and functionaries judged the people committed to their care on the basis of their "curability", "learning ability" or "capacity to work". The exclusion, persecution and extermination of peculiar, disturbing and ill people thereby took place within the institutional and hospital system.

The exhibition is specifically aimed at a wide audience. It uses the question of the value of life as a guiding principle and deals with the intellectual and institutional prerequisites for the murders, summarises the events of exclusion and forced sterilisations up to mass extermination, deals exemplarily with victims, perpetrators, involved persons and opponents, and finally inquires about the analysis of those events from 1945 until today. Exemplary biographies run throughout the entire exhibition. The many different actors involved in the crimes become tangible in the victims' files



# Registered Persecuted Annihilated

The Sick and the Disabled under  
National Socialism



and their views of patients are contrasted with the patients' own statements.

The final section comprises numerous voices that look back on that period from modern times and ask themselves from different perspectives about the personal relevance of what happened: doctors, politicians, representatives of self-help associations, relatives of victims, nursing staff, health administration representatives and others.

## Opening of the travelling exhibition

The travelling exhibition will open in the Paul-Löbe-Haus of the German Bundestag on 27th January 2014, the day of remembrance of the victims of National Socialism.

On 25th March 2014, the exhibition will open in the Topography of Terror Foundation. It will subsequently be shown at additional venues in Germany and Europe.

## Exhibition advisory board

The interdisciplinary exhibition advisory board consists of 44 representatives of

patient and relatives organisations, relatives of victims, historians, representatives of medical societies and museum directors, politically involved people and, of course, psychiatrists.

## Support through donations

The exhibition is being made possible by a fund-raising campaign being conducted by numerous medical associations, in particular the German Medical Association. The DGPPN is adding a significant sum to the amount raised by the campaign. Further information about the donations appeal can be found at:

[WWW.DGPPN.DE](http://WWW.DGPPN.DE) > SPENDENAUFTRUF

### Donations account: DGPPN

IBAN DE 82 3703 0200 0000 0052 52

BIC SOPPDE33XXX

Keyword: Donations appeal

*\*) The German Association for Psychiatry, Psychotherapy and Psychosomatics (DGPPN) is recognised as a non-profit organisation because of its promotion of scientific objectives and has been certified as such by the Tax Office for Corporations I in Berlin, most recently on 3rd February 2011 (Tax no. 27/ 640/ 57343). Once your donation has been received, you will be sent a donation receipt.*

## Poster Exhibition

Please visit the Poster Exhibition in Hall 15.1. There will be poster tours from 13.30–15.00 h on Thursday, 28 November, and Friday, 29 November, that will be guided by a chair person.

### Opening hours:

Wednesday > 27 Nov 2013 > 09.00–18.00 h  
Thursday > 28 Nov 2013 > 09.00–18.00 h  
Friday > 29 Nov 2013 > 09.00–18.00 h  
Saturday > 30 Nov 2013 > 09.00–12.00 h

For the first time, there will be terminals in Hall 15.1. where attendees can view **ePosters**.

# SCIENTIFIC PROGRAMME

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## SCIENTIFIC PROGRAMME

› Wednesday, 27 Nov 2013

**B-001** **Special Session**

08.30–10.00 h | Hall 2



TOPIC 4: Affective disorders, F3

**Breakthroughs in psychiatry: depression – overcoming roadblocks in the development of truly novel antidepressant strategies by research**

*Chairs: Thomas E. Schläpfer, Bonn*

*(Germany)*

*Rainer Rupprecht, Regensburg*

*(Germany)*

**001 An update on recent efforts in novel treatment development**

*Alan F. Schatzberg, Stanford (USA)*

**002 Neurotarget structures that emerge from genetic and genomic research**

*Florian Holsboer, Munich (Germany)*

**S-013** **Symposium**

08.30–10.00 h | Room 44

TOPIC 20: Prevention

**Mental health promotion and suicide prevention targeting adolescents: results of the SEYLE multi-center research project**

*Chairs: Vladimir Carli, Stockholm (Sweden)*

*Danuta Wasserman, Stockholm*

*(Sweden)*

**001 The SEYLE project: objectives and methodology**

*Danuta Wasserman, Stockholm (Sweden)*

**002 Risk behaviours and psychiatric symptoms among adolescents: what can we do about it?**

*Vladimir Carli, Stockholm (Sweden)*

**003 Life-time prevalence and psychosocial correlates of adolescent non-suicidal self-injury: a comparative study of findings in 11 European countries**

*Romuald Brunner, Heidelberg (Germany)*

**004 Adolescent Subthreshold Depression and Anxiety: psychopathology, Functional Impairment and Increased Suicide Risk**

*Judit Balazs, Budapest (Ungarn)*

**B-003** **Special Session**

10.15–12.00 h | Hall 2



**Congress Opening**

*Chair: Wolfgang Maier, Bonn (Germany)*

**001 Mental disorders 2013 – growing importance, new prioritisation**

*Wolfgang Maier, Bonn (Germany)*

**002 Award Ceremony:**

**Wilhelm-Griesinger-Medaille**

*Wolfgang Maier, Bonn (Germany)*

**003 Thinking about feelings**

*António Damásio, Los Angeles (USA)*

**004 The Prinzhorn Collection – past and present of art by people with psychiatric experience**

*Thomas Röske, Heidelberg (Germany)*

**B-004** **Special Session**

12.15–13.45 h | Hall 2



TOPIC 24: Diagnostics and classification

**Presidential Debate: new psychiatric classifications – who is served, who is diserved?**

*Chairs: Wolfgang Maier, Bonn (Germany)*

*Andreas Heinz, Berlin (Germany)*

**001 Better safe than sorry**

*Allen J. Frances, Coronado (USA)*

**002 The DSM-5 debates: much to do about nothing**

*Alan F. Schatzberg, Stanford (USA)*

**PL-001 Plenary Session**
**12.15–13.15 h | Hall 3**


TOPIC 19: Health services research and health care policy

**Health as an educational problem? The century of the patient**

*Chairs: Frank Schneider, Aachen (Germany)  
Andreas Meyer-Lindenberg,  
Mannheim (Germany)*

**001** Award ceremony: DGPPN Research Advancement Award on Medical Care and Epidemiology of mental illnesses  
*Frank Schneider, Aachen (Germany)*

**002** Health as an educational problem? The century of the patient  
*Gerd Gigerenzer, Berlin (Germany)*

**S-025 Symposium**
**13.30–15.00 h | Hall 4**

TOPIC 12: Brain imaging, neurophysiology, neuropsychology

**Psychosocial and genetic determinants of brain structure and activation**

*Chairs: Hans-Jürgen Grabe, Greifswald (Germany)  
Andreas Meyer-Lindenberg,  
Mannheim (Germany)*

**001** Gene-Gene interaction effects on the brain for risk variants for affective disorders  
*Susanne Erk, Berlin (Germany)*

**002** Structural correlates of childhood abuse and neglect in adults  
*Hans-Jürgen Grabe, Greifswald (Germany)  
Katharina Wittfeld, Henry Völzke, Katrin Hegenscheid, Harald J. Freyberger*

**003** Epigenetic and environmental mechanisms of risk for psychiatric disorders  
*Andreas Meyer-Lindenberg, Mannheim (Germany)*

**004** Brain physiological changes indicate risk for psychosis  
*Tilo Kircher, Marburg (Germany)*

**S-028 Symposium**
**13.30–15.00 h | Room 44**

TOPIC 19: Health services research and health care policy

**Actual trends in the field of psychiatric rehabilitation**

*Chairs: Uwe Koch, Hamburg (Germany)  
Reinhard Michael Krausz, Vancouver (Canada)*

**001** International trends in rehabilitation with a special focus on ICF  
*Christoph Gutenbrunner, Hannover (Germany)*

**002** New developments in Psychiatric Rehabilitation in Italy  
*Luigi Grassi, Ferrara (Italy)*

**003** Rehabilitative concepts for patients with addiction disorders in Canada  
*Reinhard Michael Krausz, Vancouver (Canada)*

**004** New concepts for further developments in the field of Psychiatric Rehabilitation given ongoing reductions in hospital length of stay  
*Holger Schulz, Hamburg (Germany)*

**PR-001 President's Symposium**
**15.30–17.00 h | Hall 3**


TOPIC 22: Philosophy, history and ethics  
**Jaspers' General Psychopathology – international perspectives**

*Chairs: Wolfgang Maier, Bonn (Germany)  
Martin Heinze, Rüdersdorf (Germany)*

**001** Karl Jaspers – on the road to psychopathology and beyond  
*Heinz Häfner, Mannheim (Germany)*

**002** Teaching American psychiatrists about Karl Jaspers  
*Paul R. McHugh, Baltimore (USA)*

**003** Jaspers' perspectivism: its contemporary relevance  
*Osborne P. Wiggins, Louisville (USA)*

**HS-007 Main Symposium****15:30–17:00 h | Hall Prag**

TOPIC 16: Other psychiatric therapies

**Brain stimulation techniques and the human reward system**

› Section: Experimental Stimulation  
Techniques in Psychiatry

*Chairs: Thomas E. Schläpfer, Bonn (Germany)  
Michael Grözinger, Aachen (Germany)*

**001 Neurobiology of reward in health and disease – putative therapeutical implications for Major Depression and addiction**

*Jens Kuhn, Cologne (Germany)*

**002 Antiparkinsonian effects of electroconvulsive therapy – data from MPTP-lesioned primate models**

*Anne Landau, Aarhus (Denmark)  
Campbell Clark, Salma Jivan, Doris Doudet*

**003 Translational aspects of brain stimulation to the reward system**

*Alexander Sartorius, Mannheim (Germany)  
Natalia Cass, Barbara Vollmayr, Wolfgang Weber-Fahr*

**004 Genetics of the dopamine system – implications for brain stimulation as related to TMS and ECT**

*Peter Zwanzger, Münster (Germany)*

**S-042 Symposium****15:30–17:00 h | Room 44**

TOPIC 18: Social psychiatry

**Clinical work with lesbian, gay, bisexual and transgender (LGBT) populations in Canada and the United States**

*Chairs: Christopher McIntosh, Toronto (Canada)  
Gene Nakajima, San Francisco (USA)*

**001 An LGBT Seniors Housing Program in Los Angeles, California**

*Nick Gutierrez, West Hollywood (USA)*

**002 Group psychotherapy interventions for LGBTQ People at the McGill University Sexual Identity Centre**

*Richard Montoro, Montreal (Canada)*

**003 U.S. psychiatric guidelines for working with Lesbian, Gay, Bisexual, and Transgender (LGBT) Youth**

*Richard Pleak, Glen Oaks (USA)*

**004 Assessment of transgender people seeking sex reassignment surgery: the role of the psychiatrist**

*Christopher McIntosh, Toronto (Canada)*

**ST-003 State-of-the-Art-Symposium****15:30–17:00 h | Hall 7**

TOPIC 4: Affective disorders, F3

**Treatment of major depression**

*Chairs: Erich Seifritz, Zürich (Switzerland)  
Mathias Berger, Freiburg im Breisgau (Germany)*

**001 Psychological approaches**

*Mathias Berger, Freiburg im Breisgau (Germany)*

**002 Somatic approaches**

*Erich Seifritz, Zürich (Switzerland)*

**L-003 Lecture****15:45–16:45 h | Hall 2**

TOPIC 24: Diagnostics and classification

**The uses and misuses of psychiatric diagnosis**

*Chairs: Wolfgang Gaebel, Düsseldorf (Germany)  
Fritz Hohagen, Lübeck (Germany)*

*Speaker: Allen J. Frances, Coronado (USA)*

**L-004 Lecture****17:15–18:45 h | Hall 2**

TOPIC 20: Prevention

**Prevention of eating disorders**

*Chairs: Martin Bohus, Mannheim (Germany)  
Manfred Fichter, Prien a. Chiemsee (Germany)*

*Speaker: Martina de Zwaan, Hannover (Germany)*

**002 Award Ceremony: Hans-Jörg Weitbrecht Wissenschaftspreis 2013**

*Wolfgang Maier, Bonn (Germany)*

**003** Presentation by the award recipient: the role of neuronal hyperactivity in the pathophysiology of Alzheimer's disease  
*Marc Aurel Busche, Munich (Germany)*

**004** Presentation by the award recipient: neuroinflammatory processes in the pathophysiology of schizophrenic and depressive disorders  
*Johann Steiner, Magdeburg (Germany)*

L-005

Lecture

**17.15 – 18.45 h | Hall Madrid**  
**24th Anna-Monika Award Ceremony and lecture of the Award Winner**

*Chairs: Florian Holsboer, Munich (Germany)*  
*Rainer Rupprecht, Regensburg (Germany)*

**001** Laudation to Alan F. Schatzberg  
*Florian Holsboer, Munich (Germany)*

**002** Award Ceremony  
*Michael Bommers, Düsseldorf (Germany)*

**003** The role of the Hypothalamic-Pituitary-Adrena (HPA) axis in the pathogenesis and treatment of delusional Major Depression  
*Alan F. Schatzberg, Stanford (USA)*

HS-008

Main Symposium

**17.15 – 18.45 h | Hall 3**



TOPIC 17: Forensic psychiatry

**Amok acts and perpetrators of terrorism**  
*Chairs: Henning Saß, Aachen (Germany)*  
*Norbert Nedopil, Munich (Germany)*

**001** A criminological perspective on young people and adults who run amok  
*Britta Bannenberg, Gießen (Germany)*

**002** On the stability of the 'amok runner' syndrome  
*Lothar Adler, Mühlhausen (Germany)*

**003** On the phenomenology of Islamist criminals  
*Norbert Leygraf, Essen (Germany)*

**004** Wounded vanities – lone wolf terrorists  
*Norbert Nedopil, Munich (Germany)*

HS-009

Main Symposium

**17.15 – 18.45 h | Hall Istanbul**

TOPIC 22: Philosophy, history and ethics

**Coercive Treatment – European perspectives**

*Chairs: Tilman Steinert, Ravensburg (Germany)*

*Wolfgang Maier, Bonn (Germany)*

**001** Coercive treatment and the Italian Psychiatric reform of 1978  
*Roger Pycha, Bruneck (Italy)*

**002** Coercation treatment in Austria  
*Christian Haring, Hall in Tirol (Austria)*

**003** Control and restraint in Great Britain  
*Peter Lepping, Wrexham (United Kingdom)*  
*Rajvinder Singh Sambhi*

**004** Development of coercive measures in the Netherlands: a five year Follow up of naturalistic data

*Eric Noorthoorn, Maastricht (The Netherlands)*

S-049

Symposium

**17.15 – 18.45 h | Hall Stockholm 1**

TOPIC 12: Brain imaging, neurophysiology, neuropsychology

**Single symptom approaches in schizophrenia: neuronal correlates of auditory hallucinations and language related symptoms**

*Chairs: Jürgen Gallinat, Berlin (Germany)*  
*Werner-Konrad Strik, Bern (Switzerland)*

**001** Auditory hallucinations and the language system  
*Werner-Konrad Strik, Bern (Switzerland)*

**002** Hearing voices as a phenomenon of dysconnectivity?  
*Christoph Mulert, Hamburg (Germany)*

**003** Non-invasive brain stimulation for the treatment of schizophrenia: neurobiological and clinical aspects  
*Alkomiet Hasan, Munich (Germany)*

**004** Auditory hallucinations and ego-disturbances: imaging of dysfunctional brain networks  
*Jürgen Gallinat, Berlin (Germany)*

S-054

Symposium

17.15–18.45 h | Salon 11/12

TOPIC 20: Prevention

**The influence of sociocultural contextual factors on lesbian, gay, bisexual and transgender's (LGBT) mental health**

*Chairs: Götz Mundle, Berlin (Germany)*

*Gabriele Dennert, Berlin (Germany)*

001 **Suicide and overall mortality in Danish gay men and lesbians in same sex marriage**

*Morten Frisch, Copenhagen (Denmark)*

002 **Results of a worldwide research on mental and physical health of transient people**

*Carsten Balzer, Berlin (Germany)*

003 **LGBT mental health in Russia – effects of sociocultural changes**

*Maria Sabunaeva, St. Petersburg (Russia)*

004 **How to meet the needs of LGBT patients**

*Dinesh Bhugra, London (United Kingdom)*

ST-006

State-of-the-Art-Symposium

17.15–18.45 h | Hall 10

TOPIC 7: Personality disorders, F6

**Borderline personality disorder**

*Chairs: Sabine C. Herpertz, Heidelberg*

*(Germany)*

*Christian Schmahl, Mannheim*

*(Germany)*

001 **Social cognition and affect regulation – understanding patients with borderline personality disorder**

*Sabine C. Herpertz, Heidelberg (Germany)*

002 **Pain, non-suicidal self-injury, and dissociation**

*Christian Schmahl, Mannheim (Germany)*



› Thursday, 28 Nov 2013

### ST-010 State-of-the-Art-Symposium

08.30–10.00 h | Hall 10

TOPIC 3: Psychotic disorders, F2

#### Psychotic disorders

*Chairs: Peter Falkai, Munich (Germany)  
Christoph U. Correll, Frankfurt am  
Main (Germany)*

**001 Acute and maintenance management of Schizophrenia: from the prodrome to treatment resistance**  
*Christoph U. Correll, Frankfurt am Main (Germany)*

**002 Non-somatic interventions in psychotic disorders – beyond psychoeducation**  
*Peter Falkai, Munich (Germany)*

### FP-008 Oral Presentations

08.30–10.00 h | Salon 13/14

TOPIC 14: Pharmacotherapy

#### Psychotherapy and pharmacotherapy

*Chairs: Hubertus Himmerich, Leipzig (Germany)  
Michael Kluge, Leipzig (Germany)*

**001 Selected personality traits as predictors of psychotherapy outcomes**  
*Katarzyna Cyranka, Krakow (Poland)  
Bogna Smiatek-Mazgaj, Michal Mielimaka,  
Krzysztof Rutkowski, Jerzy Sobanski,  
Katarzyna Klasa, Lukasz Müldner-  
Nieckowski, Edyta Dembinska*

**002 Patient's perception of the relation with therapist and of therapist's behaviour and outcome of intensive psychotherapy in a day hospital for neurotic disorders**  
*Edyta Dembinska, Krakow (Poland)  
Jerzy Sobanski, Krzysztof Rutkowski,  
Katarzyna Klasa, Lukasz Müldner-  
Nieckowski, Michal Mielimaka, Katarzyna  
Cyranka, Bogna Smiatek-Mazgaj*

**003 The effectiveness of group psychotherapy in a day hospital setting**  
*Michal Mielimaka, Krakow (Poland)  
Jerzy Sobanski, Lukasz Müldner-Nieckowski,  
Katarzyna Cyranka, Krzysztof Rutkowski*

**004 Therapeutic Drug Monitoring (TDM) in maternal serum, amniotic fluid and umbilical cord blood during pregnancy and delivery**

*Michael Paulzen, Aachen (Germany)  
Tanja Veselinovic, Nele Frergsen, Tamme  
Goecke, Christoph Hiemke, Gerhard Gründer*

**005 Concentrations of different antidepressants in plasma and cerebrospinal fluid under naturalistic conditions**  
*Michael Paulzen, Aachen (Germany)  
Tanja Veselinovic, Simone Tauber, Sarah  
Groppe, Christoph Hiemke, Gerhard Gründer*

**006 Liaison Psychiatry in Poland – can we achieve the successful holistic diagnosis? – Survey**  
*Anna Sobieraj, Katowice (Poland)  
Joanna Bracik, Kamila Paluch*

### L-006 Lecture

09.00–10.00 h | Hall 2

TOPIC 17: Forensic psychiatry

#### What can psychiatry contribute to the understanding of extreme violence?

*Chairs: Thomas E. Schläpfer, Bonn (Germany)  
Bernhard Bogerts, Magdeburg (Germany)*

*Speaker: Ulrik Fredrik Malt, Oslo (Norwegen)*

### PR-002 President's Symposium

10.15–11.45 h | Hall 2

TOPIC 29: Other topics

#### Positive meanings of psychiatry

*Chairs: Norman Sartorius, Geneva (Switzerland)  
Wolfgang Maier, Bonn (Germany)*

**001 Evidence-based primary prevention of mental disorders**  
*Clemens M. H. Hosman, Nijmegen (The Netherlands)*

**002 Suicide prevention in Europe**  
*Ulrich Hegerl, Leipzig (Germany)*

**003 Paradigms lost: lessons learned in the fight against stigma**  
*Heather Stuart, Kingston (Canada)*

**004 Recovery – together we are stronger**  
*Michaela Amering, Vienna (Austria)*

**S-082**

**Symposium**

**10.15–11.45 h | Salon 13/14**

**TOPIC 17: Forensic psychiatry**

**International perspectives on prison psychiatry**

› In cooperation with the WPA – World Psychiatric Association  
 Scientific Section Forensic Psychiatry

*Chairs: Norbert Konrad, Berlin (Germany)  
 Nicoleta Tataru, Bucharest (Romania)*

**001 Prison psychiatry in Germany – recent developments**

*Norbert Konrad, Berlin (Germany)*

**002 Mental health problems in Chilean prison populations as compared to the general population**

*Adrian Mundt, Santiago (Chile)*

*Ruben Alvarado, Rosemarie Fritsch, Stefan Priebe*

**003 Spanish prison psychiatry**

*Vicente Tort Herrando, Barcelona (Spain)*

**004 Forensic psychiatry in Romania and other Balkan countries**

*Nicoleta Tataru, Bucharest (Romania)*

**ST-015**

**State-of-the-Art-Symposium**

**10.15–11.45 h | Hall Riga**

**TOPIC 4: Affective disorders, F3**

**Bipolar Disorder**

*Chairs: Thomas E. Schläpfer, Bonn (Germany)*

*Michael Bauer, Dresden (Germany)*

**001 Neurobiology of bipolar disorder – what is relevant for clinical practice?**

*Thomas E. Schläpfer, Bonn (Germany)*

**002 Therapy of bipolar disorder**

*Michael Bauer, Dresden (Germany)*

**PL-002**

**Plenary Session**

**12.00–13.00 h | Hall 2**



**TOPIC 13: Neurobiology, neurogenetics, epidemiology**

**Parental regulation of the structure and function of the genome in the offspring: implications for familial transmission and treatment programs**

*Chairs: Peter Falkai, Munich (Germany)  
 Andreas Meyer-Lindenberg,  
 Mannheim (Germany)*

**001 Award ceremony: DGPPN Award for Neurobiological Research in Psychiatry**  
*Peter Falkai, Munich (Germany)*

**002 Parental regulation of the structure and function of the genome in the offspring: implications for familial transmission and treatment programs**  
*Michael Meaney, Montreal (Canada)*

**L-007**

**Lecture**

**13.30–14.45 h | Hall 2**



**TOPIC 23: Suicidality**

**Mental health of European youth and scientific evidence for the suicide treatment and prevention**

*Chairs: Peter Falkai, Munich (Germany)  
 Wolfgang Gaebel, Düsseldorf (Germany)*

*Speaker: Danuta Wasserman, Stockholm (Sweden)*

**S-090 Symposium****13.30–15.00 h | Hall Stockholm 1****TOPIC 21:** Young psychiatrists and academic training**N Challenges and perspectives for psychiatrists within and outside Europe***Chairs: Norman Sartorius, Geneva**(Switzerland)**Franziska Bässler, Düsseldorf**(Germany)***001 Challenges for psychiatry in the early 21st century***Norman Sartorius, Geneva (Switzerland)***002 Psychiatry from the international perspective: unity and diversity***Cyril Höschl, Prague (Czech Republic)***003 Careers in psychiatry in Australia***Helen Herrman, Parkville (Australia)***004 What we can learn from psychiatry for the brain and its mind?***Georg Northoff, Ontario (Canada)***S-091 Symposium****13.30–15.00 h | Room 43****TOPIC 1:** Organic mental disorders, dementia, Fo**Imaging Alzheimer's disease: from details towards a bigger picture***Chairs: Marc Aurel Busche, Munich**(Germany)**Hans Förstl, Munich (Germany)***001 Imaging neurons***Marc Aurel Busche, Munich (Germany)***002 Imaging connectivity***Christian Sorg, Munich (Germany)***003 Molecular imaging***Timo Grimmer, Munich (Germany)***004 Imaging neuroinflammation***Michael T. Heneka, Bonn (Germany)***S-092 Symposium****13.30–15.00 h | Room 44****TOPIC 5:** Neurotic, stress-related and somatoform disorders, F4**Trauma-related psychopathology – new aspects***Chairs: Petra Ludäscher, Mannheim**(Germany)**Katja Wingefeld, Berlin (Germany)***001 The impact of childhood abuse on brain regions relevant to cognition and emotion***Bernet Elzinga, Leiden (The Netherlands)**Anne-Laura van Harmelen***002 Fragmented sleep, fragmented mind: the relation between dissociative symptoms and sleep***Dalena van der Kloet, Maastricht (The Netherlands)***003 Effects of cortisol on memory retrieval in patients with PTSD***Katja Wingefeld, Berlin (Germany)***004 Is hydrocortisone an effective pharmacological treatment of intrusive memories in PTSD? A randomized, placebo-controlled, cross-over study***Petra Ludäscher, Mannheim (Germany)***P-13 Poster Presentations****13.30–15.00 h | Hall 15.1****TOPIC 4:** Affective disorders, F3**Depressive disorders II***Chairs: Frank Padberg, Munich (Germany)***001 Oxytocin response to social exclusion in chronically depressed patients***Lena Sabaß, Munich (Germany)**Christine Bauriedl-Schmidt, Maria-Christine**Mauer, Anja Palagyi, Tanja Daltrizzo,**Babette Renneberg, Anna Buchheim, Peter**Falkai, Peter Zill, Frank Padberg, Andrea**Jobst***002 Investigation of habenula in major depressive disorder with 7T high resolution MRI***Frank Schmidt, Leipzig (Germany)**Melanie Adamidis, Stephanie Schindler,**Anja Tränkner, Maria Strauß, Ulrich Hegerl,**Stefan Geyer, Peter Schönknecht*

**003 The prevalence of depression among medical students from different parts of the world**

*Mariusz Seweryn, Sosnowiec (Poland)  
Joanna Marzec, Aleksandra Kolarczyk,  
Magdalena Bonk, Yushan Lee, Krzysztof  
Krysta, Irena Krupka-Matuszczyk*

**004 Case report of co-existing bipolar disorder and cognitive impairment**

*Anna Sobieraj, Katowice (Poland)  
Leontyna Wylezek, Krzysztof Krysta*

**005 Facilitation effects of VNS on the motor threshold: implications for the antidepressive mode of action?**

*Wolfgang Sperling, Erlangen (Germany)  
Johannes Kornhuber, Helge H. Müller*

**006 Extreme low birth weight in MZ twins discordant for birth weight is associated with shorter telomere length and lower IQ, but not mental well-being in later life**

*Jana Strohmaier, Mannheim (Germany)  
Narelle Hansell, Margaret Wright, Liz  
Rietschel, Dale R. Nyholt, Marcella Rietschel,  
Nicholas G. Martin*

**007 Actigraphic measurements in depressed patients before and after electroconvulsive therapy**

*Dietmar Winkler, Vienna (Austria)  
Edda Pjrek, Rupert Lanzenberger, Pia  
Baldinger, Daniel Eitel, Siegfried Kasper,  
Richard Frey*

**008 Epidemiology of fall-winter depression in Austria**

*Edda Winkler-Pjrek, Vienna (Austria)  
Konstantinos Papageorgiou, Pia Baldinger,  
Benjamin Brauer, Siegfried Kasper, Dietmar  
Winkler*

**S-100 Symposium**

**15.30–17.00 h | Hall Hong Kong**

**TOPIC 7: Personality disorders, F6**

**The future of personality disorders**

*Chairs: Sabine C. Herpertz, Heidelberg  
(Germany)  
Klaus Lieb, Mainz (Germany)*

**001 A neurobiological perspective on personality disorders**

*Sabine C. Herpertz, Heidelberg (Germany)*

**002 New ways of looking at personality disorder**

*Peter Tyrer, London (United Kingdom)*

**003 Concepts of personality disorders and forensic psychiatry**

*Henning Saß, Aachen (Germany)*

**004 An integrative perspective on psychotherapy treatments for personality disorders**

*Peter Fiedler, Heidelberg (Germany)*

**S-103 Symposium**

**15.30–17.00 h | Hall Riga**

**TOPIC 3: Psychotic disorders, F2**

**Migration and psychosis**

› Section: Intercultural Psychiatry and Psychotherapy, Migration

› In cooperation with DTGPP – Deutsch-Türkische Gesellschaft für Psychiatrie, Psychotherapie und psychosoziale Gesundheit e.V.

› In cooperation with EPA – European Psychiatric Association

*Chairs: Meryam Schouler-Ocak, Berlin  
(Germany)  
Thomas G. Schulze, Göttingen  
(Germany)*

**001 Migration, ethnicity, and psychosis: toward a socio-developmental model**

*Craig Morgan, London (United Kingdom)*

**002 Discrimination and the incidence of psychotic disorders among ethnic minorities in The Netherlands**

*Wim Veling, Maastricht (The Netherlands)*

**003 Neurobiological effects of social exclusion stress**

*Andreas Heinz, Berlin (Germany)  
Eva Friedel, Anne Beck, Meryam Schouler-  
Ocak, Ulrike Kluge*

**004 Immigrant patients with psychotic disorders: therapeutical interventions**

*Dinesh Bhugra, London (United Kingdom)*

**B-009 Special Session****17.15–18.45 h | Roof garden**  

TOPIC 19: Health services research and health care policy

**Conflicts of interest – European approaches***Chairs: Peter Falkai, Munich (Germany)**Andreas Meyer-Lindenberg,  
Mannheim (Germany)**Diskutanten: Andreas Meyer-Lindenberg,**Mannheim (Germany)**Peter Falkai, Munich**(Germany)**Oliver Kirst, Munich (Germany)***001 EPA guidance paper on Conflict of interest***Cyril Höschl, Prague (Czech Republic)***B-010 Special Session****17.15–18.45 h | Hall Sydney**  

TOPIC 19: Health services research and health care policy

**Psychiatry in Australia and nearby lands***Chairs: Norman Sartorius, Geneva**(Switzerland)**Thomas Becker, Günzburg**(Germany)***001 Mental health and substance use problems in Australian Aboriginal communities***Aleksandar Janca, Crawley (Australia)***002 Mental health system reform in the context of multiculturalism***Harry Minas, Carlton (Australia)***003 Partnerships in recovery for people with severe and persistent mental disorders***Helen Herrman, Parkville (Australia)***004 Evaluating primary-care based early intervention centres for young people with common mood or psychotic disorders***Ian Hickie, Camperdown (Australia)***L-009 Lecture****17.15–18.15 h | Hall 2**  

TOPIC 19: Health services research and health care policy

**Future of psychiatric services in the 21st century***Chairs: Wolfgang Maier, Bonn (Germany)**Meryam Schouler-Ocak, Berlin  
(Germany)**Speaker: Dinesh Bhugra, London (United**Kingdom)***HS-017 Main Symposium****17.15–18.45 h | Hall Prag**

TOPIC 3: Psychotic disorders, F2

**The way into psychosis: from unusual subjective experiences to a psychotic disorder***Chairs: Wolfgang Gaebel, Düsseldorf**(Germany)**Joachim Klosterkötter, Cologne**(Germany)***001 Unusual subjective experiences: results of a survey from Germany***Wolfgang Gaebel, Düsseldorf (Germany)***002 The early prodromal phase of schizophrenia: current diagnostic and therapeutic approaches***Joachim Klosterkötter, Cologne (Germany)***003 Phenomenological differences of hallucinatory experiences in the general population and in persons with mental disorder***Giovanni Stanghellini, Chieti (Italy)***004 First self-perceived signs and symptoms in emerging psychosis***Anita Riecher-Rössler, Basel (Switzerland)**Jacqueline Aston*

S-125

Symposium

17.15–18.45 h | Salon 11/12

**TOPIC 19:** Health services research and health care policy

**Psychiatric care for people with intellectual disabilities – an international perspective**

*Chairs: Michael Seidel, Bielefeld (Germany)  
Christian Schanze, Schwifting (Germany)*

**001 Exclusive treatment or inclusive expertise?**

*Patty van Belle-Kusse, Middelburg (The Netherlands)*

**002 Inpatient care of adults with intellectual and developmental disability and mental health: state of evidence from the UK perspective**

*Angela Hassiotis, London (United Kingdom)*

**003 The state of psychiatric services for people with intellectual disability in Israel – the good, the bad and the ugly**  
*Mike Stawski, Petach-Tikva (Israel)*

**004 Psychiatric care for people with intellectual disabilities in Germany**  
*Christian Schanze, Schwifting (Germany)*

ST-020

State-of-the-Art-Symposium

17.15–18.45 h | Hall 10

**TOPIC 2:** Mental disorders due to psychoactive substance use, F1

**Addictive disorders**

*Chairs: Gabriele Fischer, Vienna (Austria)  
Falk Kiefer, Mannheim (Germany)*

**001 Illegal Drugs**

*Gabriele Fischer, Vienna (Austria)*

**002 Neurobiology and pharmacotherapy of alcoholism**

*Falk Kiefer, Mannheim (Germany)*

**S-142 Symposium**

08.30–10.00 h | Salon 19

TOPIC 15: Pharmacotherapy

**Applying genetic testing to improve psychiatric drug treatment and reduce health-care costs**

*Chairs: Daniel J. Müller, Toronto (Canada)  
Jürgen Deckert, Würzburg (Germany)*

**001 Pharmacogenetics in psychiatry: from base-pairs to bedside**

*Daniel J. Müller, Toronto (Canada)  
James L. Kennedy, Eva Brandl, Natalie Freeman, Arun Tiwari*

**002 Meta-analysis of genome-wide studies of antidepressant response in major depressive disorder**

*Stephan Ripke, Boston (USA)*

**003 Should pharmacogenetics be incorporated in routine treatment? Economic evaluation for major depression**

*Alessandro Serretti, Bologna (Italy)  
Paolo Oliati*

**004 Improved antidepressant efficacy with a combinatorial pharma-cogenomic decision support product**

*Anthony Altar, Mason (USA)*

**ST-022 State-of-the-Art-Symposium**

08.30–10.00 h | Hall 8

TOPIC 5: Neurotic, stress-related and somatoform disorders, F4

**Anxiety disorders and OCD**

*Chairs: Borwin Bandelow, Göttingen (Germany)  
Ulrich Voderholzer, Prien a. Chiemsee (Germany)*

**001 Treatment of anxiety disorders: State of the Art**

*Borwin Bandelow, Göttingen (Germany)*

**002 Obsessive compulsive disorder: State of the Art**

*Ulrich Voderholzer, Prien a. Chiemsee (Germany)*

**L-011 Lecture**

09.00–10.00 h | Hall 2



**TOPIC 22: Philosophy, history and ethics  
Mental disorders and their care through history in Egypt**

*Chairs: Iris Hauth, Berlin (Germany)  
Peter Falkai, Munich (Germany)  
Speaker: Tarek A. Okasha, Cairo (Egypt)*

**PR-003 President's Symposium**

10.15–11.45 h | Hall 2



TOPIC 29: Other topics

**Prevention of mental disorders resulting from occupational stress**

*Chairs: Mathias Berger, Freiburg im Breisgau (Germany)  
Steffi G. Riedel-Heller, Leipzig (Germany)*

**001 Introduction to the topic**

*Steffi G. Riedel-Heller, Leipzig (Germany)*

**002 Stress report Germany 2012 – mental demands, requirements and findings**

*Andrea Lohmann-Haislah, Berlin (Germany)*

**003 Prevention of mental illness at Deutsche Bahn examined using the example of the risk of post-traumatic stress illnesses among train drivers**

*Christian Gravert, Berlin (Germany)*

**004 The position of the DGPPN in a European comparison**

*Mathias Berger, Freiburg im Breisgau (Germany)*

**005 Occupational stress and mental illness from a European perspective**

*Johannes Siegrist, Düsseldorf (Germany)*

## S-145 Symposium

10.15–11.45 h | Hall 3



TOPIC 19: Health services research and health care policy

**Psychiatry without compulsory treatment? Experience and findings**

› Section: Psychosocial Care Research

Chairs: Ingo Schäfer, Hamburg (Germany)  
Tilman Steinert, Ravensburg (Germany)**001 The public's attitude to compulsory treatment in psychiatry – 1993 and 2011**Georg Schomerus, Stralsund (Germany)  
Herbert Matschinger, Matthias Angermeyer**002 15 months of inpatient psychiatry without compulsory drug treatment – observations and findings**

Martin Zinkler, Heidenheim (Germany)

**003 Psychiatry without compulsory treatment: quantitative and qualitative data**Tilman Steinert, Ravensburg (Germany)  
Erich Flammer, Susanne Jaeger, Franziska Hüther**004 Psychiatry without compulsory treatment: experiences from the Netherlands**

Eric Noorthoorn, Maastricht (The Netherlands)

## S-154 Symposium

10.15–11.45 h | Hall 8

TOPIC 19: Health services research and health care policy

**Right to medical treatment and right to autonomy**Chairs: Norman Sartorius, Geneva (Switzerland)  
Wolfgang Gaebel, Düsseldorf (Germany)**001 The United Nations Convention on the Rights of Persons with Disabilities (CRPD) and Mental Health Law**

Peter Bartlett, Nottingham (United Kingdom)

**002 Parity of esteem between physical and mental health**

Sue Bailey, London (United Kingdom)

**003 Right to medical treatment and right to autonomy from clinical perspective in psychiatry**

Levent Küey, Istanbul (Turkey)

## S-161 Symposium

10.15–11.45 h | Salon 11/12

TOPIC 1: Organic mental disorders, dementia, Fo

**Preclinical diagnosis of neuropsychiatric disorders, an essential requirement for the target selection and design of preventive trials**

› In cooperation with DGBP – Deutsche Gesellschaft für Biologische Psychiatrie e.V.

Chairs: Stefan Teipel, Rostock (Germany)  
Bartosz Zurowski, Lübeck (Germany)**001 Machine learning approaches to detect preclinical signs of neurodegeneration from multimodal imaging data**  
Stefan Klöppel, Freiburg im Breisgau (Germany)**002 Novel diagnostic biomarkers and intervention targets for preclinical neurodegeneration**  
Anja Schneider, Göttingen (Germany)**003 Early detection of psychoses – what can neuroimaging contribute?**  
Anita Riecher-Rössler, Basel (Switzerland)  
Stefan Borgwardt, Nikolaos Koutsouleris**004 Exploring adolescents' vulnerability for reward-related disorders: the IMA-GEN study**Sophia Schneider, Hamburg (Germany)  
Uli Bromberg, Christian Büchel



10.15–11.45 h | Salon 17/18

TOPIC 8: Disorders closely related to childhood and adolescence, F7-9

**Disorders in relation to childhood and youth**

*Chairs: Christine M. Freitag, Frankfurt am Main (Germany)  
Beate Herpertz-Dahlmann, Aachen (Germany)*

**001 Dialectical behaviour therapy for adolescents – an inpatient therapy concept for adolescents with emotion regulation disorder and borderline-specific symptomatology**

*Andrea Dixius, Idar-Oberstein (Germany)  
Eva Möhler*

**002 The role of media in shaping sexual disorders in youth**

*Tatiana Butkova, Moscow (Russia)*

**003 Methylphenidate improves handwriting of children with ADHD – a systematic review of controlled clinical trials**

*Meisam Ghanbari, Shiraz (Iran)  
Ahmad Ghanizadeh*

**004 Association of childhood trauma and low hair cortisol**

*Kim Hinkelmann, Berlin (Germany)  
Christoph Muhtz, Lucia Dettenborn,  
Agorastos Agorastos, Katja Wingefeld,  
Carsten Spitzer, Wei Gao, Clemens  
Kirschbaum, Klaus Wiedemann, Christian  
Otte*

**005 National Total Survey of German adolescent suicide in prison**

*Daniel Radeloff, Frankfurt am Main (Germany)  
Thomas Lempp, Mattias Kettner, Katharina  
Bennefeld-Kersten, Christine M. Freitag*

**006 The impact of olfactory cues on social cognition: implications for autism spectrum disorders**

*Olga Wudarczyk, Aachen (Germany)*

12.00–13.00 h | Hall 2



TOPIC 13: Neurobiology, neurogenetics, epidemiology

**Social and biological foundations of fairness**

*Chairs: Peter Falkai, Munich (Germany)  
Andreas Meyer-Lindenberg,  
Mannheim (Germany)*

**001 Award ceremony: DGPPN Doctoral Thesis Award – Hans-Heimann Award**  
*Peter Falkai, Munich (Germany)*

**002 Social and biological foundations of fairness**

*Ernst Fehr, Zürich (Switzerland)*

13.30–15.00 h | Hall 3



TOPIC 15: Pharmacotherapy

**Presidential Debate: arising questions on antidepressant therapy**

*Chairs: Eckart Rüther, Feldafing (Germany)  
Thomas E. Schläpfer, Bonn (Germany)*

**001 Antidepressants: are the benefits worth the risks?**

*Irving Kirsch, Hull (United Kingdom)*

**002 Pharmacological treatment of depression: a remarkable success story**  
*Elias Eriksson, Gothenburg (Sweden)*

**003 Antidepressants: clinical problems and research realities**

*David Healy, Cardiff (United Kingdom)*

**004 The important role of antidepressants in the treatment of depression: research problems and clinical reality**  
*Hans-Jürgen Möller, Munich (Germany)*

**S-166 Symposium**
**13.30–15.00 h | Hall 10**
**TOPIC 3: Psychotic disorders, F2**
**Cognitive behaviour therapy for psychosis: novel approaches and neural correlates**
*Chairs: Tilo Kircher, Marburg (Germany)  
Joachim Klosterkötter, Cologne (Germany)*
**001 Who benefits from CBT and why?**
*Stefan Klingberg, Tübingen (Germany)  
Klaus Hesse, Andreas Wittorf*
**002 Cognitive biases as moderators and mediators of successful CBTp**
*Stephanie Mehl, Marburg (Germany)*
**003 Psychotherapy in subjects at clinical high risk for psychosis**
*Andreas Bechdolf, Cologne (Germany)*
**004 CBT effects on the brain of patients of schizophrenia: a multicenter fMRI study**
*Axel Krug, Marburg (Germany)*
**S-168 Symposium**
**13.30–15.00 h | Hall 4**
**TOPIC 3: Psychotic disorders, F2**
**Of mice and men – translational research in psychiatry involving human and animal models**
*Chairs: Thomas Nickl-Jockschat, Aachen (Germany)  
Ted Abel, Philadelphia (USA)*
**001 Brain structure changes associated with a Neuregulin-1 schizophrenia risk variant**
*Thomas Nickl-Jockschat, Aachen (Germany)*
**002 Mouse models to study the impact of mutations in Neuregulin-1 on brain structure and function**
*Ted Abel, Philadelphia (USA)*
**003 Imaging of a translational animal model of treatment resistant depression**
*Alexander Sartorius, Mannheim (Germany)  
Wolfgang Weber-Fahr, Natalia Gass, Dirk Cleppien, Barbara Vollmayr*
**004 Epigenetic mechanisms in neuropsychiatric disorders**
*André Fischer, Göttingen (Germany)*
**S-170 Symposium**
**13.30–15.00 h | Room 43**
**TOPIC 19: Health services research and health care policy**
**Mental Health Care – cross-european perspectives**
*Chairs: Hans-Joachim Salize, Mannheim (Germany)  
Steffi G. Riedel-Heller, Leipzig (Germany)*
**001 Open dialogues: new paradigm in mental health work for psychotic and other severe problems**
*Jaakko Seikkula, Jyväskylä (Finland)*
**002 Community mental health services in Italy: Combining continuity of care and the need for specific treatments for specific problems**
*Mirella Ruggeri, Verona (Italy)*
**003 Mental health care in Europe: the Netherlands investing in outpatient care, e-health and assessment of quality**
*Niels Mulder, Rotterdam (The Netherlands)*
**004 Mental Health Care in Europe: specialisation versus fragmentation – the English experience**
*Thomas Jamieson-Craig, London (United Kingdom)*
**S-174 Symposium**
**13.30–15.00 h | Salon 15/16**
**TOPIC 1: Organic mental disorders, dementia, Fo**
**Alzheimer's Disease: diagnosis, prevention and early treatment**
*Chairs: Jerzy Leszek, Wroclaw (Poland)  
Johannes Thome, Rostock (Germany)*
**001 Prevention mechanisms using population epidemiology**
*Andrzej Kiejna, Wroclaw (Poland)  
Blazej Misiak*
**002 Role of lifestyle modifiers in Alzheimer's disease**
*Euphrosyni Koutsouraki, Thessaloniki (Greece)*
**003 Chronotherapy in Alzheimer's Disease**
*Johannes Thome, Rostock (Germany)*

**004 Early identification and efficient therapy of Alzheimer's disease-nanotechnology as a tool**

*Jerzy Leszek, Wrocław (Poland)*

**P-12 Poster Presentations**

13.30–15.00 h | Hall 15.1

TOPIC 4: Affective disorders, F3

**Depressive disorders I**

*Chairs: Andreas Conca, Bozen (Italy)*

**001 Computer-based cognitive-bias-modification trainings in depression**

*Jennifer Arnold, Essen (Germany)*

*Julia Andre, Indira Tendolkar*

**002 A biopsychosocial model of interferon-alpha-induced depression in patients with chronic hepatitis C infection**

*Andreas Baranyi, Graz (Austria)*

*Andreas Meinitzer, Alexandra Stepan, Csilla Putz-Bankuti, Robert Breitenecker, Rudolf Stauber, Hans-Peter Kapfhammer, Hans-Bernd Rothenhäusler*

**003 Reversible increase of Asymmetric Dimethylarginine (ADMA) during interferon-alpha-induced Depression in patients with chronic hepatitis C infection – impact on cardiovascular risk and neuronal transmission**

*Andreas Baranyi, Graz (Austria)*

*Andreas Meinitzer, Csilla Putz-Bankuti, Rudolf Stauber, Hans-Peter Kapfhammer, Hans-Bernd Rothenhäusler*

**004 Utility of assessment of social anxiety and impulsivity in the diagnosis of depression in psychiatric patients**

*Magdalena Bonk, Tychy (Poland)*

*Weronika Bulska, Kamila Orszulak, Mariusz Seweryn, Krzysztof Krysta, Irena Krupka-Matuszczyk*

**005 Aldosterone, salt craving and depression severity – a correlative analysis**

*Matthias Büttner, Marburg (Germany)*

*Harald Murck, Daniela Jezova, Carsten*

*Konrad, Tilo Kircher*

**006 Investigating the effects of depression on cognitive decline using rodents**

*Ravit Hadar, Dresden (Germany)*

*Lydia Günther, Barbara Grabner, Thomas Götz, Alexander Garthe, Christine Winter*

**007 The effects of catecholamine depletion on the neural response to fearful faces in remitted depression**

*Philipp Homan, Bern (Switzerland)*

*Wayne Drevets, Gregor Hasler*

**008 Changes in platelet activation status i.e. bioactivity and aggregation as a peripheral biomarker for depression: analysis from the MOODINFLAME study**

*Katharina Hüfner, Innsbruck (Austria)*

*Pia Koudouovoh-Tripp, Bettina Stemer, Peter Malik, Tanja Hochstrasser, Johannes Giesinger, Christina Kandler, Christian Humpel, Barbara Sperner-Unterweger*

**009 Theory of Mind und emotion recognition at chronically depressed patients**

*Constance Jakob, Munich (Germany)*

*Maria-Christine Mauer, Andrea Jobst, Christine Bauriedl-Schmidt, Lena Sabafß, Aischa Letters, Charlotte Wink, Christina Selberdinger, Peter Falkai, Frank Padberg*

**010 Inwanted psychological effects regarding pegylated interferon in hepatitis C treatment**

*Katerina Naumovska- Ristovska, Skopje (Macedonia)*

**011 Genetic relationships between neuroticism, depression and stress**

*Liz Rietschel, Hamburg (Germany)*

*Gu Zhu, Clemens Kirschbaum, Jana Strohmaier, Nick Martin*

**L-014 Lecture**

15.30–16.30 h | Hall 2

TOPIC 29: Other topics

**Why aren't we smarter already?**

**Evolutionary trade-offs and cognitive enhancements**

*Chairs: Iris Hauth, Berlin (Germany)*

*Thomas Pollmächer, Ingolstadt (Germany)*

*Speaker: Ralph Hertwig, Berlin (Germany)*

S-187

Symposium

15.30–17.00 h | Hall 5

TOPIC 3: Psychotic disorders, F2

**Schizophrenia as immunological disorder**

*Chairs: Norbert Müller, Munich (Germany)  
Johann Steiner, Magdeburg (Germany)*

**001 The mild encephalitis hypothesis of psychiatric disorders**

*Karl Bechter, Günzburg (Germany)*

**002 The role of prenatal immune activation and stress in schizophrenia**

*Sandra Giovanoli, Schwerzenbach (Switzerland)*

**003 NMDA receptor antibodies in acutely ill schizophrenia patients: Specific relevance of IgG NR1a antibodies for distinction from NMDA receptor encephalitis**

*Johann Steiner, Magdeburg (Germany)  
Bernhard Bogerts, Winfried Stoecker, Martin Walter, Kolja Schiltz, Klaus-Peter Wandinger*

**004 Immunological biomarkers and therapeutic approaches in schizophrenia**

*Norbert Müller, Munich (Germany)*

S-190

Symposium

15.30–17.00 h | Room 43

TOPIC 13: Neurobiology, neurogenetics, epidemiology

**Psychiatric epigenetics – from bench to bedside**

*Chairs: Helge Frieling, Hannover (Germany)  
Michael Deuschle, Mannheim (Germany)*

**001 Epigenetic modification as molecular mediator of gene by environment interaction**

*Torsten Klengel, Munich (Germany)*

**002 Epigenetic effects of early life stress in humans: findings from a longitudinal study**

*Stephanie Witt, Mannheim (Germany)  
Vanessa Nieratschker, Maria Gilles, Michael Deuschle*

**003 DNA Methylation – a link in the missing heritability of anxiety disorders?**

*Katharina Domschke, Würzburg (Germany)  
Nicola Tidow, Kathrin Schwarte, Andreas Reif, Anette Kersting, Volker Arolt, Peter Zwanzger, Jürgen Deckert*

**004 DNA methylation profiles are potent biomarkers in affective disorders**

*Helge Frieling, Hannover (Germany)  
Klaus Lieb, Stefan Bleich, André Tadic*

FV-023

Oral Presentations

15.30–17.00 h | Salon 17/18

TOPIC 7: Personality disorders, F6

**Personality disorders and trauma**

*Chairs: Harald J. Freyberger, Greifswald (Germany)  
Michael Marwitz, Prien a. Chiemsee (Germany)*

**001 Processing of ambiguous bimodal social stimuli in Borderline Personality Disorder**

*Natalie Izurieta, Heidelberg (Germany)  
Sabine C. Herpertz, Katja Bertsch*

**002 Endocrinological and emotional reactions to social exclusion in borderline personality disorder**

*Andrea Jobst, Munich (Germany)  
Anna Albert, Christine Bauriedl-Schmidt, Maria-Christine Mauer, Tanja Dalozzo, Lena Sabaß, Babette Renneberg, Anna Buchheim, Peter Falkai, Peter Zill, Frank Padberg*

**003 Treatment of sexual dysfunction in the consequences of traumatic brain injury**

*Bibigul Karasheva, Moscow (Russia)  
Nikolai Kibrik*

**004 Traumatic experiences and psychological well-being of unaccompanied refugee minors in Germany**

*Veronika Müller, Konstanz (Germany)  
Julia Baumann, Julia Morath, Maggie Schauer, Katalin Dohrmann, Dorothea Isele, Thomas Elbert, Martina Ruf-Leuschner*

**005** The most severe somatic complications of eating disorders and methods of their realimentation – weight gain as a criterion for successful therapy – a myth

*Miroslava Navratilova, Brno (Czech Republic)*

*Jiri Jarkovsky, Jana Tumova, Michaela Kalendova, Lubos Sobotka*

**006** Preliminary evaluation of prevalence, phenomenology and associations with clinical characteristics of psychotic symptoms in borderline personality disorders

*Katrin Schroeder, Hamburg (Germany)*  
*Ingo Schäfer*

### S-195 Symposium

17.15–18.45 h | Hall 2



TOPIC 18: Social psychiatry

**Fighting stigma and discrimination**

*Chairs: Wolfgang Gaebel, Düsseldorf (Germany)*  
*Andreas Heinz, Berlin (Germany)*

**001** Old and new paradigms in overcoming stigma and discrimination

*Norman Sartorius, Geneva (Switzerland)*

**002** Stigma research: concepts and state of the art

*Nicolas Rüsçh, Ulm (Germany)*

**003** From destigmatisation to inclusion: the position of the DGPPN

*Andreas Heinz, Berlin (Germany)*

**004** Psychiatrists: Stigmatized and discriminated?

*Wolfgang Gaebel, Düsseldorf (Germany)*

### ST-028 State-of-the-Art-Symposium

17.15–18.45 h | Hall Stockholm 3



TOPIC 1: Organic mental disorders, dementia, Fo

**Dementia**

*Chairs: Frank Jessen, Bonn (Germany)*  
*Johannes Kornhuber, Erlangen (Germany)*

**001** Diagnostic process in dementia

*Frank Jessen, Bonn (Germany)*

**002** Therapy

*Johannes Kornhuber, Erlangen (Germany)*

### FV-024 Oral Presentations

17.15–18.45 h | Salon 11/12

TOPIC 2: Mental disorders due to psychoactive substance use, F1

**Substance and non-substance related addictions**

*Chairs: Jürgen Gallinat, Berlin (Germany)*  
*Ingo Vernaleken, Aachen (Germany)*

**001** The impact of early drinking onset on subsequent alcohol abuse

*Julia Beil, Rybnik (Poland)*  
*Agnieszka Bratek, Krzysztof Krysta*

**002** The impact of family-related factors on alcohol dependence

*Agnieszka Bratek, Ogrodzieniec (Poland)*  
*Julia Beil, Krzysztof Krysta*

**003** Deep brain stimulation for alcohol addiction? Data from compulsive alcohol drinking rodents

*Ravit Hadar, Dresden (Germany)*  
*Valentina Vengeliene, Elizabeth Barroeta Hlusicke, Julia Rummel, Rainer Spanagel, Christine Winter*

**004** Impact of cannabis abuse on selected cognitive domains in schizophrenic patients

*Krzysztof Krysta, Katowice (Poland)*  
*Irena Krupka-Matuszczyk, Malgorzata Janas-Kozik, Janusz Rybakowski*

**005** Research on addiction to social networking sites. How do we use them?

*Anna Szczegieliak, Katowice (Poland)*  
*Karol Palka, Krzysztof Krysta*

**006** Influence of an alcohol consumption on the behavior and state of being of polish students

*Krzysztof Wilczyński, Katowice (Poland)*  
*Aleksandra Pawlik, Lukasz Witowski, Krzysztof Krysta, Irena Krupka-Matuszczyk*

> Saturday, 30 Nov 2013

**S-211 Symposium**

08.30–10.00 h | Hall Oslo

TOPIC 15: Pharmacotherapy

**Cognitive enhancement in health and disease**

*Chairs: Falk Kiefer, Mannheim (Germany)  
Christian Otte, Berlin (Germany)*

**001 The pharmacology of cognitive enhancement**

*Gerhard Gründer, Aachen (Germany)*

**002 D-cycloserine augmented cue-exposure therapy in alcohol-dependent patients: a randomized controlled fMRI study**

*Falk Kiefer, Mannheim (Germany)*

**003 Enhancing cognition by stimulation of central mineralocorticoid receptors? An experimental placebo-controlled study in depressed patients and healthy controls**

*Christian Otte, Berlin (Germany)  
Linn Kühl, Katja Wingenfeld, Kim Hinkelmann*

**004 Pharmacological neuroenhancement and brain doping: chances and risks**

*Klaus Lieb, Mainz (Germany)  
Andreas Franke*

**S-225 Symposium**

08.30–10.00 h | Room 44

TOPIC 18: Social psychiatry

**Psychiatry in post-Soviet states: common past – different future?**

*Chairs: Dzmitry Krupchanka, Minsk (Belarus)  
Nikita Bezborodovs, Riga (Latvia)*

**001 Psychiatry in Belarus: narrow path between east and west**

*Dzmitry Krupchanka, Minsk (Belarus)*

**002 Latvian psychiatry in the years of independence**

*Nikita Bezborodovs, Riga (Latvia)*

**003 Current challenges of mental health services in Russia**

*Aleksey Pavlichenko, Moscow (Russia)  
Daria Smirnova*

**004 Psychiatry in Lithuania**

*Judita Augenaite, Vilnius (Lithuania)  
Arunas Germanavicius*

**FV-029 Oral Presentations**

08.30–10.00 h | Salon 13/14

TOPIC 12: Brain imaging, neurophysiology, neuropsychology

**Stress symptoms and depressive diseases**

*Chairs: Mathias Berger, Freiburg im Breisgau (Germany)  
Mazda Adli, Berlin (Germany)*

**001 Electroconvulsive therapy (ECT) increases structural connectivity in depression**

*Jennifer Arnold, Essen (Germany)  
Holger Siemann, Philip van Eindhoven, Indira Tendolkar*

**002 The influence of chemosensory signals on stress reaction in females**

*Ka Chun Chung, Aachen (Germany)  
Jessica Freiherr, Birgit Derntl*

**003 Comparative analysis of burnout in different groups of medical professionals**

*Alexandr Merkin, Moscow (Russia)  
O. Beloskurskaya, E. Dinov, I. Nikiforov*

**004 The role of community pharmacists in managing patients with depression**

*Edmond Pistja, Lezhe (Albania)  
Alba Themeli*

**005 Brain morphometric biomarkers differentiating unipolar and bipolar depression: a VBM-pattern classification approach**

*Ronny Redlich, Münster (Germany)  
Jorge Almeida, Dominik Grotegerd, Nils Opel, Volker Arolt, Udo Dannlowski, Mary Phillips*

**006 Trait neuroticism selectively sensitizes the amygdala under acute stress**

*Indira Tendolkar, Essen (Germany)  
Daphne Everaerd, Floris Klumpers, Jens Wiltfang, Guillén Fernández*

**L-016** **Lecture**
**09.00–10.00 h | Hall 2**


**TOPIC 13:** Neurobiology, neurogenetics, epidemiology

**Is our brain a neuro-social organ? Neuroscientific and psychiatric investigations**

*Chairs: Andreas Meyer-Lindenberg, Mannheim (Germany)*

*Henrik Walter, Berlin (Germany)*

*Speaker: Georg Northoff, Ontario (Canada)*

**PR-004** **President's Symposium**
**10.15–11.45 h | Hall 2**


**TOPIC 13:** Neurobiology, neurogenetics, epidemiology

**The social brain**

*Chairs: Peter Falkai, Munich (Germany)*

*Henrik Walter, Berlin (Germany)*

**001 Award ceremony: DGPPN Poster Awards**

*Peter Falkai, Munich (Germany)*

**002 The social brain in psychiatry: a short introduction and examples from theory of mind research in schizophrenia and depression**

*Henrik Walter, Berlin (Germany)*

**003 The empathic brain and its role in psychopathology**

*Christian Keysers, Amsterdam (The Netherlands)*

**004 On the plasticity of the social brain: what we can learn from autism spectrum disorders**

*Isabel Dziobek, Berlin (Germany)*

**005 Oxytocin and the social brain: perspectives for a psychobiological therapy**

*Markus Heinrichs, Freiburg im Breisgau (Germany)*

**S-237** **Symposium**
**10.15–11.45 h | Room 43**

**TOPIC 13:** Neurobiology, neurogenetics, epidemiology

**Interaction of the endogenous and exogenous factors in pathogenesis of the mental disorders: from research to therapy and prevention**

*Chairs: Valery Krasnov, Moscow (Russia)*

*Maya Kulygina, Moscow (Russia)*

**001 Dynamics of the endorphines and vegetative regulation during the therapy of depression**

*Valery Krasnov, Moscow (Russia)*

*Olga Antipova, Irina Emeljanova*

**002 Anti-stress regulation in patients with affective spectrum disorders by the application of light-acoustic technology**

*Vera Orlova, Moscow (Russia)*

*E. Miroshnik, V. Minutko*

**003 Albumin conformation disturbances in the first episode schizophrenia**

*Marat Uzbekov, Moscow (Russia)*

*T. Syrejshchikova, T. Babushkina, N. V.*

*Smolina, Varvara Kalinina, G. E. Dobretsov,*

*T. Klimova, A. Peregudov, E. Y. Misionzhnik,*

*V. Tokarev*

**004 The role of Herpes family viruses in the pathogenesis of schizophrenia: the data of multidimensional correlations of immunological, morphological and clinical characteristics**

*Irina Mikhailova, Moscow (Russia)*

*Vera Orlova, V. Minutko, N. Berezovskaya, N.*

*Scavladze, I. Malusheva*

**PL-004** **Plenary Session**

12.00–13.00 h | Hall 2



TOPIC 14: Pharmacotherapy

**Narcissistic personality disorder: clinical presentation and treatment**

*Chairs: Sabine C. Herpertz, Heidelberg (Germany)*

*Arno Deister, Itzehoe (Germany)*

**001 Award ceremony: DGPPN Research Award for Medical Psychotherapy**

*Sabine C. Herpertz, Heidelberg (Germany)*

**002 Narcissistic personality disorder: clinical presentation and treatment**

*Otto F. Kernberg, White Plains (USA)*

**L-017**

**Lecture**

13.30–14.30 h | Hall 2



TOPIC 22: Philosophy, history and ethics

**The Association of German Neurologists and Psychiatrists and its attitude towards psychotherapy 1935-1941**

*Chairs: Frank Schneider, Aachen (Germany)*

*Peter Falkai, Munich (Germany)*

*Speaker: Hans-Walter Schmuhl, Bielefeld (Germany)*

**S-249**

**Symposium**

13.30–15.00 h | Hall Stockholm 1

TOPIC 12: Brain imaging, neurophysiology, neuropsychology

**Self-regulation of brain activity using neurofeedback: experimental approaches and clinical applications**

*Chairs: Gabriele Ende, Mannheim (Germany)*

*Rosemarie Klütsch, Mannheim (Germany)*

**001 Real-time fMRI-based neurofeedback training: experimental approaches and clinical examples**

*Ralf Veit, Tübingen (Germany)*

**002 Neurofeedback training and emotion regulation – targeting the amygdala**

*Christian Paret, Mannheim (Germany)*

**003 Combining functional magnetic neuroimaging-based neurofeedback and cognitive training to investigate neuro-cognitive development during childhood and adolescence**

*Kathrin Cohen Kadosh, Oxford (United Kingdom)*

**004 Direct modulation of resting-state network connectivity following EEG neurofeedback in posttraumatic stress disorder**

*Rosemarie Klütsch, Mannheim (Germany)*

**S-250**

**Symposium**

13.30–15.00 h | Room 42

TOPIC 15: Pharmacotherapy

**www.medicawiki.eu: a psychopharmacological decision support system**

*Chairs: Marisa de Roo, Amersfoort (The Netherlands)*

*Walter Broekema, Amersfoort (The Netherlands)*

**001 www.medicawiki.eu: background and development**

*Walter Broekema, Amersfoort (The Netherlands)*

**002 Medicawiki and clinical psychiatric practice: guidance in complex patients**

*Frank Kruisdijk, Amersfoort (The Netherlands)*

**003 Clinical implications of polymorphisms of cytochrome P450 drug metabolizing enzymes**

*Mariska de Roo, Amersfoort (The Netherlands)*

**FV-035**

**Oral Presentations**

13.30–15.00 h | Salon 17/18

TOPIC 12: Brain imaging, neurophysiology, neuropsychology

**Brain imaging and neurogenetics**

*Chairs: Eva Meisenzahl, Munich (Germany)*

*Frank-Gerald Pajonk, Kloster Schäftlarn (Germany)*

**001 Risk and causality: a molecular dissection of the endophenotype construct**

*Steve Hodgkinson, Ravensburg (Germany)*

*Isabelle Hellwig, Wolfgang P. Kaschka*



**002 Neural network of cognitive emotion regulation – an ALE meta-analysis and MACM analysis**

*Nils Kohn, Aachen (Germany)*

**003 Neuroendocrine regulations of social approach-avoidance behavior**

*Sina Radke, Nijmegen (The Netherlands)  
Inge Volman, Karin Roelofs, Ellen de Bruijn*

**004 GR gene methylation modulates activation of the subgenual cingulate and its functional coupling with medio-temporal structures**

*Phöbe Schmierer, Berlin (Germany)  
Andreas Meyer-Lindenberg, Susanne Erk,  
Nina Y. Seiferth, Leila Haddad, Vanessa Nieratschker, Stephanie Witt, Marcella Rietschel, Markus M. Nöthen, Andreas Heinz, Henrik Walter*

**005 A potential association of RASGRF1 genetic variation with human hippocampus-dependent memory**

*Björn Schott, Berlin (Germany)  
Adriana Barman, Sylvia Richter, Anne Assmann, Joram Soch, Constanze Seidenbecher*

**006 7 Tesla magnetic resonance imaging (MRSI) of A-Beta related brain metabolism in cognitively normal elderly adults**

*Simon Schreiner, Zürich (Switzerland)  
Thomas Kirchner, Anton Gietl, Stefanie Steininger, Michael Wyss, Alfred Buck, Sandra E. Leh, Klaas Prüssmann, Christoph Hock, Anke Henning, Paul G. Unschuld*

## DGPPN SECTIONS

### Addiction

Anil Batra, Tübingen  
Heribert Fleischmann, Neustadt a.d. Waldnaab

### Clinically Applied Stimulation Techniques in Psychiatry

Michael Grözinger, Aachen  
Andreas Conca, Bozen (Italy)

### Community Psychiatry

Raoul Borbé, Ravensburg  
Ulf Künstler, Hamburg  
Oliver Biniash, Ingolstadt

### Emergency Psychiatry

Frank-Gerald Pajonk, Kloster Schäftlarn  
Thomas Messer, Pfaffenhofen  
Peter Neu, Berlin

### Experimental Stimulation Techniques in Psychiatry

Thomas E. Schläpfer, Bonn  
Alexander Sartorius, Mannheim

### Forensic Psychiatry

Jürgen L. Müller, Göttingen  
Nahlah Saimeh, Lippstadt

### Gerontopsychiatry

Vjera Holthoff, Dresden  
Walter Hewer, Rottweil

### Health Care Professions

Angela Döring, Bochum  
Ursula Walkenhorst, Bochum

### History of Psychiatry

Ekkehardt Kumbier, Rostock  
Maike Rotzoll, Heidelberg

### Intercultural Psychiatry and Psychotherapy, Migration

Meryam Schouler-Ocak, Berlin  
Iris T. Graef-Calliess, Sehnde

### Mental Disorders in People with Intellectual Disabilities

Michael Seidel, Bielefeld  
Knut Hoffmann, Bochum

### Neurobiology and Genetics

Jürgen Deckert, Würzburg  
Elisabeth Binder, Munich  
Oliver Gruber, Göttingen

### Neuropsychiatry

Ludger Tebartz van Elst, Freiburg im Breisgau  
Josef Priller, Berlin

### Philosophical Foundations of Psychiatry and Psychotherapy

Martin Heinze, Rüdersdorf  
Thomas Fuchs, Heidelberg  
Jann E. Schlimme, Berlin

### Prevention of Mental Disorders

Joachim Klosterkötter, Cologne  
Michael Bauer, Dresden  
Andrea Pfennig, Dresden  
Frank Jessen, Bonn

### Psychiatric Nursing

Stephan Bögershausen, Lengerich  
Frank Vilsmeier, Rickling

### Psychiatry in Primary Care

Detlef Dietrich, Hildesheim  
Cornelia Goesmann, Hannover

### Psychoeducation

Josef Bäuml, Munich

### Psychopharmacology

Gerhard Gründer, Aachen  
Gabriel Eckermann, Kaufbeuren

### Psychosocial Care Research

Thomas Becker, Günzburg  
Steffi G. Riedel-Heller, Leipzig  
Bernhard van Treeck, Hamburg

### Psychosomatics

*Manfred Fichter, Prien am Chiemsee  
Martin Bohus, Mannheim*

### Psychotherapy

*Michael Linden, Teltow  
Harald J. Freyberger, Greifswald*

### Psychotraumatology

*Ulrich Frommberger, Offenburg  
Martin Driessen, Bielefeld*

### Rehabilitation

*Katarina Stengler, Leipzig  
Arnold Torhorst, Bad Tölz*

### Religiousness and Spirituality

*Michael Utsch, Berlin  
Samuel Pfeifer, Basel-Riehen (Switzerland)*

### Remuneration

*Ansgar Klimke, Friedrichsdorf-Köppern  
Frank Godemann, Berlin*

### Sexual Medicine

*Michael M. Berner, Bad Säckingen  
Peer Briken, Hamburg*

### Sexual Orientation in Psychiatry and Psychotherapy

*Götz Mundle, Wendisch Rietz  
Lieselotte Mahler, Berlin*

### Sleep Medicine

*Thomas Pollmächer, Ingolstadt  
Dieter Riemann, Freiburg im Breisgau  
Thomas-Christian Wetter, Regensburg*

### Sports Psychiatry and Psychotherapy

*Frank Schneider, Aachen  
Valentin Z. Markser, Cologne*

### Suicidology

*Manfred Wolfersdorf, Bayreuth  
Barbara Schneider, Cologne*

### Women and Gender-specific Questions in Psychiatry

*Anette Kersting, Leipzig  
Iris Hauth, Berlin*

## COOPERATING ASSOCIATIONS AND SOCIETIES

- **Aktion Psychisch Kranke e.V. (APK)**  
*Peter Weiß (MdB), Berlin*
- **Arbeitsgemeinschaft für Neuropsychopharmakologie und Pharmakopsychiatrie e.V. (AGNP)**  
*Stefan Bleich, Hannover*
- **Arbeitskreis der Chefärztinnen und Chefärzte der Kliniken für Psychiatrie und Psychotherapie an Allgemeinkrankenhäusern in Deutschland e.V. (ACKPA)**  
*Karl H. Beine, Hamm*
- **Berufsverband Deutscher Fachärzte für Psychiatrie und Psychotherapie e.V. (BVDP)**  
*Christa Roth-Sackenheim, Andernach*
- **Berufsverband Deutscher Nervenärzte e.V. (BVND)**  
*Frank Bergmann, Aachen*
- **Bundesärztekammer (BÄK)**  
*Frank Ulrich Montgomery, Berlin*
- **Bundesdirektorenkonferenz – Verband leitender Ärztinnen und Ärzte der Kliniken für Psychiatrie und Psychotherapie e.V. (BDK)**  
*Thomas Pollmächer, Ingolstadt*
- **Bundespsychotherapeutenkammer (BPTK)**  
*Rainer Richter, Hamburg*
- **Deutsche Ärztliche Gesellschaft für Verhaltenstherapie e.V. (DÄVT)**  
*Rudolf Knickenberg, Bad Neustadt/Saale*
- **Deutsche Gesellschaft für Arbeitsmedizin und Umweltmedizin e.V. (DGAUM)**  
*Hans Drexler, Erlangen*
- **Deutsche Gesellschaft für Biologische Psychiatrie e.V. (DGBP)**  
*Andreas Heinz, Berlin*
- **Deutsche Gesellschaft für Bipolare Störungen e.V. (DGBS)**  
*Martin Schäfer, Essen*
- **Deutsche Gesellschaft für Gerontopsychiatrie und -psychotherapie e.V. (DGGPP)**  
*Hans Gutzmann, Berlin*
- **Deutsche Gesellschaft für Innere Medizin e.V. (DGIM)**  
*Michael P. Manns, Hannover*
- **Deutsche Gesellschaft für Kinder- und Jugendpsychiatrie, Psychosomatik und Psychotherapie e.V. (DGKJP)**  
*Gerd Schulte-Körne, München*
- **Deutsche Gesellschaft für Medizinische Psychologie (DGMP)**  
*Renate Deinzer, Gießen*
- **Deutsche Gesellschaft für Medizinische Soziologie e.V. (DGMS)**  
*Olaf von dem Knesebeck, Hamburg*
- **Deutsche Gesellschaft für Neurologie e.V. (DGN)**  
*Martin Grond, Siegen*
- **Deutsche Gesellschaft für Neuro-pathologie und Neuroanatomie e.V. (DGNN)**  
*Werner Paulus, Münster*
- **Deutsche Gesellschaft für Psychologie e.V. (DGPs)**  
*Jürgen Margraf, Bochum*
- **Deutsche Gesellschaft für Psychosomatische Medizin und Ärztliche Psychotherapie e.V. (DGPM)**  
*Johannes Kruse, Gießen*
- **Deutsche Gesellschaft für Schlafforschung und Schlafmedizin e.V. (DGSM)**  
*Alfred Wiater, Köln*
- **Deutsche Gesellschaft für Sportmedizin und Prävention e.V. (DGSP)**  
*Klaus-Michael Braumann, Hamburg*

- **Deutsche Gesellschaft für Suchtforschung und Suchttherapie e.V. (DG-Sucht)**  
*Anil Batra, Tübingen*
- **Deutsche Gesellschaft für Verhaltensmedizin und Verhaltensmodifikation e.V. (DGVM)**  
*Bernd Leplow, Halle/Saale*
- **Deutsche Hauptstelle für Suchtfragen e.V. (DHS)**  
*Heribert Fleischmann, Neustadt a.d. Waldnaab*
- **Deutsche Krebsgesellschaft e.V. (DKG)**  
*Wolff Schmiegell, Bochum*
- **Deutscher Hausärzterverband e.V.**  
*Ulrich Weigeldt, Bremen*
- **Deutsches Kollegium für Psychosomatische Medizin (DKPM)**  
*Stephan Zipfel, Tübingen*
- **Deutsch-Türkische Gesellschaft für Psychiatrie, Psychotherapie und psychosoziale Gesundheit e.V. (DTGPP)**  
*Meryam Schouler-Ocak, Berlin*
- **Deutschsprachige Gesellschaft für Psychotraumatologie e.V. (DeGPT)**  
*Julia Schellong, Dresden*
- **European Psychiatric Association (EPA)**  
*Danuta Wasserman, Stockholm (Schweden)*
- **Gesellschaft für experimentelle und klinische Neuroleptika e.V. (GESENT)**  
*Peter Riederer, Würzburg*
- **Marcé Gesellschaft für Peripartale Psychische Erkrankungen e.V.**  
*Patricia Trautmann-Villalba, Frankfurt am Main*
- **Neurowissenschaftliche Gesellschaft e.V. (NWG)**  
*Helmut Kettenmann, Berlin*
- **Österreichische Gesellschaft für Psychiatrie und Psychotherapie (ÖGPP)**  
*Georg Psota, Wien (Österreich)*
- **Sächsische Wissenschaftliche Gesellschaft für Nervenheilkunde e.V. (SWGNG)**  
*Michael Bauer, Dresden*
- **Schweizerische Gesellschaft für Biologische Psychiatrie (SGBP/SSBP)**  
*Martin Hatzinger, Solothurn (Schweiz)*
- **Schweizerische Gesellschaft für Psychiatrie und Psychotherapie (SGPP)**  
*Pierre Vallon, Morges (Schweiz)*
- **Ständige Konferenz der Lehrstuhlinhaber für Psychiatrie und Psychotherapie an den deutschen Universitäten**  
*Sabine C. Herpertz, Heidelberg*
- **World Psychiatric Association (WPA)**  
*Pedro Ruiz, Miami (USA)*

## SUSTAINABILITY AT THE DGPPN CONGRESS 2013

*The DGPPN has decided to conduct the annual congress in an environmentally friendly, sustainable way as much as possible. Hereby we take responsibility for the environment and our children. It won't be possible to fully implement this in a single year, but we would like to send a signal and to continue the discussion of this very important topic. Our partner, CPO HANSER SERVICE as well as the ICC Berlin will be a part of this, and we hope that the participants support this initiative their own behavior and ideas for upcoming congresses.*

### The organisation of the congress

- more than ever we avoid paper and advertise the congress electronically
- submission of abstracts is no longer done on paper
- no printed abstract booklet – abstracts will be published online
- use of regional, preferably ecologically farmed food for lunch snacks
- Fair Trade products for coffee and other imported products
- food and drinks in the ICC will be served in porcelain/glass dishes
- preferred selection of hotels that actively support environmental conscience
- requests to exhibitors for designing their exhibits environmentally friendly

### The International Congress Centrum ICC Berlin

The ICC Berlin supports sustainability and environmental protection by the following measures:

- 2 combined heat and power plants for the economical and ecological production of heat and electricity
- wood pellet facility for the production of energy from renewable sources
- heat reclamation in the exhibit halls
- energy savings through
  - minimal heating/air conditioning during setup and teardown phases of the events
  - documentation and analysis of use, to identify potential for optimization and to conduct further energy saving measures
  - continuous change of the exhibit hall lighting to energy-saving T5 fluorescent lamps
  - energy optimized switching concept of the outdoor lighting





- waste management, e. g.
  - waste separation through the use of separate waste bins in the public areas
  - separate collection of potential recyclables during the clearance of exhibit waste
  - cleaning is performed while using biologically degradable cleaning products
- use of crockery for all meals at the ICC Berlin

## What can you do?

- travel by train
- use of public transportation in Berlin
- selecting hotels that actively support environmental friendliness
- use of electronic congress publications



**Be more green:** Travel with Deutsche Bahn for 99 Euro with 100% green power to the DGPPN Congress Berlin

## Technical Exhibition

Please visit the Technical Exhibition in the exhibition halls 12, 13 and 14.1. Please find the exhibitor list on page 314 and the exhibition floor plan on page 316.

### Opening hours:

Wednesday > 27 Nov 2013 > 09.00–18.00 h  
Thursday > 28 Nov 2013 > 09.00–18.00 h  
Friday > 29 Nov 2013 > 09.00–18.00 h  
Saturday > 30 Nov 2013 > 09.00–14.00 h



# GENERAL INFORMATION

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# GENERAL INFORMATION

## Registration and Payment

### Registration Fees

MEMBER (DGPPN, DGKJP, ÖGPP, SGPP)	EUR
Physician, Psychiatrist, Psychologist a.o.	300
New-DGPPN-Member <sup>2)</sup>	0
Assistant Physician <sup>1)</sup>	250
NON-MEMBER	EUR
Physician, Psychiatrist, Psychologist a.o.	530
Assistant Physician <sup>1)</sup>	400
Student <sup>1)</sup>	100
Affiliated Health Care Professionals (non-academic) <sup>1)</sup>	190
European Grant <sup>4)</sup>	0
Day Pass <sup>3)</sup>	300

<sup>1)</sup> Please present the certification upon registration at the counter.

<sup>2)</sup> In the first year of their membership new DGPPN members can participate in the DGPPN Congress Berlin for free, provided that they have paid their membership fee by the start of the congress. Free participation is only available to members who remain in the DGPPN for more than one year. Please submit your membership application to the DGPPN-office (DGPPN – German Association for Psychiatry, Psychotherapy and Psychosomatics, Reinhardtstr. 27 B, 10117 Berlin, Germany).

<sup>3)</sup> Congress participants who do not give a scientific contribution can buy a day pass. All participants at the congress are obliged to pay the congress fees. Chairpersons, speakers and poster presenters are not in any way exempt from the payment of the complete registration fees.

<sup>4)</sup> The grant will be awarded to applicants from non-German-speaking European countries who can provide proof of their licence to practice medicine or employment as a physician in a psychiatric-psychotherapeutic practice or hospital or a certificate of matriculation from a medical faculty.

### The congress registration fee includes the following services and participation in:

- Scientific programme
- CME certificate
- Final Congress Programme
- Industrial- and Poster Exhibition
- Opening Ceremony
- Get-Together

## Abstract-CD-ROM

All abstracts are available for printing at [www.psychiatry-congress-berlin.org](http://www.psychiatry-congress-berlin.org).

You will receive your copy of the Abstract-CD-ROM at the exhibition booth of **Otsuka Pharma GmbH** in Hall 13.

## Business Center

The Business Center of the ICC Berlin is located in the main entrance area.

## Opening hours:

Wednesday	27 Nov 2013	08.00 – 18.00 h
Thursday	28 Nov 2013	08.00 – 18.00 h
Friday	29 Nov 2013	08.00 – 18.00 h
Saturday	30 Nov 2013	08.00 – 14.00 h

## Cash Machine

An ATM/cash machine is located in the main entrance area next to the information desk of the ICC Berlin. Following cards are accepted:

EC-Karte, Sparkassenkarte, Maestro, Eurocard, Mastercard, Visa, Eufiserv, Cirrus, Plus

## Cloakroom

A cloakroom can be found in the main entrance area of the ICC Berlin on the 'blue side'.

## Fee:

- › EUR 1,70 per piece (clothing)
- › EUR 2,00 per piece (luggage)

## CME Certificates

The DGPPN Congress 2013 is accredited by the European Council for Continuing Education (EACCME) to provide Continuing Medical Education (CME) credits to physicians. The following credits will be certified:

Full day	› 6 points
Half day	› 3 Points

You can get your certificate of attendance along with your CME credits at the CME Terminals located in the wardrobe area in the entrance foyer (red side). Starting on 2 December 2013 you can request your certificate online at [www.dgppn.de](http://www.dgppn.de) until 31 December 2013. Your attendance and full payment will be audited. Please evaluate the congress electronically in order to receive CME credits.

## CO CONGRESS ONLINE®

In CO CONGRESS ONLINE® you will find the latest information about the congress and you can put together your personal congress programme. The search engine helps you to find a particular presentation.

For pre-registered delegates of the DGPPN Congress a personal congress section "My Congress" has automatically been installed. Here you will find your booking confirmation and personal messages.

Congress and Exhibition Office

**CPO HANSER®**  
SERVICE

## CPO HANSER SERVICE GmbH

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[dgppn13@cpo-hanser.de](mailto:dgppn13@cpo-hanser.de)

## Congress App

The DGPPN Congress App 2013 is available for free. With this app you are able to specifically search for sessions, lectures, speakers and abstracts and view the current programme schedule. The congress app was created for iOS and Adroid systems.

## Q & A Module (Question & Answer)

Part of the DGPPN Congress App is the Question & Answer Module. It enables you to ask questions and make comments with your smartphone during lectures that will take place in Hall 2, 3, 7, Roof Garden, Oslo and Stockholm 3. Your questions and comments are sent to the chair of each session via a WLAN hall network. The chair then forwards these questions or comments to the speaker.

You can download the app at:



# GENERAL INFORMATION

## Congress Counter

### Fast Lane

For the first time, registered congress participants that have fully paid their registration fee will be offered a fast lane.

Registration terminals are located in the wardrobe area in the entrance foyer (red side). Congress participants may print out their congress badge by scanning the barcode of their confirmation email.

### Opening hours Congress Counter:

Tuesday	26 Nov 2013	18.00–21.00 h
Wednesday	27 Nov 2013	07.30–18.00 h
Thursday	28 Nov 2013	08.00–18.00 h
Friday	29 Nov 2013	08.00–18.00 h
Saturday	30 Nov 2013	08.00–16.00 h

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dgppn13@cpo-hanser.de

Please note that it may take up to 60 minutes to receive your congress materials on Wednesday morning.

## Congress Kindergarten

The DGPPN in conjunction with Kinderinsel Berlin ([www.kinderinsel.de](http://www.kinderinsel.de)) is offering experience-based child care and creative learning workshops free of charge during the congress for children of registered congress attendees.

### Opening hours:

Wednesday	27 Nov 2013	07.30–19.30 h
Thursday	28 Nov 2013	08.00–19.30 h
Friday	29 Nov 2013	08.00–19.30 h
Saturday	30 Nov 2013	08.00–17.30 h

## Congress Language

The official congress language is German. Sessions that are marked with **E** will be available in English. Sessions marked with **G** will be simultaneously translated:

**G→D** English › German

**D→E** German › English

**D↔E** German › English/English › German

## Congress Venue

Internationales Congress Centrum ICC Berlin

Main Entrance:

Neue Kantstraße/Messedamm

14055 Berlin, Germany

## DGPPN Booth and Lounge

The booth of the German Association for Psychiatry, Psychotherapy and Psychosomatics (DGPPN) will once again be located in the bridge foyer and will serve as a meeting point for all young psychiatrists.

### Opening hours:

Wednesday	27 Nov 2013	10.00–18.00 h
Thursday	28 Nov 2013	10.00–18.00 h
Friday	29 Nov 2013	10.00–18.00 h
Saturday	30 Nov 2013	10.00–14.00 h

## Disclosure Information

Following the recommendation of the German Medical Association (Bundesärztekammer) all chairs, speakers and poster presenters were asked to fill out a disclosure form revealing their financial or other relationships that could influence the content of their presentation.

## Exhibitions

### Opening hours:

Wednesday	27 Nov 2013	09.00–18.00 h
Thursday	28 Nov 2013	09.00–18.00 h
Friday	29 Nov 2013	09.00–18.00 h
Saturday	30 Nov 2013	09.00–14.00 h

## Technical Exhibition

Parallel to the congress, the technical exhibition will take place in the adjacent exhibition halls 12, 13 and 14.1. For a list of exhibitors and the exhibition floor plan, please see page 314.

## Poster Exhibition

Posters will be displayed from Thursday, 28 November, until Saturday, 30 November in Hall 15.1. The poster exhibition is sorted by thematic groups.

There will be poster tours from 13.30-15.00 h on Thursday, 28 November, and Friday, 29 November, that will be guided by a chair person.

Poster authors were asked to upload a poster handout (PDF format). Attendees may print out the provided poster handouts on-site or send themselves an email.

For the first time, poster authors had the opportunity to upload an electronic poster (ePoster). There will be terminals in Hall 15.1 where attendees can view ePosters.

On Wednesday, 27 November, Thursday, 28 November, and Friday, 29 November, at 13.00 h examples of ePoster and new presentation possibilities will be presented in Hall 15.1. ePosters will become the new and innovative way to present posters at scientific congresses.

## Job market for Hospitals and Clinics

Psychiatric clinics and educational institutions will present themselves from Wednesday to Saturday in a poster exhibition in the main foyer of the ICC Berlin in order to provide information about future perspectives, qualification opportunities and job openings. Contact persons of each clinic or institution will be available on all three congress days at specific times to answer questions during moderated poster walks.

### Opening hours:

Wednesday	27 Nov 2013	12.30–13.30 h
Thursday	28 Nov 2013	12.30–13.30 h
Friday	29 Nov 2013	12.30–13.30 h

## Reliability for children **page 109**

Exhibition sponsored by the Youth Welfare Association AMSOC e.V. for children with parents experiencing mental illness.

Wednesday to Saturday | Main Foyer

## Where did all the colours go? **page 109**

Photography exhibition by Nora Klein

Wednesday to Saturday | Main Foyer

## Get-Together/Congress Party

All congress participants are cordially invited to take part in the Get-Together, which will take place on 27 November 2013 at 19.00 h at the middle foyer of the ICC Berlin.

At 21.00 h we invite you to relax and enjoy an evening of pleasant ambiance with music and dance by DJ Bananarama. Please be advised that we offer drinks on a self-pay basis.

## Internet Service Center

The Internet Service Center, sponsored by **Otsuka Pharma GmbH**, is located in Hall 12 and 13.

Free WiFi access is available in the foyers of the ICC Berlin and the exhibition halls.

**SSID: ICCWIFI**

**Password: DGPPN2013**

## Lunch

For congress participants a lunch snack will be provided free of charge in the exhibition Hall 10.1 on Wednesday, Thursday, Friday and Saturday from 12.00-14.00 h.

## Media Center

The Media Center is located in the main foyer of the ICC Berlin. Speakers are asked to hand in their presentation on a CD-ROM, USB stick or notebook at the latest 3 hours prior to their presentation. Our technical staff will be glad to assist you. The presentation will be transferred to the central congress server and will be available on a special congress notebook in the hall of the presentation. Due to time and technical reasons we kindly ask speakers not to use their own notebook.

### Opening hours:

Tuesday	26 Nov 2013	18.00–21.00 h
Wednesday	27 Nov 2013	07.30–19.00 h
Thursday	28 Nov 2013	07.30–19.00 h
Friday	29 Nov 2013	07.30–19.00 h
Saturday	30 Nov 2013	07.30–13.30 h

# GENERAL INFORMATION

## Name Badges

All participants are asked to wear their name badge at all times during the Congress. Security staff have the obligation to enforce the wearing of the badges. The colours of the name badge have the following significance:

- Orange > DGPPN-Member,  
ÖGPP-Member,  
SGPP-Member,  
DGKJP-Member
- Blue > Non-Member
- Green > Exhibitor
- Red > Staff
- Olivgreen > Press

The full registration fee must be paid to acquire a new name badge in the event that the name badge is lost.

## Parking

A sufficient amount of parking spaces is available at the parking lot of the ICC Berlin.

Parking fee: EUR 7,50 per day.  
EUR 2,00 per hour

## Press Office

The DGPPN press office is located in room 48. Please have a look at page 104 for more information.

## Programme Changes

The DGPPN reserves the right to make any necessary changes to the programme at short notice. There will be no refund, full or partial, of registration fees for cancelled presentations or changes to the programme.

## Taxis

Taxis are available on the lower level of the ICC Berlin.

Phone:

+49 – (0)30 – 263 000

+49 – (0)30 – 210 202

AUTORENINDEX  
*AUTHOR INDEX*  
J



- A**
- Aaron, Prosser 265
- Abdel-Hamid, Mona 189, 244, 263
- Abel, Ted 194, 388
- Abele, Harald 253
- Abendschein, Bernd 288
- Abler, Birgit 196, 262, 266, 269
- Aciksöz, Güven 238
- Acker, Jens 132, 288
- Ackermann, Christian 275
- Ackermann, Patricia Helena 264
- Adam, Dorothea 243
- Adamidis, Melanie 240, 381
- Ademmer, Karin 251
- Aden, Jan 183, 238
- Aderhold, Volkmar 145
- Adeyi, Ben 263
- Adler, Georg 228, 234, 244, 255
- Adler, Lothar 136, 377
- Adli, Mazda 116, 126, 166, 193, 200, 218, 220, 392
- Agorastos, Agorastos 190, 267, 387
- Agyemang, Alex 270
- Ahlers, Eike 284
- Ahrens, Ruth C. 134, 211
- Aichele, Valentin 196
- Aichert, Désirée 236
- Aigner, Martin 252
- Ajdacic-Gross, Vladeta 203, 240, 254
- Al-Ameery, Ines 251
- Albert, Anna 203, 390
- Alberti, Astrid 236
- Albrecht, Jakob 254
- Albrecht, Walter 308
- Alder, Judith 118
- Aldridge, David 216
- Aleman, Andre 174
- Alexander, Nina 128, 248
- Alexopoulos, Panagiotis 225
- Algermissen, Christian 194, 286
- Allert, Roman 259
- Alm, Barbara 169, 215
- Almeida, Jorge 152, 218, 392
- Alpen, Ulf 248
- Altar, Anthony 180, 385
- Althaus, David 284
- Altmann, Uwe 128, 134, 251, 264
- Altorfer, Andreas 154, 246, 265
- Alvarado, Ruben 153, 380
- Alvarez-Fischer, Daniel 145
- Alzheimer, Christian 308
- Amador, Maria del Mar 235
- Ambree, O. 166
- Amering, Michaela 52, 127, 149, 184, 220, 361, 380
- Amlacher, Juliane 85, 104, 129, 141, 282
- Anderson, Lucy A. 264
- Anderson-Schmidt, Heike 133
- Anderson, Henrik 270
- Andre, Julia 259, 389
- Andreas, Sylke 269
- Andreou, Christina 247
- Andreula, Frauke 270
- Angeli, Efrosyni 243
- Anger, Anina 253
- Angerer, Peter 202
- Angermeyer, Matthias 183, 185, 198, 220, 386
- Annen, Saskia 200
- Antipova, Olga 223, 393
- Antoni, Julia 284
- Antoniadis, Sofia 273
- Appelt, Stefan 224
- Arends, Sebastian 251
- Arenz, Dirk 198, 289
- Armbrust, Michael 148, 164
- Armgar, Carina 253
- Arnold, Detlef 199
- Arnold, Jennifer 218, 259, 389, 392
- Arntz, Arnoud 117
- Arolt, Volker 150, 152, 166, 167, 186, 187, 201, 205, 206, 212, 218, 235, 239, 247, 254, 310, 390, 392
- Arzberger, Thomas 235
- Aschenbrenner, Steffen 243, 288
- Aspan, Nikoletta 243
- Assion, Hans-Jörg 132, 239, 260, 271
- Assmann, Anne 181, 232, 395
- Aston, Jacqueline 168, 383
- Aubin, Henri-Jean 272
- Augenaite, Judita 217, 392
- Ayhan, Hadice 126
- B**
- Babitsch, Birgit 252
- Babushkina, T. 223, 393
- Baccara, Stefano 288
- Bach, Christiane 268
- Bachmann, Monica 208
- Bachmann, Reinhard 149
- Bachmann, Silke 117
- Backasch, Bianca 173, 237
- Backes, Heide-lore 247, 267
- Backes, Volker 203
- Backmund, Markus 199
- Backmund-Abedinpour, Stephanie 284
- Bader, Heini 275
- Baghai, Thomas 192
- Baglioni, Chiara 262
- Bagusat, Christiana 250
- Baier, Dirk 256
- Baier, Paul Christian 179
- Bailey, Sue 186, 386
- Baioui, Ali 160
- Bajbouj, Malek 139, 212, 239, 259, 280
- Baker, Ross A. 270
- Balazs, Judit 120, 374
- Baldinger, Pia 240, 382
- Baldofski, Sabrina 192
- Ballhausen, Felix 179
- Balschat, Johannes 249
- Balz, Johanna 247, 256
- Balzer, Carsten 140, 378
- Balzer, Katrin 238
- Banas, Roman 210
- Banaschewski, Tobias 130, 135, 161, 243, 267, 268
- Bandelow, Borwin 174, 181, 242, 271, 309, 385



Bangratz, Stefan	164	Becktepe, Jos Steffen	234, 267
Banneck, Gabriela	257	Beddies, Thomas	137
Bannenber, Britta	136, 377	Beer, Katja	150
Bantel, Antonia	253	Begemann, Martin	138, 203, 226
Banzer, Winfried	251	Behrens, Johann	120, 178
Bänziger, Sulin	264	Beil, Julia	209, 391
Baranyi, Andreas	259, 260, 389	Beine, Karl H.	120, 176, 205
Barat, Martina	234	Beitel, Christoph	252
Barbian, Guido	261	Bektas, Miriam	255
Barczyk, Adam	264	Belke, Marcus	267
Bär, Karl-Jürgen	149, 196, 234, 238, 242	Bellelli, Giuseppe	250
Bark, Christine	206	Bellinger, Maria Magdalena	189
Barman, Adriana	127, 181, 232, 395	Beloskurskaya, O.	218, 392
Barnikol, Utako B.	142	Belsky, Maria	132
Barocka, Arnd	281	Bender, Matthias	172, 243, 269
Barroeta Hlusicke, Elizabeth	209, 391	Bender, Stefan	245
Barteld-Paczkowski, Dagmar	72, 155	Benecke, Andrea	282
Barth, Anja	247	Benesch, Gerd	234
Barth, Gottfried Maria	236, 240, 269	Bengesser, Susanne	246
Barth, Jens	261	Bennefeld-Kersten, Katharina	190, 387
Barth, Thomas	154, 274	Benninghoff, Jens	120
Barthel, Bettina	259	BenOmar, Nagia	271
Bartl, Jasmin	269	Berezovskaya, N.	223, 393
Bartlett, Peter	186, 386	Berg, Daniela	120, 245, 247
Bartolovic, Marina	247	Bergelt, Corinna	127
Bartova, Lucie	238	Bergemann, Niels	180, 186
Bartsch, Dusan	269	Berger, Christoph	249, 263
Bartsch, Gabriele	119	Berger, Hartmut	172, 238, 286
Baschin, Kirsten	95, 229	Berger, Matthias	53, 155, 187, 211
Basdekis-Jozsa, Raphaela	201	Berger, Sandy	238, 242
Basmanav, Buket F.	268	Berger, Thomas	118
Bässler, Franziska	87, 92, 158, 190, 381	Berger, Uwe	122
Batra, Anil	134, 143, 183, 207, 214, 215, 236, 253, 293, 297, 396	Berges, Ursula	203
Bauer, Michael	126, 133, 154, 158, 179, 187, 205, 217, 227, 280, 292, 295, 380, 396	Berge, Ulrich von dem	306
Bauer, Peter	251	Berghändler, Torsten	282
Bauer, Stephanie	122	Berghöfer, Anne	189
Baumann, Amelie	178	Bergink, V.	166
Baumann, Julia	203, 390	Bergmann, Frank	61, 119, 142, 143, 156, 168
Baumberger, Andrea	157	Bergmann, Melanie	266
Baumeister, Sarah	267	Bergmann, Thomas	181, 243
Baumert, Jens	166	Bergmans, Paul	237, 257, 258
Baumgardt, Johanna	195	Bergomi, Claudia	259
Baumgart, Nadja	234, 255	Bergs, René	167, 231
Baumgartner, Gabriela	215	Berk, Michael	158
Baumgartner, Ildiko	123	Berkhoff, Magdalena	261
Baumgärtner, Jessica	250	Berking, Matthias	125, 126, 187, 238
Baumgartner, Susanne	218, 237, 257, 258	Bermejo, Isaac	177, 189, 195
Baum, Georg	137	Bermphol, Felix	185, 243, 247, 249, 262
Bäumli, Josef	138, 154, 172, 292, 396	Bernegger, Guenda	116, 205
Baune, Bernhard	205	Berner, Michael M.	125, 126, 199, 210, 225, 256, 293, 297, 397
Bauriedl-Schmidt, Christine	203, 238, 240, 260, 381, 389, 390	Berninger, Ursula	273
Bausch-Hölterhoff, Josef	272	Bernstein, Hans-Gert	153
Baus, Nicole	269	Berres, Manfred	255
Bazin, Pierre-Louis	267	Bertsch, Katja	150, 173, 192, 203, 242, 390
Beblo, Thomas	238	Besong Agbo, Daniela	265
Bechdorf, Andreas	114, 131, 132, 154, 158, 193, 203, 214, 218, 228, 252, 388	Beste, Christian	135
Bechter, Karl	200, 390	Better, Julian	265
Beck, Anne	163, 210, 246, 247, 248, 256, 382	Beutel, Martin	170
Beck, Stefan	191	Beutler, Jürg	282
Beck, Stefanie	264	Bewernick, Bettina H.	261
Becker, Clemens	158	Beyen, Anne	189
Becker, Thomas	116, 120, 123, 127, 138, 163, 167, 204, 216, 229, 252, 293, 296, 383, 396	Beyer, Isaak	246, 269
Becker, Tim	268	Beyreuther, Konrad	202
Beckmann, Antje	255	Bezborodovs, Nikita	217, 276, 392
Beckmann, Christian	180	Bez, Yasin	237, 257, 258
		Bhugra, Dinesh	61, 140, 163, 168, 367, 378, 382, 383
		Bichescu-Burian, Dana Maria	273
		Bickel, Horst	172, 219, 255
		Biedermann, Falko	218, 257
		Biedermann, Sarah	255

Biener, Elena	250	Borck, Cornelius	140
Bierbaum, Anna-Lena	127, 189	Borel, Patricia	291
Biermann, Teresa	199	Borgwardt, Stefan	152, 159, 188, 386
Biesold, Karl-Heinz	285	Borker, Walter	274
Biland, Francois	286	Bormuth, Matthias	156, 170
Bilgic, Hüsnüye	276	Born, Christoph	241
Bilke-Hentsch, Oliver	107, 128, 167	Bornheimer, Barbara	204
Bilkenroth, Barbara	211	Bosch, Oliver G.	157
Binder, Elisabeth	133, 165, 179, 205, 292, 295, 396	Boscher, Oliver	242
Biniash, Oliver	292, 294, 396	Bossle, Michael	149, 211
Birkenhäger, T. K.	166	Bottani, Armand	267
Birker, Thomas	189	Böttcher, Michael	236, 272
Birnbacher, Dieter	125, 137, 142	Bottlender, Ronald	133
Biscaldi, Monica	143	Bozsik, Csilla	243
Bischof, Gallus	118	Bracik, Joanna	147, 250, 252, 379
Bischoff, Johannes Georg	72, 155	Brady, Roseanna	245, 271
Bischoff, Sophie	157	Brähler, Elmar	138, 177, 183, 238, 254
Bisenius, Sandrine	247	Brakemeier, Eva-Lotta	169, 175, 187, 238, 242, 259, 284, 287
Biskup, Saskia	235	Bramesfeld, Anke	171, 198
Bitonti, Giovanni	119	Brand, Matthias	135, 242, 243
Bittner, Robert	174	Brand, Ralf	163
Björkdahl, Anna	276	Brand, Serge	115
Björner, Annika	257	Brandeis, Daniel	135, 267
Bladström, Anna	272	Brandl, Eva	174, 179, 284, 385
Blase, Torsten	141	Brandl, Regina	202, 270
Blasius, Elias	250	Brandt, Stephan	90, 176
Blecker, Carlo	182	Brandt, Wolfram	273
Bleich, Stefan	67, 69, 121, 142, 153, 183, 201, 212, 215, 236, 256, 267, 268, 390	Bratek, Agnieszka	209, 264, 391
Blessing, Andreas	237	Brauer, Benjamin	240, 382
Blomeyer, Dorothea	267	Braukhaus, Christoph	238
Blüml, Victor	254	Braun, Birgit	275
Bluschke, Sarah	124, 213, 259	Braungardt, Tanja	258
Bochow, Michael	164	Bräunig, Peter	260
Böcker, Maren	143, 249, 254	Bräuning-Edelmann, Michael	177
Böckers, Tobias M.	264	Braus, Dieter F.	188, 286
Böckler, Nils	146	Breger, Viola	238
Bock, Thomas	123, 127, 152, 185, 198, 199, 204, 252, 253, 258	Breier, Marion	241, 246
Bodatsch, Mitja	258	Breitbart, Jörg	273
Bodda, Chiranjeevi	203	Breitenecker, Robert	259, 389
Bödeker, Katja	249	Brenk, Peter	249
Boecker, Regina	267	Brenk-Franz, Katja	128
Boelmans, Kai	234, 269	Brenner, Gabriele	72, 155
Boerner, Reinhard J.	253, 284	Brettschneider, Christian	273
Bögershausen, Stephan	122, 176, 200, 211, 292, 295, 396	Breuninger, Linda	246
Bogerts, Bernhard	58, 148, 153, 167, 200, 272, 364, 379, 390	Briegel, Wolfgang	249
Bohleber, Laura	239, 249, 269, 270	Brieger, Peter	151
Bohlken, Jens	156, 217	Briken, Peer	94, 114, 199, 216, 225, 293, 297, 397
Bohlmann, Katrin	248	Briner, David	215
Böhm, Karsten	286	Brocke, Burkhard	238
Böhme, Rebecca	235, 257	Brockhaus-Dumke, Anke	151, 270, 271
Bohn, Francesca	218, 238	Broekema, Walter	230, 394
Bohus, Martin	56, 86, 92, 96, 108, 114, 124, 128, 136, 148, 151, 168, 175, 176, 182, 191, 225, 230, 242, 243, 296, 376, 397	Bröhl, Henrike	265, 266
Bokemeyer, Stefanie	140	Broich, Karl	150, 175, 197, 250
Böker, Heinz	164, 239, 249, 269, 270	Brokatzky, Stefan	306
Boks, Marco P. M.	268	Bromberg, Uli	188, 386
Bölte, Sven	128	Bronisch, Thomas	220
Bolz, Robert	262	Brose, Nils	226
Bommers, Michael	57, 136, 363, 377	Bruchmann, Gaby	120
Bonk, Magdalena	240, 260, 382, 389	Brück, Carolin	143, 196
Bonnet, Udo	170	Brückl, Tanja	192
Borbé, Raoul	177, 184, 292, 294, 396	Bruckmayer, Ellen	134
Borchardt, Ulrike	266, 268	Brückner, Burkhart	217
Borck, Amelie	174	Brückner, Katja	166
		Brüggemann, Philip	186
		Brugger, Peter	118
		Brühl, Annette B.	239, 243, 247, 262, 266
		Brunkhorst, Frank M.	251
		Brunnauer, Alexander	162, 250, 288
		Brunner, Jürgen	144, 175
		Brunner, Romuald	119, 135, 243, 244, 374

- Brütt, Anna Levke 231, 269  
 Bschor, Tom 126, 137, 220, 238, 284  
 Büchel, Christian 188, 386  
 Buchheim, Anna 203, 238, 240, 381, 390  
 Buchheim, Peter 288  
 Buchholz, Angela 141, 210  
 Buchkremer, Gerhard 228  
 Buchli-Kammermann, Jacqueline 262  
 Buchmann, Arlette F. 135, 267  
 Büchtemann, Dorothea 190, 195  
 Buchwald, Carolin 120, 245, 247  
 Buck, Alfred 219, 232, 395  
 Budczies, Jan 128  
 Bühren, Katharina 241  
 Bulla, Jan 178  
 Bullenkamp, Jens 184  
 Bullinger, Monika 231  
 Bulska, Weronika 260, 389  
 Burchard, Falk 231  
 Burger, Christian 251  
 Burger, Pascal 261  
 Burghardt, Roland 241  
 Burgmer, Ramona 192  
 Burian, Ronald 199, 286  
 Burkart, Martin 264  
 Burkhardt, Sven 263  
 Burns, Alistair 217  
 Busch, Markus 222  
 Busch, Niko 185  
 Busche, Marc Aurel 56, 136, 158, 377, 381  
 Buschert, Verena 250  
 Butkova, Tatiana 190, 387  
 Bütterich, Annekatrin 189  
 Büttner, Matthias 260, 389  
 Butz, Marius 266
- C**
- Caballer-García, Javier 264  
 Cabanas, Normen 243  
 Cadi-Soussi, Nadia 258  
 Calhoun, Vince 203  
 Calker, Dietrich van 289  
 Campanella, Salvatorec 246  
 Carina, Armgart 155, 211  
 Carl, Gunther 130  
 Carli, Vladimir 119, 135, 244, 374  
 Carolus, Almut 237, 258  
 Carpiello, Bernado 237, 257, 258  
 Carson, William H. 270, 271  
 Carvalho, L. A. 166  
 Caspar, Franz 135  
 Cattapan, Katja 247, 262  
 Ceglarek, Uta 214  
 Cerisier, Christina 273  
 Chanan, Andrew 158  
 Charlet, Katrin 210, 247  
 Chen, Frances 188  
 Chen, Yaozhu J. 243  
 Cherubin, Pierre 237, 257, 258  
 Christensen, Lisbeth Hjorth 256  
 Christian, Mette 244  
 Christian, Seeher 239  
 Christiansen, Hanna 164  
 Chrobok, Agnieszka 265  
 Chrustaleva, Nelli 132  
 Chrysanthou, Christos 260, 287  
 Chung, Ka Chun 218, 392  
 Cichon, Sven 179, 182, 224, 268  
 Ciechanowski, Paul 128  
 Cieplinska-Legge, Ewa 131, 244  
 Cieslik, Edna 174  
 Civil, Richard 263
- Clark, Campbell 129, 376  
 Clas, Sabine 242  
 Claus, Matthias 253  
 Clemens, Benjamin 167, 267  
 Clement, Hans-Willi 246, 250  
 Cleppien, Dirk 194, 388  
 Cleveland, Helen-Rose 280  
 Clos, Mareike 174  
 Coghill, David 263  
 Cohen Kadosh, Kathrin 230, 394  
 Cohrs, Stefan 227, 288  
 Colla, Michael 166, 215  
 Collip, Dina 211  
 Colom, Joan 119  
 Comijs, Hannie C 237  
 Conca, Andreas 124, 185, 202, 259, 285, 292, 295, 389, 396  
 Condic, Mateja 269  
 Conrad, Ines 216  
 Coogan, Andrew 263  
 Corbisiero, Salvatore 244, 263  
 Cordes, Joachim 188, 214, 250, 280  
 Correll, Christoph U. 146, 179, 187, 205, 309, 310, 379  
 Corrieri, Sandro 216  
 Corrivetti, Giulio 257  
 Corten, Philippe 246  
 Cosar, Behcet 257, 258  
 Cotton, Susan Maree 158  
 Craig, Thomas 195, 388  
 Crönlein, Tatjana 288  
 Crosby, Ross 192  
 Csomor, Philipp A. 271  
 Cummings, Jeffrey 250  
 Cuntz, Ulrich 94, 127, 147, 222  
 Curschellas, Jan 119, 306  
 Curtice, Tammy G. 243  
 Cyranka, Katarzyna 147, 379  
 Czaja, Mario 193  
 Czekaj, Agata 273  
 Czisch, Michael 265
- D**
- Dahm, Liane 138  
 Dahmen, Brigitte 246  
 Dahmen, Norbert 188, 272  
 Dal-Bianco, Peter 228  
 Dalrozzo, Tanja 203, 240, 381, 390  
 Damásio, António 46, 121, 356, 374  
 d'Amelio, Roberto 172  
 Dames, Sibylle 243  
 Danek, Adrian 235  
 Dangel, Björn 265  
 Daniels, Christine 245  
 Danker-Hopfe, Heidi 186  
 Dannecker, Karin 127  
 Danner, Franziska 271  
 Dannlowski, Udo 124, 152, 174, 181, 207, 210, 218, 239, 247, 258, 392  
 Danuta, Wasserman 135  
 Davis, John 116  
 de Boer, Wout 208  
 de Bruijn, Ellen 232, 395  
 Dechent, Peter 267  
 Deckert, Beate 284  
 Deckert, Jürgen 171, 179, 201, 205, 206, 212, 245, 246, 267, 292, 295, 385, 390, 396  
 Dedner, Christopher 245  
 Deest, Harald 236  
 Degano-Kieser, Luciana 252  
 Degenhardt, Franziska 224, 238, 267, 268  
 Degner, Detlef 271, 274, 289  
 de Graaf, Petra 268

Deibebe, Anna	127	Döpfner, Manfred	161
Deisenhammer, Eberhard A.	254	Döring, Angela	159, 292, 294, 396
Deister, Arno	51, 63, 72, 123, 137, 142, 155, 161, 189, 196, 205, 226, 280, 360, 394	Dormann, Christof	251
De Jongh, Perry	131	Dorn, Christina	208
Dekker, Arne	199	Dörr, Peggy	127
de la Fontaine, Larissa	241	Dörrie, Nora	164
Delahaye, Marcel	240	Dorsch, Valenka	211, 240
Delazer, Margarete	266	Dosen, Anton	128
Dembinska, Edyta	147, 261, 379	Doudet, Doris	129, 376
Demiralay, Cüneyt	267	Drach, Lutz Michael	288
Demling, Joachim	221	Draeger, Marcus	266
Dennert, Gabriele	140, 378	Drangmeister, Annegret	254
Denoix, Sebastian	236	Drapaniotis, Philipp Manuel	169, 244, 245
Depping, Malte S.	265, 266	Dreier, Adina	226, 234
Derntl, Birgit	166, 203, 218, 392	Dresler, Thomas	248, 267
de Roo, Mariska	230, 394	Dreßing, Harald	173, 192, 282
Deserno, Lorenz	174, 235, 236, 257, 270	Drevets, Wayne	260, 389
Dettenborn, Lucia	190, 387	Drexhage, H. A.	166
Deuschle, Michael	86, 122, 144, 151, 179, 191, 201, 224, 390	Driessen, Martin	160, 221, 238, 293, 296, 397
de Vries, Hein	236	Drobetz, Reinhard	234
de Vries, Petrus	269	Drzegza, Alexander	266
Dewitz, Julia	135	Dubber, Star	269
de Zeeuw, Justus	236	Düclos, Denise	255
de Zwaan, Martina	136, 192, 221, 225, 268, 376	Dudeck, Manuela	272
Di Benedetto, Barbara	271	Dudenhöffer, Sarah	253
Dickov, Aleksandra	236	Duka, Dora	242
Diefenbacher, Albert	128, 176, 181, 199, 243, 274, 286	Dukart, Jürgen	266
Diehl-Schmid, Janine	235, 266	Düsterher, Pia	251
Diekhof, Esther	267	Duvarci, Sevil	165
Diering, Eva	117	Dyba, Janina	236
Diers, Kersten	173, 238	Dyrba, Martin	210
Diesch, Katharina	258, 274	Dziobek, Isabel	53, 128, 143, 219, 243, 393
Dieterich, Marianne	265	<b>E</b>	
Dietmaier, Otto	270	Eberlein, Christian	256
Dietrich, Detlef E.	119, 292, 295, 396	Ebert, David	187
Dietsche, Bruno	247, 267	Ebner-Priemer, Ulrich	148, 208, 209
Dietz, Pavel	250	Eckermann, Gabriel	284, 287, 289, 292, 396
Dietzek, Maren	219	Eckert, Anne	115
Dillo, Wolfgang	244	Eckle, Isolde Susanne Elisabeth	273, 275
Dingoyan, Demet	95, 139, 229	Edlinger, Monika	154, 218, 237, 258
Dinov, E.	218, 392	Eff, Florian	267
Di Pauli, Jan	164, 185	Eggermann, Thomas	267
Dirmaier, Jörg	185, 189, 199	Eggert, Lucas	135
Distler, Guido	250	Egorov, Aleksei Y.	132
Dittmann, Ralf W.	263	Ehlis, Ann-Christine	246, 264, 265
Dittmann, Volker	240, 263, 272	Ehrenreich, Hannelore	138, 203, 226
Dittrich, Katja	249	Ehrensperger, Michael	255
Dixius, Andrea	190, 242, 387	Ehrig, Christian	286
Dlugaj, Martha	244, 263	Ehrlich, Stefan	203, 241, 242, 246
Dobel, Christian	167, 181	Eichenberg, Christiane	183, 236, 238, 240, 241
Dobmeier, Matthias	287	Eichler, Tilly	147, 226, 234
Dobretsov, G. E.	223, 226, 393	Eickhoff, Simon	118, 174, 180, 185, 213, 281
Dodel, Richard	144	Eide, Geir Egil	261
Doering, S.	254	Eidner, Ines	265
Doerr, Peggy	189	Eifler, Sarah	257
Dogan, Imis	268	Eikelmann, Bernd	252, 273, 284
Dohrenbusch, Ralf	192, 208	Eikmeier, Gisbert	235, 252
Dohrmann, Katalin	203, 390	Einsle, Franziska	151
Doka, Siiri Ann	221	Eisele, Marion	172
Dold, Markus	270	Eisenegger, Christoph	157
Domes, Gregor	188, 249, 259	Eisold, Julia	176
Domin, Sabine	251	Eisold, Ulrike	238
Domschke, Katharina	85, 129, 167, 201, 205, 212, 231, 267, 390	Eitel, Daniel	240, 382
Donath, Carolin	256	Elbau, Immanuel	265
Donges, Uta-Susan	210	Elbert, Thomas	198, 203, 390
Donix, Katharina	245	Elena, Valzdorf	276
Donix, Markus	245	Elgeti, Hermann	152, 184
		Ellendt, Sinika	219
		Elsässer, Marina	263
		Elsen, Susanne	275
		Elsner, Stefan	188

Elstrodt, Linda	241	Fay, Doris	126
Elzinga, Bernet	148, 159, 381	Feddern, Richard	181
Emeljanova, Irina	223, 393	Fegert, Birgit	263
Emeny, Rebecca	166, 219	Fegert, Jörg M.	115, 122, 130, 146, 164, 191, 272
Emmerich, Gabriele	286	Fehler, Marcel	245
Emons, Barbara	155, 273	Fehr, Christoph	256
Empl, Laura	248	Fehr, Ernst	50, 190, 360, 387
Emrich, Hinderk Meiners	194	Fehrenbach, Rosa Adelinde	199
Ende, Gabriele	230, 394	Fehrmann, Sabrina	186
Endrass, Jérôme	208	Feige, Bernd	166, 248, 249, 260
Engel, Alice	272	Felber, Werner	187
Engel, Vera	187, 238, 259	Fellgiebel, Andreas	210, 225, 235, 281
Engelhardt, Liliana	264	Fellinger, Johannes	252
Engert, Veronika	236	Fellinger, Matthäus	252, 274
Englbrecht, Matthias	264	Ferber, Reinhild	159
Englisch, Susanne	257	Fernández, Guillén	218, 392
Eppinger, Ben	256	Fernando, Silvia	238
Epple, Franziska	223	Feroz, Farah Shahnaz	247
Erb, Michael	226, 234	Feuerstake, Maria	251
Erhardt, Angelika	212	Fichter, Manfred	52, 56, 127, 136, 149, 222, 293, 296, 376, 397
Eriksson, Elias	66, 191, 369, 387	Fiebig, Jana	252
Erim, Yesim	143	Fiedler, Peter	162, 209, 382
Erk, Susanne	125, 207, 232, 375, 395	Fiedler, Rolf	126
Ernst, Jutta	239, 249, 269, 270	Fiedler, Ute	120
Ertl, Georg	182	Fieker, Martina	238
Ertl, Mira	150, 254	Fiess, Johanna	261
Ertl-Wagner, Birgit	139, 265	Filippi, Massimo	210, 225
Eschweiler, Gerhard	120, 245, 247	Filsinger, Barbara	122
Esefeld, Max	248	Finger, Bettina	275
Eser-Valeri, Daniela	265	Fink, Andreas	265
Eskofier, Bjoern	261	Fink, Gereon R.	254
Esposito, Fabrizio	272	Finkel, Lisa	267
Esselmann, Hermann	235	Finkelmeyer, Andreas	203
Esser, Günter	168	Fischer, André	133, 164, 194, 388
Eßer, Kerstin	143	Fischer, Anja	166, 208
Ethofer, Thomas	196	Fischer, Charlotte	192
Ettl, Anne-Kathrin	274	Fischer, Felix	189
Etzersdorfer, Elmar	220	Fischer, Gabriele	173, 384
Everaerd, Daphne	218, 392	Fischer, Gloria	135, 244
Evers-Grewe, Beatrix	215	Fischer, Katrin	208
Everts, Sarah	226	Fischer, Malte	234
Ewers, Michael	210	Fischer, Peter	234
Ewing, Samuel G.	226	Fischer, Susanne	263
		Fischer, Yolanda	258
		Fitz, Werner	257, 275
<b>F</b>		Flammer, Erich	184, 242, 243, 253, 274, 386
Faber, Pascal	246	Flechtner, Hans-Henning	127
Fabin, Kalina	262	Fleischhacker, W. Wolfgang	154, 180, 218, 237, 257, 270, 271
Fabisch, Hans	275	Fleischhaker, Christian	143, 250
Fabisch, Karin	275	Fleischhauer, Christian	128
Fabri, Christoph	270	Fleischmann, Heribert	118, 210, 214, 236, 293, 297, 396
Falch, Reingard	251		
Falkai, Peter	49, 50, 53, 59, 62, 65, 67, 69, 70, 71, 133, 138, 139, 146, 149, 155, 156, 167, 174, 182, 190, 191, 198, 203, 204, 212, 219, 227, 240, 242, 249, 250, 260, 359, 360, 365, 368, 379, 380, 381, 383, 385, 387, 389, 390, 393, 394	Flemming, Eva	246, 248
		Flöge, Bianka	151
Falke, Dorothea	261	Flohr, Luisa	241, 246
Falkenberg, Irina	170, 265, 266	Florange, Barbara	234
Falkenstein, Sigrid	117	Flor, Hertha	268
Fallgatter, Andreas J.	120, 157, 161, 197, 223, 226, 234, 245, 246, 247, 264, 265, 266	Florian, Holsboer	265
		Florian, Piepka	243
Fallon, Maura	270	Foelsch, Pamela	224
Faltnat, Maximilian	267	Folgmann, Stefanie	257
Fangerau, Heiner	227	Foltys, Stephanie	270
Fangmeier, Thomas	169, 259	Forbes, Robert A.	270, 271
Farrell, Joan	117	Forkmann, Thomas	143, 211, 249, 254, 276
Faßbinder, Eva	117, 123, 208, 289, 290	Forquignon, Ilka	235
Fatfouta, Ramzi	254	Förstl, Hans	132, 144, 158, 198, 226, 255, 289, 308, 381
Faulbaum-Decke, Wolfgang	124	Forstmeier, Simon	225, 234
		Forstner, Andreas J.	238
		Frajo-Apor, Beatrice	120

- Frances, Allen J. 55, 66, 121, 135, 362, 369, 374, 376  
 Frank, Fabian 211  
 Frank, Josef 268  
 Franke, Andreas 213, 250, 392  
 Franke, Gabriele Helga 254  
 Frankhauser, Pascal 270  
 Franz, Harald 120  
 Franz, Michael 115, 164  
 Fransch, Karel 123  
 Frase, Lukas 166, 248, 249  
 Freeman, Natalie 179, 385  
 Freiherr, Jessica 218, 265, 268, 392  
 Freitag, Christine M. 169, 190, 197, 254, 268, 387  
 Freitag, Simone 135  
 Frergsen, Nele 147, 379  
 Frettlöh, Jule 290  
 Freudenberg, Florian 268  
 Freund, Nora 267  
 Frey, Nadja 241  
 Frey, Richard 240, 382  
 Freyberger, Harald J. 125, 130, 146, 165, 192, 203, 212, 249, 266, 293, 296, 375, 390, 397  
 Freyer, Tobias 262  
 Freytag, Antje 251  
 Fric, Mirijam 250  
 Frick, Eckhard 221  
 Fricke, Bianca 264  
 Fricke, Christian 251  
 Fricke, Ruth 196  
 Fridman, Moshe 263  
 Friedel, Eva 163, 210, 270, 382  
 Friederichs, Edgar 263  
 Friedo, Anna-Lena 248  
 Friedrich, Fabian 235  
 Friedrich, Yvonne 241  
 Friedrichs, Anke 210  
 Friedrichs, Benedikt 235  
 Frieling, Helge 122, 201, 236, 256, 267, 268, 390  
 Frisch, Morten 140, 378  
 Frisch, Stefan 235  
 Frischholz, Christian 246, 264, 265  
 Frisoni, Giovanni B. 225  
 Fritsche, Günther 283  
 Fritsch, Rosemarie 153, 380  
 Fritz, Lisa 251  
 Fritze, Jürgen 131, 150, 159, 197, 215, 220  
 Fritzsche, Anja 161  
 Fritzsche, Danny 265  
 Froböse, Teresa 235  
 Frölich, Lutz 189, 250  
 Frommberger, Helena 96, 230  
 Frommberger, Ulrich 160, 228, 243, 285, 293, 296, 397  
 Frotscher, Michael 138  
 Frottier, Patrick 114  
 Fuchs, Harry 198, 221  
 Fuchs, Stefanie 260  
 Fuchs, Thomas 156, 170, 292, 295, 396  
 Führer, Daniel 127, 189, 249  
 Fuhrhans, Christoph 117  
 Funke, Robin 262  
 Furczyk, Karolina 256  
 Fußler, Fabian 265, 266  
 Fuss, Johannes 255  
 Fydrich, Thomas 160, 168, 187
- G**  
 Gäbel, Andrea 150  
 Gabriel, Heinz Eberhard 149  
 Gadoros, Julia 243  
 Gaebel, Wolfgang 55, 59, 69, 71, 108, 115, 135, 149, 156, 162, 168, 186, 204, 222, 227, 280, 362, 365, 376, 380, 383, 386, 391  
 Gaertner, Susanne 245  
 Gaese, Franziska 289  
 Gagern, Charlotte 179, 204, 258  
 Gählsdorf, Claudia 270  
 Gairing, Stefanie 195, 239, 274  
 Galimberti, Daniela 269  
 Gallhofer, Bernd 69, 128, 212  
 Gallinat, Jürgen 139, 209, 216, 247, 256, 257, 377, 391  
 Galling, Britta 204, 257, 258  
 Galvin, James 250  
 Gan, Gabriela 236  
 Gao, Wei 190, 387  
 Gapp, Volker 239  
 Garbers, Neele Torild 274  
 Garbusow, Maria 210  
 Garcia, Claudio 260  
 Garcia, Konstanze 260  
 Garcia, Lidia Segura 119  
 Gartenmann, Roger 119, 306  
 Garthe, Alexander 191, 260, 389  
 Gaser, Christian 219  
 Gass, Natalia 129, 152, 194, 376, 388  
 Gass, Peter 191, 251, 255  
 Gaßmann, W. 172  
 Gastpar, Markus 182  
 Gather, Jakob 132, 137  
 Gaudlitz, Katharina 157  
 Gauggel, Siegfried 143, 249, 254  
 Gaul, Charly 283  
 Gavas, Funda 256  
 Gawron, Christiane 247  
 Gawronski, Astrid 163  
 Gebhardt, Ralf-Peter 130  
 Gebhardt, Stefan 236, 242, 249  
 Gehlen, Rahel 244  
 Gehrige, Holger 236  
 Geisel, Olga 210  
 Geisler, Daniel 241, 242, 246  
 Geissler, Dietmar 72, 148, 227  
 Gellert, Rüdiger 290  
 Gelrich, Lisa 262  
 Genius, Just 235, 246, 255  
 Gensichen, Jochen 128, 251, 264, 273  
 Georgi, A. 273  
 Gerber-Grote, Andreas 153  
 Geretsegger, Christian 239  
 Gerlach, Alexander L. 186, 187  
 Germanavicius, Arunas 217, 392  
 Gerner, Antje 245, 255  
 Gerrens, Uwe 137  
 Gerth, Juliane 208  
 Geschwind, Nicole 211  
 Geyer, Mark 271  
 Geyer, Stefan 240, 267, 381  
 Ghanbari, Meisam 190, 387  
 Ghanizadeh, Ahmad 190, 387  
 Giegling, Ina 249  
 Giersberg, Steffi 195  
 Giesinger, Johannes 260, 389  
 Gietl, Anton 219, 232, 395  
 Gigerenzer, Gerd 121, 375  
 Gilles, Maria 201, 224, 390  
 Giovanoli, Sandra 200, 390

- Gippert, Sabrina 261  
 Gisske, Katharina 235  
 Giupponi, Giancarlo 124  
 Glaeske, Gerd 131  
 Glaesmer, Heide 130, 177, 254, 276  
 Glahn, Alexander 256, 267  
 Glaser, Thomas 147  
 Gleich, Tobias 248, 257  
 Glismann, Stefan 258  
 Glumm, Sarah 246  
 Gmür, Cornel 272  
 Gneiss, Claudia 266  
 Gödde, Susanne 144  
 Godemann, Frank 171, 214, 292, 397  
 Göder, Robert 179, 257  
 Goebel, Rainer 266  
 Goecke, Tamme 147, 379  
 Goesmann, Cornelia 119, 292, 295, 396  
 Gold, Stefan M. 166, 208  
 Golde, Sabrina 246, 248  
 Gollub, Randy 203  
 Golub, Yulia 262  
 Gonther, Uwe 252  
 Gonzalez-Blanco, Leticia 264  
 Gonzalez-Liencre, Cristina 257  
 Gooren, Tina 148  
 Gorbach, Torsten 188  
 Gorbulev, Stanislav 188  
 Görres, Birgit 124  
 Gorsky-Ostmeier, Edelgard 274  
 Görtz, Philipp 204, 251  
 Gos, Tomasz 153  
 Goschke, Thomas 264  
 Gossen, Anna 244  
 Gottschaldt, Edda 183  
 Gottschalk, Anja 287  
 Götz, Thomas 226, 260, 389  
 Gouzoulis-Mayfank, Euphrosyne 125, 176  
 Grabe, Hans-Jürgen 69, 125, 128, 165, 212, 239, 248, 258, 266, 268, 375  
 Grabemann, Marco 189, 244, 263  
 Grabner, Barbara 260, 389  
 Graef-Calliess, Iris T. 195, 207, 292, 294, 396  
 Graf, Anna 179  
 Graf, Erika 215  
 Graf, Heiko 247  
 Graf, Jürgen 251  
 Graf, Marc 240, 272  
 Graf, Michaela 169  
 Graf, Olga 258  
 Graf, William 147  
 Graf von Reventlow, Heinrich 271  
 Grager, Bettina 164  
 Grams, Sabrina 265  
 Gräßel, Elmar 131, 156, 256  
 Grassi, Luigi 126, 375  
 Gravert, Christian 53, 108, 182, 193, 227, 385  
 Grebla, Regina 263  
 Greetfeld, Martin 147  
 Grefkes, Christian 118  
 Greil, Waldemar 153  
 Greinacher, Andreas 248  
 Grempler, Julia 253, 273  
 Greschner, Maren 236  
 Greuß, Marius 124  
 Greve, Nils 116, 143  
 Greven, Peter 243  
 Grimm, Oliver 224  
 Grimm, Simone 152, 164  
 Grimmer, Timo 158, 381  
 Grischke, Joachim 252  
 Grodd, Wolfgang 180  
 Grohmann, Renate 153, 175, 250, 271, 289  
 Grön, Georg 247, 262, 269  
 Gröppler, Sonja 247  
 Groppe, Sarah 147, 244, 379  
 Grossberg, George 250  
 Grosse Holtforth, Martin 187  
 Großlinghaus, Isabell 150  
 Groß, Marina 263  
 Gross, Rainer 205  
 Groß, Tina 270, 271  
 Gross Lesch, Silke 215  
 Grotegerd, Dominik 207, 210, 218, 239, 247, 392  
 Grothe, Michel 210, 219, 225  
 Grözinger, Michael 129, 166, 185, 259, 285, 292, 295, 376, 396  
 Grube, Michael 224, 252  
 Gruber, Esmeralda 219  
 Gruber, Oliver 133, 134, 165, 192, 201, 206, 213, 248, 267, 292, 295, 396  
 Gruber, Thomas 246  
 Gruber-Rüther, Angelica 165  
 Grünblatt, Edna 234  
 Gründer, Gerhard 130, 142, 147, 150, 160, 175, 188, 194, 197, 213, 244, 272, 280, 283, 292, 379, 392, 396  
 Gründler, Theo 243  
 Grundmann, Johanna 254  
 Grundmann, Stephan 95, 227  
 Grüner, Eva 120, 247  
 Grünwald, Barbara 242  
 Grünwald, Frank 235  
 Gryzunov, Y. A. 226  
 Gual, Antoni 272  
 Guba, Kirsten 218  
 Guelfucci, Florent 258  
 Guevara, Alvaro 248  
 Guhn, Anne 245, 267  
 Kühne, Uta 127  
 Guhra, Michael 131, 244  
 Guldin, Wolfgang 265  
 Gün, Ali Kemal 195  
 Gündel, Harald 149, 163, 221  
 Günther, Lydia 260, 389  
 Günther, Sarah 128  
 Gur, Ruben 218  
 Gurvich, Artem 226  
 Gutenbrunner, Christoph 126, 375  
 Guthknecht, Tom 165  
 Gutierrez, Nick 133, 376  
 Gutmann, Philipp 154  
 Gutsgeil, Simone 238  
 Gutt, Diana 249  
 Güttgemanns, Jörn 132, 228  
 Gutzmann, Hans 131, 156, 219, 231
- H**
- Haack, Kathleen 206, 275  
 Haag, Ines 252  
 Haarig, Frederik 141, 260  
 Haas, Claus-Rüdiger 231  
 Habel, Ute 138, 148, 150, 166, 167, 174, 203, 210, 219, 247, 248, 267, 268  
 Habermeyer, Benedikt 272, 273  
 Habermeyer, Elmar 141, 143, 173, 197  
 Haberstroh, Julia 176, 255  
 Hadar, Ravit 209, 226, 248, 260, 389, 391  
 Haddad, Leila 173, 179, 232, 395  
 Hadjipapanicolaou, Demetra 254  
 Haeck, Martina 85, 92, 135, 191  
 Haegele, Claudia 210  
 Haen, Ekkehard 202, 244, 270, 271, 272  
 Haenel, Ferdinand 192

Haenisch, Britta	250	Havemann-Reinecke, Ursula	236
Häfner, Heinz	52, 129, 361, 375	Haverkamp, Wilhelm	150, 254
Häfner, Sibylle	85, 87, 94, 129, 155, 166, 222	Healy, David	66, 191, 369, 387
Häge, Alexander	263	Hebebrand, Johannes	115, 120, 164, 183, 192, 241, 251, 252
Hägele, Claudia	210	Heberlein, Annemarie	215, 256, 267, 274
Hager, Katharina	245	Heberlein, Ingo	130
Hagleitner, Richard	284	Heck, Antje	180
Hagmayer, Dieter	272	Heekeren, Hauke R.	143
Hahn, Eric	284	Heekeren, Karsten	220, 273
Hahn, Martina	283	Heese, Astrid	268
Hain, Sarah	254	Heesen, Christoph	166, 208
Hajak, Göran	120, 128, 146, 255, 259, 309	Hefner, Gudrun	171
Haker, Helene	203	Hegedüs, Anna	264
Halaenka, Ina	268	Hegenscheid, Katrin	125, 266, 375
Halasz, Jozsef	243	Hegerl, Ulrich	52, 116, 124, 128, 130, 137, 142, 149, 175, 227, 240, 253, 267, 268, 273, 291, 310, 361, 379, 381
Hamm, Alfons	212	Heider, Jens	123, 238
Hammer, Christian	203	Heidler, Christina	120, 245, 247
Hämmerer, Ursula	85, 87, 92, 121	Heier, Margit	219
Hampel, Harald	225	Heim, Christine	243
Händel, Nadja	272	Heimig, Frank	137
Hand, Iver	143, 170	Heindel, Walter	239, 247
Hanewinkel, Reiner	118	Heinemann, Barbara	268
Hänggi, Jürgen	118	Heinrich, Manuel	181
Hannich, Hans-Joachim	177	Heinrich, Viola	263
Hannig, Christian	95, 229	Heinrichs, Markus	53, 188, 219, 259, 393
Hänsel, Frank	251	Heinsch, Anna	306
Hansell, Narelle	240, 382	Heinsen, Helmut	219, 225
Hansen, Aksel	237, 264	Heinz, Andreas	66, 90, 105, 115, 121, 130, 137, 143, 154, 161, 163, 170, 174, 176, 183, 191, 196, 204, 210, 212, 229, 232, 246, 247, 248, 256, 257, 270, 369, 374, 382, 391, 395
Hansmeier, Thomas	126	Heinze, Hans-Jochen	167
Hantke, Juliane	242	Heinze, Martin	52, 70, 116, 129, 154, 181, 184, 188, 275, 292, 295, 361, 375, 396
Hapke, Ulfert	222	Heinzel, Stephan	219
Harbeck, Susanne	148, 238	Heinzmann, Thomas	201
Hargarter, Ludger	237, 257, 258	Heiser, Philip	246, 263
Haring, Christian	124, 136, 146, 157, 377	Hejnal, Torsten	189, 306
Harms, Ingo	172	Helbich, Marco	254
Härtel, Maike Katharina	135	Helfrich, Adriane	269
Harter, Christian	252	Hellen, Florence	211, 253
Härter, Martin	166, 185, 189, 199, 220, 273	Hellenschmidt, Tobias	107, 128, 167
Härtling, S.	151	Heller, Cynthia	245
Hartmann, Anne	203	Heller, Markus	290
Hartmann, Daniel	265, 266	Hellrung, Lydia	223
Hartmann, Hellmut	243	Hellweg, Rainer	151
Hartmann, Tobias	234	Hellwig, Isabelle	232, 394
Hartung, Benno	211	Helmchen, Hanfried	137
Hasan, Alkomiet	86, 93, 95, 139, 149, 204, 226, 227, 281, 377	Hemkendreis, Bruno	178, 222, 276
Haschemi Nassab, Mani	267	Hendlmeier, Ingrid	255
Hase, Michael	228	Heneka, Michael T.	158, 381
Hasler, Felix	230	Henkel, Karsten	160, 163
Hasler, Gregor	157, 260, 389	Henkel, Verena	116
Hass, Johanna	203	Hennig, Jürgen	128, 182
Hassel, Holger	189	Hennig, Lena	226
Hassiotis, Angela	173, 384	Hennig, Oliver	215, 244
Häßler, Frank	127, 147, 206	Henniger, Stefan	268
Hassler, Uwe	246	Henning, Anke	232, 395
Haßlinger, Volker	229	Henning-Fast, Kristina	241
Hassouna, Imam	138	Hennings, Johannes	192
Hatzinger, Martin	115	Hentze, Charlotte	124, 213, 259
Hauer, Andrea	208	Henze, Romy	243
Haufla, Robin	186	Herbert, Cornelia	243
Haupt, Martin	289	Herbig, Beate	192
Hauptmeier, Martin	189, 253	Herbig, Britta	202
Hauschildt, Marit	160, 241	Herbsleb, Marco	238
Hausner, Lucrezia	210		
Häußinger, Florian	246, 264, 265		
Haußleiter, Ida	155, 187, 203, 231, 239, 242, 273		
Haußmann, Ute	246, 269		
Hauth, Iris	62, 63, 85, 87, 108, 129, 137, 145, 149, 155, 182, 184, 196, 197, 205, 214, 221, 227, 229, 252, 292, 294, 368, 385, 389, 397		
Hautzinger, Martin	114, 175, 187, 208, 259, 308		



Herdener, Marcus	199	Hodgkins, Paul	243, 263
Herder, Christian	166	Hoek, Hans W.	241
Herder, Katrin	160, 229	Hoell, Andreas	255
Heres, Stephan	188, 308	Hoenack, Dany	249
Herkner, Franziska	148	Hoertnagl, Christine	257
Herkt, Deborah	262	Hoesli, Irene	118
Hermann, Derik	170, 244	Hofecker Fallahpour, Maria	125
Hermann, Moritz	138	Hofer, Alex	154, 218, 237, 257, 258
Hermann, Nervin	235	Hoff, Karin	291
Hermelink, Daniel	241	Hoff, Paul	131, 156, 275
Herns, Stefan	268	Hoffmann, David	210
Herpertz, Sabine C.	51, 69, 71, 90, 96, 114, 124, 129, 140, 150, 162, 168, 173, 178, 183, 192, 203, 209, 212, 242, 226, 230, 249, 262, 360, 378, 382, 390, 394	Hoffmann, Falk	131
Herpertz, Stephan	165, 192	Hoffmann, Holger	177, 202, 216
Herpertz-Dahlmann, Beate	130, 163, 190, 225, 241, 246, 387	Hoffmann, Jens	208
Herrlich, Jutta	132, 228	Hoffmann, Klaus	178
Herrman, Helen	87, 158, 167, 381, 383	Hoffmann, Knut	155, 292, 296, 396
Herrmann, Christoph S.	246	Hoffmann, Per	238
Herrmann, Katrin	310	Hoffmann, Sabine	256
Herrmann, Martin	166, 245, 246, 267	Hoffmann, Wolfgang	147, 226, 234, 266
Hertel, Nina	241	Hoffmann-Richter, Ulrike	208, 286
Hertenstein, Elisabeth	214, 262	Höflacher, Rainer	177, 306
Hertrich, Verena	259	Hofmann, Andrea	268
Hertwig, Ralph	63, 197, 389	Hofmann, Arne	262
Herwig, Uwe	243, 247, 262, 266	Hofmann, Elena	269
Herzog, Wolfgang	127	Hofmann, Wolfgang	252
Heser, Kathrin	172	Höft, Barbara	235, 255
Hesse, Klaus	193, 203, 388	Höger, Nora	260
Hesse, Kristin	238	Höglinger, Günter	144
Hesse, Lara Li	264	Hohagen, Fritz	55, 58, 61, 95, 127, 135, 145, 155, 168, 183, 227, 362, 376
Heßler, Johannes	255	Hohendorf, Gerrit	132
Heuft, Gereon	126	Höhl, Werner	215, 216
Heuner, Ulf	116	Hohm, Erika	135
Heupel, Julia	197, 268, 271	Hohn, Astrid	246
Heuser, Joerg	127	Holiga, Stefan	249, 265
Hewer, Walter	157, 231, 288, 292, 294, 396	Holl, Anna K.	246
Heyl, Vera	245	Holmberg, Christine	150
Hickie, Ian	167, 383	Holsboer, Florian	57, 63, 66, 70, 114, 131, 136, 192, 204, 271, 363, 369, 374, 377
Hiemke, Christoph	147, 171, 188, 236, 250, 283, 379	Holsboer-Trachsler, Edith	115
Hierl, Sandra	116	Holthoff, Vjera	120, 157, 176, 219, 234, 245, 255, 292, 294, 396
Hilbert, Anja	192	Holtkamp, Martin	90, 176
Hildebrand, Martin	262	Holtmann, Martin	179, 205, 231
Hilgenfeld, Hannes	221, 252	Holtz, Katrin	273
Hill, Arnd	273	Hölzel, Lars	189, 211
Hillemacher, Thomas	215, 236, 256, 267	Holz, Johannes	260
Hiller, Thomas S.	273	Holz, Nathalie	267
Hillert, Andreas	126, 145, 161	Holzinger, Daniel	252
Hilscher, Max	260	Homan, Philipp	260, 389
Hilti, Leonie	118	Homann, Harald	287
Hiltl, Marina	271	Honig, Holger	235
Himmerich, Hubertus	147, 214, 291, 379	Höppner, Jacqueline	249
Himmighoffen, Holger	239, 249, 269	Hornegger, Joachim	261
Hindi Attar, Catherine	262	Hornstein, Christiane	122
Hinkelmann, Kim	148, 190, 213, 387, 392	Hornung, Janina	256
Hinney, Anke	164	Horvata, Andreas	289
Hinrichs, Jens	126	Höschel, Klaus	287
Hippius, Hanns	84, 121	Höschl, Cyril	87, 158, 167, 381, 383
Hirjak, Dusan	120, 247	Hosman, Clemens M. H.	52, 148, 361, 379
Hirsch, Rolf	170	Hottenrott, Birgit	241
Hische, Ernst H.	287	Houchangnia, Marius	274
Hittmeyer, Anna	247	Hoyer, J.	151
Hoch, Eva	170, 207	Huber, Christian	123, 195
Höchstetter, Renate	130	Huber, Martin	242
Hochstrasser, Tanja	260, 389	Huber, Theodor	271
Hock, Christoph	219, 232, 395	Hubmann, Svenja	189
Hodgkinson, Steve	232, 394	Hübner, Johanna	223
		Hübner, Thomas	259
		Huchzermeier, Christian	143, 201
		Huckenbeck, Wolfgang	211

- Huebl, Julius 259  
Hüfner, Katharina 260, 389  
Huhn, Maximilian 116, 250  
Hüll, Michael 154, 156, 175, 282  
Hummes, Jörg 86, 144  
Humpel, Christian 260, 389  
Hüppe, Michael 290  
Hurlemann, René 188  
Hurst, Marko 306  
Hurtz, Roswitha 216  
Huss, Jessica Helen 241  
Huss, Michael 215  
Huster, René 246  
Hüther, Franziska 184, 274, 386  
Hüther, Gerald 107, 161  
Hütte, Meike 138  
Huys, Daniel 140  
Huys, Quentin J. M. 210  
Hyrnik, Joanna 242
- I**  
Ibach, Bernd 237, 264  
Ilgumnov, Sergey 243  
Ilievska, Angelina 241  
Illes, Franciska 155, 203, 211, 253  
Imöhl, Jessica 270, 271  
Inamdar, Amir 270  
Inantsy-Pap, Judit 243  
Inta, Dragos 152, 251  
Irmisch, Gisela 256  
Isaak, Antje 245  
Isele, Dorothea 203, 390  
Ising, Marcus 192  
Ivert, Petra Maria 287  
Izurietta, Natalie 150, 203, 242, 390
- J**  
Jabs, Burkhard 253, 275, 276  
Jacke, Christian 123, 151  
Jäckel, Dorothea 202  
Jacob, Christian 215, 271  
Jacob, Gitta 117, 208, 242  
Jacob, Heike 143  
Jacobi, Frank 105, 142, 161, 222  
Jacobs, Kerrin 217  
Jaeger, Susanne 123, 184, 237, 253, 274, 386  
Jäger, Andreas 252  
Jäger, Anna-Maria 175  
Jäger, Burkard 221  
Jäger, Markus 120  
Jäger, Matthias 215, 273  
Jagla, Melanie 254  
Jagsch, Christian 231  
Jähne, Andreas 207, 236  
Jahn, Friederike 249  
Jahn, Holger 234  
Jahn, Kirsten 268  
Jahn, Thomas 138  
Jakob, Constance 260, 389  
Jakob, Nuriith J. 262  
Jakobi-Malterre, Ute E. 228  
Jakovljevic, Anna-Karina 141  
Janas-Kozik, Malgorzata 209, 242, 391  
Janca, Aleksandar 167, 383  
Jäncke, Lutz 118, 239, 243, 247  
Janetzky, Wolfgang 256  
Janke, Katrin 148  
Janowitz, Deborah 266, 268  
Jansen, Andreas 187  
Jansen, Heike 134, 306  
Janssen, Birgit 149, 150, 251  
Janßen, Christin 246, 269
- Jans, Thomas 215  
Japs, Birte 269  
Jaquenoud-Sirot, Eveline 153, 289  
Jardri, Renaud 174  
Jarkovsky, Jiri 203, 391  
Jatzko, Alexander 192  
Jauch-Chara, Kamila 87, 88, 91, 155, 161, 186, 214  
Jech, Robert 249, 265  
Jefferson, Anneli 143  
Jelinek, Lena 161, 238, 241  
Jelonek, Ireneusz 242  
Jendreyschak, Jasmin 155, 211, 253  
Jensen, Markus 306  
Jentsch, Anika 244  
Jentsch, Tina 235  
Jesic, Aleksandar 236  
Jessen, Frank 92, 137, 158, 172, 189, 190, 198, 209, 225, 250, 266, 292, 295, 391, 396  
Jezova, Daniela 260, 389  
Jimenez-Trevino, Luis 264  
Jin, Na 270, 271  
Jivan, Salma 129, 376  
Jöbges, Michael 126  
Jobst, Andrea 203, 238, 240, 260, 381, 389, 390  
Johnson, Brian 270  
Joraschky, Peter 118  
Jorde, Anne 247  
Ju, Anes 226  
Juckel, Georg 72, 120, 133, 143, 148, 155, 179, 187, 203, 205, 211, 231, 239, 242, 245, 253, 260, 271, 273, 275, 308, 309  
Juliane, Mehlhorn 128  
Julkowski, Dominika 258  
Jung, Christoph 262  
Jung, Hanna Sophie 257  
Junge-Hoffmeister, Juliane 224  
Junger, Jessica 166  
Junghanns, Klaus 179  
Junghan, Ulrich Martin 218  
Jungthöfer, Markus 212  
Jüngling, Kerstin 169  
Jungwirth, Susanne 234  
Jurcoane, Alina 265  
Jurjanz, Luisa 245  
Jurowich, Christian 192
- K**  
Kacettl, Patrica 149  
Kaduszkiewicz, Hanna 131  
Kaesberg, Stephanie 254  
Kaeser, Marius 267  
Kaess, Michael 135, 236  
Kaffenberger, Tina 239  
Kahl, Kai G. 122, 144, 192, 214, 280, 290  
Kahn, René S. 268  
Kai, Kossow 261  
Kaiser, Heika 181  
Kaiser, Stefan 192, 309  
Kajosch, Hendrik 236, 246  
Kalbe, Elke 254  
Kalbitzer, Jan 261  
Kalendova, Michaela 203, 391  
Kalinina, Varvara 223, 226, 393  
Kalisch, Raffael 212  
Kaller, Christoph 267  
Kalweit, Lisa 262  
Kammer, Thomas 262  
Kampik, Anja 287  
Kandler, Christina 260, 389

Kane, John M.	270, 271	Kilimann, Ingo	147, 225, 226
Kanis-Seyfried, Uta	275	Killat, Sarah	148
Kapfhammer, Hans-Peter	116, 246, 257, 259,	Kill, Guido	252
	260, 389	Kimbel, Renate	253
Kapusta, Nestor	254, 269	Kim, Eun-Hae	252
Karachisaridou, Christina	259	Kimura, Mayumi	115
Karakaya, Tarik	265, 266	Kindermann, Sally Sophie	261, 274
Karasheva, Bibigul	203, 390	King, Joseph	241, 242, 246
Karch, Susanne	139, 265	Kinzl, Johann	241
Karenberg, Axel	198, 281, 289	Kirchberg, Franca	174
Kärgel, Christian	173, 210	Kirchen-Peters, Sabine	199
Kariofillis, Daniela	173	Kircher, Tilo	69, 125, 135, 174, 186, 187,
Karow, Anne	123, 138, 179, 198, 204, 205,		193, 205, 206, 212, 228, 247, 260,
	251, 252, 253, 258		265, 266, 267, 375, 388, 389
Kas, Martien J.	268	Kirchner, Erwin	275
Kaschka, Wolfgang P.	232, 394	Kirchmann, Helmut	167
Käsermann, Marie-Louise	154	Kirchner, Heribert	235, 273
Kasperek, Tomas	174	Kirchner, Thomas	232, 395
Kasper, A.	151	Kirnbauer, Vivian	251
Kasper, Siegfried	147, 238, 240, 309, 382	Kirsch, Irving	66, 191, 369, 387
Kassubek, Jan	244	Kirsch, Peter	173
Kasten, Meike	145	Kirschbaum, Clemens	128, 160, 190, 260, 264,
Kästner, Anne	138, 203, 226		387, 389
Kästner, Denise	190, 195	Kirschner, Matthias	273
Kastner, Heidi	94, 216	Kirste, Thomas	210, 234
Kaszubski, Linda	85, 280	Kirst, Oliver	167, 383
Kathmann, Norbert	214, 219	Kis, Bernhard	189, 215, 244, 252, 263
Katthagen, Teresa	257	Kittel-Schneider, Sarah	197, 260, 261, 268,
Kaufmann, Alexandra	218, 237, 257		269, 271
Kawohl, Wolfram	120, 138, 190, 195, 203,	Kivelitz, Laura	259
	215, 240, 273	Klaaßen, Arndt-Lukas	241
Kayser, Sarah	88, 91, 161, 186, 200, 261, 283	Klafki, Hans-Wolfgang	235, 246, 255, 265, 269
Kebir, Oussama	268	Klamer, Daniel	268
Keck, Martin	193, 275	Klarhöfer, Markus	272
Keeser, Daniel	139, 265	Klasa, Katarzyna	147, 379
Kegat, Sarah	170	Klasen, Martin	150, 268
Keil, Julian	247, 256	Klasik, Adam	253
Keil, Maria	267	Klauer, Thomas	258
Kelber, Olaf	250	Klaus, Johanna	252
Keller, Hans	274	Kleehaupt, Eva	262
Kellner, Antonia	259	Kleimann, Alexandra	91, 171, 186
Kellner, Michael	241, 267, 269	Klein, Angela	207
Kemmler, Georg	120, 154, 218, 237, 258	Klein, Jakob	254
Kennedy, James L.	174, 179, 385	Klein, Janina	189
Kent, Lindsay	268	Klein, Julia	248
Kentenich, Heribert	182	Klein, Michael	189
Kernberg, Otto F.	51, 226, 360, 394	Klein, Philipp	89, 280, 281
Kern-Ehrlich, Alexander	94, 222	Kleine-Budde, Katja	195
Kerper, Léonie F	128	Kleinschmidt, Martin	116
Kersting, Anette	128, 138, 201, 210, 254, 258,	Kleinsorge, Marlene	267
	292, 294, 390, 397	Klengel, Torsten	201, 390
Kersting, Jan-Michael	282	Klett, Lara	143
Kessler, Josef	254	Kliemann, Dorit	143
Kessler, Ute	261	Kliem, Sören	148, 238
Kettemann, Beate	164	Klier, Claudia	206
Kettner, Mattias	190, 387	Kliesch, Stefan	149
Keuper, Kati	181	Klimke, Ansgar	116, 149, 292, 397
Keyzers, Christian	53, 219, 393	Klimova, T.	223, 393
Keyvani, Kathy	206	Klingberg, Stefan	131, 132, 173, 193, 203,
Khamenka, Natallia	237		225, 228, 388
Khmelnitskaya, Ekaterina	274	Klinitzke, Grit	138
Kibrik, Nikolai	203, 390	Klintschar, Michael	269
Kiefer, Falk	135, 173, 183, 213, 244, 247,	Kloiber, Stefan	192
	280, 384, 392	Klöppel, Stefan	188, 213, 221, 222, 225,
Kiehntopf, Michael	182		262, 386
Kiejna, Andrzej	196, 388	Klosterkötter, Joachim	108, 137, 143, 158, 168,
Kiem, Sara A.	265		178, 189, 193, 198, 205,
Kienast, Thorsten	126, 242, 289		227, 237, 243, 252, 258,
Kieser, Christian	205		292, 295, 383, 388, 396
Kieslich, Katrin	271	Klücken, Jochen	261
Kietzmann, Diana	95, 229	Klücken, Tim	182
Kilian, Reinhold	116, 123, 138, 151, 237	Kluczniok, Dorothea	243

Kluge, Michael	116, 147, 379	Köthe, Dagmar	280
Kluge, Ulrike	139, 163, 382	Köther, Ulf	218, 238, 242
Klumpers, Floris	218, 392	Kotsiari, Alexandra	268
Klütsch, Rosemarie	230, 394	Koudela, Susanne	148
Knake, Annika	181	Koudouovoh-Tripp, Pia	260, 389
Knake, Susanne	267	Koutsouleris, Nikolaos	137, 152, 180, 182, 188, 201, 310, 386
Knauber, Julia	243	Koutsouraki, Euphrosyni	196, 388
Knauff, Julia	272	Kowalski, Jens T.	186
Knebel, Maren	255	Kozelek, Petr	254
Knegtering, Rikus H	257	Kozian, Ralf	242
Knellesen, Olaf	275	Kozmin-Burzyńska, Agnieszka	264
Knöchel, Christian	174, 181, 237	Kraan, Karel	120
Knödsleder, Thomas	270	Kraft, Johannes W.	234
Knölker, Hans-Joachim	246, 269	Kraft, Karin	250
Kobozev, G.N.	248	Krähenmann, Olivia	249
Koch, Eckhardt	195	Krahl, Wolfgang	291
Koch, Rainer	255	Krahnke, Tillmann	250
Koch, Stefan	270, 282	Krämer, Ulrike	150
Koch, Uwe	126, 139, 375	Kramer, Dietmar	134
Koch-Stoecker, Steffi	221	Kramer, Michael	224
Koehler, Niklas	245	Krampe, Henning	128, 159
Koenig, Thomas	246	Krampen, Günter	254
Koeser, Leonardo	189	Krasnov, Valery	223, 393
Kofahl, Christopher	185	Kratzsch, Juergen	268
Kofink, Daniel	268	Kratz, Torsten	274
Kogler, Lydia	218	Kraus, Inga	265
Köhler, Sabine	84, 95, 121, 227	Kraus, Ludwig	210
Kohl, Sina	243	Krause, Anna Linda	167
Kohler, Christina	250	Krause, Hanna	257
Kohls, Gregor	244	Krause, Wolf-Rainer	280
Köhne, Martin	135, 249	Krause-Utz, Annegret	148
Kohn, Nils	232, 246, 248, 395	Krausz, Reinhard Michael	126, 130, 145, 157, 199, 375
Kolarczyk, Aleksandra	240, 382	Krautheim, Johannes	174
Kolb, Christiane	250, 259	Krebs, Marie Odile	268
Kolbe, Martin	133, 227	Kreienkamp, Elisa	248
Kölch, Michael	266	Kreifelts, Benjamin	143, 196
Koldrack, Philipp	234	Kreikenbohm, Thorsten	235
Koller, Matthias	114	Kreil, Sebastian	250, 258, 274
Kollmann, Marina	189	Kreisel, Stefan	131, 244, 262
Kollmann, Walter	220	Kretschmer, Tino	239
Kometer, Michael	152	Krienke, Ute J.	261
Kommescher, Mareike	228	Kriston, Levente	166, 189, 211, 231, 232
König, Hans-Helmut	123, 172, 175, 273	Krüber, Hans-Ludwig	54, 85, 114, 121, 129
König, Jochen	270, 271	Kroemer, Nils B.	248
König, Wolfgang	166	Krüger, Christoph	148, 238
Konkol, Christian	252	Kroll, Michael	216, 281
Konrad, Albrecht	273	Krone, Lukas	249
Konrad, Andreas	270, 271	Kronmüller, Klaus-Thomas	260
Konrad, Carsten	135, 186, 187, 206, 260, 267, 389	Kropf, Siegfried	272
Konrad, Kerstin	246	Kropp, Stefan	95, 186, 227
Konrad, Michael	215	Kropp, Uwe	274
Konrad, Norbert	153, 201, 287, 380	Kruck, Bernadette	256
Kopf, Juliane	248, 261, 268, 269	Krug, Axel	193, 247, 267, 388
Kopf, Kathrin-Andrea	273	Krüger, Josephine	210, 256
Köpke, Sascha	238	Krüger, Sabrina	282
Koplin, Katrin	243	Krüger-Özgürdal, Seza	187
Kopp, Ina B.	115	Kruisdijk, Frank	230, 394
Koppelstätter, Florian	266	Krupchanka, Dzmitry	217, 392
Köppel, Alexandra	271	Krupka-Matuszczyk, Irena	209, 240, 260, 382, 389, 391
Korn, Oliver	123, 189, 253, 286	Krupp, Marisa	252
Kornhuber, Johannes	67, 137, 182, 209, 210, 240, 248, 250, 251, 255, 258, 261, 264, 267, 269, 274, 275, 382, 391	Krusche, Esther	252
Kornmayer, Laura	226	Kruse, Johannes	168
Korte, Alexander	242	Krysta, Janina	253
Kortus, Rainer	245	Krysta, Krzysztof	209, 240, 242, 250, 253, 260, 262, 264, 382, 389, 391
Kossow, Kai	274	Kubera, Katharina Maria	266
Köstering, Lena	267	Kübler, Andrea	128
Köster, Luisa	268	Kucera, Robert	211
Kösters, Markus	120	Küchenhoff, Bernhard	125, 137

Kuchukhidze, Georgi	266	Lau, Thorsten	251
Kudryashov, A.V.	248	Laucht, Manfred	135, 206, 224, 267
Kuehn, Andrea A.	259	Lauer, Martin	245, 246
Kuelz, Anne Katrin	262	Lauschke, Susanne	176
Küey, Levent	186, 386	Lautenbacher, Stefan	128
Kugel, Harald	124, 210, 239, 247, 258	Lautenbach, Michael	245
Kühl, Linn	148, 213, 392	Lautenschlager, Marion	116
Kuhl, Hans Christian	272	Laux, Gerd	130, 147, 162, 250, 308, 309
Kuhlmann, Sophie	148	Lazansky, Michael	89, 168
Kühn, Kai-Uwe	310	Leber, Markus	268
Kühnert, Michael	260	Leber, Wulf-Dietrich	137
Kuhn, Jens	129, 140, 203, 243, 310, 376	Leclerc-Springer, Johanna	256
Kuhn, Marion	248, 260	Lederbogen, Florian	179
Kuhnigk, Olaf	253	Lee, Yushan	240, 382
Kuhr, Kathrin	228	Leerhoff, Inga	166
Kulygina, Maya	223, 393	Legenbauer, Tanja	192
Külz, Anne Katrin	214	Leh, Sandra E.	219, 232, 395
Kumbier, Ekkehardt	131, 156, 198, 206, 275, 281, 289, 292, 294, 396	Lehfeld, Hartmut	245, 263
Kümmel, Anne	176, 255	Lehmacher, Walter	228
Kumsta, Robert	188	Lehmann, Dietrich	246
Kunczik, Thomas	103, 105, 155, 161, 190, 282	Lehmann, Kerstin	265
Kunkel, Markus	236	Lehmkuhl, Gerd	142, 205, 228
Künster, Ulf	292, 294, 396	Lehmkuhl, Ulrike	127, 130, 189, 206, 242, 249
Kunz, Regina	208	Lehnert, Hendrik	191
Kunze, Heinrich	123	Leibl, Carl	241
Küpper, Yvonne	182	Leicht, Gregor	226, 247
Kupper, Zeno	135, 259	Leipziger, Klaus	162
Kurmann, Julius	120	Leitner, Michael	254
Kurz, Alexander	225	Lembach, Yvonne	228, 244, 255
Kuwert, Philipp	130	Leménager, Tagrid	107, 135, 167, 169, 231, 256
Kuzmanovic, Bojana	143	Lemke, Matthias R.	251, 259
		Lemoine, Patrick	272
		Lempp, Thomas	190, 387
<b>L</b>		Lencer, Rebekka	145
Lackner, Nina	246	Lennertz, Leonhard	268
Lackner-Seifert, Kerstin	241	Lennerz, Belinda	192
Lacroix, Angelika	252	Lenz, Gerhard	117, 251
Lacruz, Maria Elena	166, 219	Lenzen, Christoph	135, 244
Ladwig, Karl-Heinz	166, 219	Leonhard, Christine	245
Laeger, Inga	181	Leopold, Karolina	179, 187
Laib, Kathrin	236	Lepper, Heinz	145
Laier, Christian	135, 242	Lepping, Peter	136, 377
Lambert, Martin	123, 138, 179, 185, 198, 199, 204, 205, 252, 253, 257, 258, 309	Lesch, Klaus-Peter	197, 215, 268
Lambrecht, Lena	196	Lesnik, Timo	240
Landau, Anne	129, 376	Leßmann, Josef J.	155
Landgrebe, Michael	128	Leszek, Jerzy	196, 388, 389
Landolt, Markus	223	Letmaier, Martin	246
Landsberg, Wally	270, 271	Letters, Aischa	260, 389
Landwehrmeyer, Bernhard	265, 266, 269	Letzel, Stephan	253
Laneri, Davide	267	Leube, Dirk	173, 237
Länger, Anna	265	Leucht, Stefan	116, 160, 188, 250, 270, 271
Längle, Gerhard	123, 151, 176, 215	Leuschner, Vincenz	146
Lang, Fabian	120	Leutenegger, Gisela	120
Lang, Frieder R.	245	Levin, Johannes	235
Lang, Silke	120	Lewandowski, Mirjana	248
Lang, Undine	126, 159, 168, 195, 205, 274	Lewczuk, Piotr	255
Langbein, Kerstin	219	Lewien, Antje	257
Lange, Claudia	239	Lewitzka, Ute	187
Lange-Asschenfeldt, Christian	211, 214, 235, 281	Ley, Astrid	117
Langenbach-Seitz, Petra	235	Leygraf, Norbert	136, 377
Langguth, Berthold	250	Leyhe, Thomas	226, 234, 239, 245, 266
Langner, Daina	166	Licata, Maria	239
Langosch, Jens M.	261	Lichtblau, Andrea	169
Langraf, Barbara	275	Lieb, Klaus	117, 151, 162, 188, 201, 213, 225, 250, 382, 390, 392
Langs, Gernot	163, 264	Lieberman, Jeffrey	174
Lanzenberger, Rupert	240, 382	Liebetrau, Ann-Sophie	235
Large, Charles H.	264	Liebherz, Sarah	185
Laske, Christoph	245	Lier-Schehl, Hannelore	224
Latocha, Kathrin	189	Lilienthal, Georg	171
Lau, Steffen	143, 201, 287	Lima-Ojeda, Juan M.	251
Lau, Stephanie	166, 208	Limberger, Matthias	242

Limm, Heribert	202	<b>M</b>	
Lincoln, Tania	132, 220	Maaß, Christina	272
Linden, David	181	Maatz, Anke	275
Linden, Jennifer F.	264	Maccarrone, Giuseppina	192
Linden, Michael	117, 126, 134, 151, 161, 193, 208, 261, 293, 296, 397	Macha, Immina	120
Lindenu, Matthias	166	Mack, Simon	142
Lindenberg, Annette	287	Maderwald, Stefan	210
Lindenberg, Katajun	236	Mädge, Britta	86, 281
Lindenmeyer, Johannes	125, 247	Maercker, Andreas	160, 162, 225, 234
Lindner, Christian	258	Maetzler, Walter	245, 247
Lindner, Reinhard	125	Magaard, Julia	269
Linhardt, Andrea	139, 236	Mager, Ralph	208, 240, 272
Linkohr, Birgit	219	Mahler, Lieselotte	163, 164, 293, 297, 397
Linning, Philipp	246, 269	Mahlke, Candelaria	185
Lipp, Michael	251	Maier, Andreas	261
Lippke, Stefanie	148	Maier, Philipp	226
Lischke, Alexander	192	Maier, Wolfgang	46, 52, 56, 61, 66, 69, 70, 71, 105, 115, 121, 129, 133, 136, 142, 148, 161, 168, 172, 174, 182, 190, 191, 196, 204, 227, 250, 356, 361, 367, 369, 374, 375, 376, 377, 379, 383
Lis, Stefanie	169, 243	Mainberger, Florian	248
Liske, Benjamin C. J.	246, 264, 265	Mainz, Verena	211
Lisofsky, Beate	72, 148	Maissen, Gieri	246
Litau, Sabine	251	Makin, Charles	243
Liu, Jingyu	203	Makowski, Anna	185
Liu, Zhongyin	245	Makowsky, Katja	120
Llorca, Pierre-Michel	257, 258	Malchow, Berend	84, 85, 86, 87, 89, 90, 93, 95, 121, 141, 155, 163, 168, 178, 191, 204, 218, 227, 281
Löbig, Michaela	238	Malejko, Kathrin	269
Lobo, Antonio	217	Maler, Juan Manuel	210, 255, 264, 269
Loew, Thomas	273	Malevani, Jaroslav	259
Löffert, Sabine	166	Malik, Peter	260, 389
Löffler, Konstanze	160	Mall, Volker	248
Loh, Alexander	256	Malt, Ulrik Fredrik	58, 104, 148, 155, 364, 379
Lohmann, Gabriele	265	Malusheva, I.	223, 393
Lohmann-Haislah, Andrea	53, 182, 385	Man, Kwun-nok	226
Löhr, Michael	120, 133, 177, 214, 222, 276	Mancke, Falk	150
Longhi, Sarah	271	Mangweth-Matzek, Barbara	241
Loos, Sabine	123	Mannan, Ashraf	203
Lorenz, Carsten	219	Mann, Karl F.	143, 154, 170, 183, 214, 256, 272, 310
Lorenz, Joanna J.	245	Manoliu, Andrei	226
Lorenz, Robert	210, 219, 246, 248, 256	Manzke, Till	269
Lorenz, Walter	275	Marchner, Janina	238
Löscher, Wolfgang	122	Marek, Sabine	235
Lößner, Maria	128	Marelli, Renato	208
Lötscher, Katharina	120	Margraf, Jürgen	183, 231
Lotze, Martin	135	Markowitsch, Hans J.	142, 202
Louwen, Frank	254	Markschies, Alexander	175
Löw, Ulrike	282	Markser, Valentin Z.	163, 293, 297, 397
Löwe, Bernd	94, 185, 205, 222	Marksteiner, Josef	251
Lübke, Norbert	158	Marquard, Martin	221
Lucae, Susanne	192	Marquardt, Michael	221
Lucha, Manfred	177	Marschner, Kira	255
Lüchinger, Roger	118	Martin, Nicholas G.	240, 382
Lucht, Michael	135	Martin, Nick	260, 389
Luck, Tobias	172	Martini, Julia	118
Ludäscher, Petra	159, 290, 381	Marwitz, Michael	194, 203, 390
Lüdecke, Daniel	234	Marzec, Joanna	240, 382
Luderer, Mathias	236, 244	Mäser, Othmar	181
Ludolph, Andrea	244, 264	Mathé, Aleksander A.	248
Luef, Herhard	266	Mathiak, Klaus	86, 128, 151, 174, 266, 268, 282
Lüken, Ulrike	186, 187, 187, 206	Mathias, Stefan	252
Lüking, Marianne	262	Matschinger, Herbert	183, 198, 220, 386
Luplow, Maik	234, 252	Mattausch, Svenja-Kristin	203, 239, 242
Luppa, Melanie	172, 175	Matter, Birgit	127
Lüscher, Sandra	138, 268	Mattern, Margarete	259
Lüth, Stefan	256	Matthies, Swantje	215, 263, 291
Lüthi, Regula	119, 145, 306		
Luttenberger, Katharina	131		
Lüttke, Robert	216		
Lütz, Manfred	63, 196		
Lutz, Birgit	242		
Lutz, Jacqueline	243, 262		
Lutz, Petra	117		

Matura, Silke	265, 266	Mikhailova, Irina	223, 393
Matzler, Walter	120	Mikoteit, Thorsten	115
Mauer, Maria-Christine	203, 238, 240, 260, 381, 389, 390	Mikutta, Christian	246, 265
Maurer, Simone	141	Millenet, Sabina	268
Mawrin, Christian	206	Miller, Julia	266
Mayberg, Helen	205	Miller, Robert	264
Mayer, Kerstin	223	Milz, Patricia	246
McCrone, Paul	189	Minarik, Carla	122
McFarland, Sarah	254	Minas, Harry	167, 383
McGorry, Patrick	158	Minder, Jacqueline	231
McGrath, Callie	205	Mingoa, Gianluca	267
McHugh, Paul R.	52, 129, 361, 375	Mingram, Maximilian	262
McIntosh, Christopher	133, 376	Minutko, V.	223, 393
McQuade, Robert	270, 271	Miroshnik, E.	223, 393
Meaney, Michael	49, 155, 359, 380	Misiak, Blazej	196, 388
Meesmann, Gerwald	177	Misionzhnik, E. Y.	223, 226, 393
Meesters, Paul David	237	Mitho, Müller	269
Mehl, Stephanie	193, 388	Mitznegg, Nicholas	255
Mehler, Pia	239, 251	Mizera, Eva	243
Mehlhorn, Juliane	251, 264	Mnich, Eva	185
Meiler, Birgit	252	Moebus, Susanne	214
Meinitzer, Andreas	259, 260, 389	Moessner, Markus	122
Meise, Ullrich	120	Moggi, Franz	211
Meisenzahl, Eva	87, 155, 181, 232, 394	Möhler, Eva	190, 206, 242, 387
Meisner, Christoph	132, 228	Möhrmann, Karl-Heinz	72, 148
Meister, Ramona	166, 231, 232	Mokhar, Aliaksandra	231
Melchinger, Heiner	156	Mokros, Andreas	173, 272
Melchior, Hanne	259	Molinuevo, Jose L.	250
Mellina, Linda	244	Molitor, Fabian	169
Meltzer, Herbert	174	Molkenthin, Barbara	306
Melzer, Nico	152	Möller, Hans-Jürgen	66, 191, 309, 369, 387
Mense, Doreen	238	Möller, Harald E.	249, 265
Menzen, Karl-Heinz	127	Möller, Heidi	145
Merkin, Alexandr	218, 392	Moll, Gunther H.	262
Merkl, Angela	164, 254, 259	Momsen, Carsten	194
Merten, Thomas	192	Monsch, Andreas U.	255
Mertens, Claudine	257	Montag, Christiane	171
Mertin, Jana	242	Montandon, Caroline	154
Messer, Thomas	86, 144, 202, 270, 280, 292, 295, 396	Mönter, Nobert	156
Mestel, Robert	241	Montgomery, Frank Ulrich	115
Mette, Christian	263	Montoro, Richard	133, 376
Metzger, Coraline	167, 196, 247	Moock, Jörn	190, 195, 261, 274
Metzger, Florian	120, 245, 247	Morath, Julia	203, 390
Metzing, Sabine	160	Mörchen, Barbara	220
Metzner, Franka	231	Morgan, Graig	163, 382
Metzner, Katharina	189	Morgenstern, Matthis	118
Meurers, Anne	211	Moritz, Steffen	131, 160, 161, 166, 208, 218, 238, 241, 242
Meyer, Ann-Kathrin	234	Morken, Gunnar	261
Meyer, Bernhard	238	Mörsen, Chantal P.	169, 183
Meyer, Björn	119, 208	Mörstedt, Beatrice	244, 263
Meyer, Gabriele	156	Mösch, Edelgard	255
Meyer, Günter	145	Moser, Ewald	238
Meyer, Mirjam	245	Möske, Mike	95, 139, 229
Meyer, Shirin	245	Moss, Anja	192
Meyer-Lindenberg, Andreas	48, 49, 50, 64, 86, 91, 115, 121, 125, 133, 149, 155, 167, 173, 178, 179, 186, 190, 197, 204, 219, 232, 242, 251, 267, 281, 358, 359, 360, 375, 380, 383, 387, 393, 395	Mössner, Rainald	238, 268
Michaelis, Sophie	271	Motan Bayraktar, Irem	249
Michel, Tania	203	Mrazek, Andrea	183
Michels, Sebastian	270, 271	Mróz, Sylwia	250
Mickley, Birgit	220	Mucibabic, Jelena	236
Mielimaka, Michal	147, 379	Mueller, Karsten	266
Mielke, Ulrich	234	Mühlbacher, Moritz	239
Mier, Daniela	173	Mühlberger, Andreas	166, 167
Mierke, Gesine	144	Mühleisen, Thomas	182
Miess, Susanne	237	Mühlhan, Markus	248
		Mühlig, Stephan	207, 245, 260
		Mühlig, Yvonne	192
		Muhtz, Christoph	161, 190, 267, 387
		Mulder, Niels	194, 388
		Muldner-Nieckowski, Lukasz	147, 379
		Mulert, Christoph	139, 226, 247, 377
		Müller, Astrid	138, 192

- Müller, Beate 234, 245, 271  
Müller, Bernhard 132, 173, 210, 228  
Müller, Christian 210, 236, 256  
Müller, Christoph 211  
Müller, Daniel J. 133, 174, 179, 284, 385  
Müller, Daniel R. 174  
Müller, Frank-Stefan 284  
Müller, Hans-Peter 244  
Müller, Helge 240, 248, 250, 264, 269, 382  
Müller, Hendrik 252  
Müller, Joachim 254  
Müller, Jürgen 259  
Müller, Jürgen L. 68, 70, 94, 114, 143, 178, 197, 216, 289, 292, 294, 396  
Müller, Kai 283  
Müller, Karsten 249, 265  
Müller, Katarina 228  
Müller, Kathrin 236  
Müller, Laura D. 245, 246, 267  
Müller, Laura Elisa 242  
Müller, Mario 117, 203, 240  
Müller, Mitho 118, 206, 224, 241  
Müller, Norbert 193, 200, 390  
Müller, Notger 202  
Müller, Oliver 287  
Müller, Ralf 237  
Müller, Reinhard 244  
Müller, René 119  
Müller, Sabine 168  
Müller, Sabrina 272  
Müller, Stephan 226, 234, 266  
Müller, Thomas 197, 275, 306  
Müller, Veronika 174, 203, 390  
Müller-Isberner, Rüdiger 114, 153  
Müller-Küppers, Markus 245  
Müller-Nordhorn, Jacqueline 150, 254  
Müller-Oerlinghausen, Bruno 187  
Müller-Rörich, Thomas 102, 104, 129, 227  
Müller-Vahl, Kirsten 140  
Mulzer, Karlheinz 236  
Münch, Alexander 164  
Münch, Daniel Michael 246, 264  
Mundle, Götz 140, 183, 290, 293, 297, 378, 397  
Mundt, Adrian 153, 380  
Munz, Isolde 272  
Murck, Harald 260, 389  
Murthy, NV 270  
Musalek, Michael 116, 157, 205  
Muschalla, Beate 126, 151, 261  
Muschler, Marc 236, 267  
Musil, Richard 174, 227  
Mutic, Smiljana 265  
Mutschler, Friderike 273  
Mutschler, Jochen 159  
Muysers, Jutta 162  
Mychajiw, Christian 226, 234, 266  
Myint, Aye-Mu 153
- N**  
Naab, Silke 127  
Naber, Dieter 123, 138, 204, 205, 251, 252, 253, 309  
Naescher, Saskia 254  
Nagel, Matthias 242  
Nagel, Saskia 147  
Nagels, Arne 265, 266  
Nagy, Krisztina 150  
Nagy, Peter 243  
Nakajima, Gene 133, 376  
Nandi, Corina 198  
Narr, Katherine 267
- Naumann, Ute 203  
Naumovska- Ristovska, Katerina 260, 389  
Navratilova, Miroslava 203, 391  
Nawara, Louise 179  
Nebe, Stephan 210, 248  
Nedjat, Schide 184, 287  
Nedopil, Norbert 54, 129, 136, 377  
Nees, Frauke 268  
Neidel, Franziska 241, 246  
Nelson, Barnaby 158  
Nenadic, Igor 182, 219  
Nerlich, Christina 274  
Nestmann, Frank 255  
Neu, Peter 292, 295, 396  
Neubauer, Andreas 244  
Neubecker, Jenny 243  
Neulen, Joseph 166  
Neumann, Jane 247  
Neumann, Luisa 238  
Neumann, Wolf-Julian 259  
Neumärker, Uwe 117  
Neuner, Irene 140, 284  
Neuschaefer-Rube, Christiane 166  
Nickchen, Katharina 235  
Nicklich, Constanze 241  
Nickl-Jockschat, Thomas 194, 281, 285, 388  
Nickl-Weller, Christine 165  
Nickola, Mathias 240  
Nieber, Karen 250  
Niebler, Raphael 120, 245, 247  
Niebuhr, Ulrich 235  
Niedtfeld, Inga 124  
Niehaus, Vivien 242, 246  
Nienaber, André 177, 200, 222, 276  
Nieratschker, Vanessa 201, 232, 390, 395  
Nieskens, Birgit 216  
Niesler, Beate 206  
Nikiforov, I. 218, 392  
Niklewski, Günter 199, 245  
Nikolaides, Alexandra 237  
Nischk, Daniel 237  
Nissen, Christoph 139, 166, 212, 248, 249, 260, 262  
Nitsche, Michael 166, 248, 249  
Nitschke, Kai 267  
Nitschke, Roland 171, 214  
Nitsch, Roger M. 219  
Nolte, Tobias 167  
Nonnenmacher, Nora 239  
Noorthoorn, Eric 136, 184, 377, 386  
Noppenberger, Anna 272  
Normann, Claus 124, 139, 166, 169, 187, 189, 212, 213, 238, 242, 248, 259, 275  
Norra, Christine 132, 143, 150, 224, 227, 271, 275  
Norris, David 210  
Northoff, Georg 64, 87, 158, 219, 381, 393  
Nothdurfter, Caroline 271  
Nöthen, Markus M. 182, 232, 238, 267, 268, 395  
Notzon, Swantje 167  
Nowotny-Behrens, Ute 284  
Nuss, Philippe 310  
Nyholt, Dale R. 240, 382
- O**  
Oberhauser, Angelika 275  
Obermann, Caitriona 273  
Oberstein, Jan Timo 210, 269  
Oberstein, Timo 255  
Ob'yedkov, Victor 237, 274  
Oddo, Silvia 254  
Ødegaard, Ketil 261  
O'Dwyer 265



Oedekoven, Christiane	120, 247	Pelok, Tünde-Biborka	235
Oei, Nicole	148	Pelz, Patricia	210, 246, 248, 256
Oertel-Knöchel, Viola	174, 181, 237, 239, 251, 265, 266	Penka, Simone	139
Oertel, Wolfgang H.	61, 168	Pentzek, Michael	172
Ohrmann, Patricia	212	Penzel, Thomas	262
Okasha, Tarek A.	62, 182, 368, 385	Peregudov, A.	223, 393
Okpanyi, Samuel N.	259	Perneckzy, Robert	222, 266
Olde Rikkert, Marcel	217	Perry, Pamela P.	270, 271
Olgiati, Paolo	180, 385	Peterhänsel, Carolin	128, 138
Ölkers-Ax, Rieke	242	Petermann, Juliane	241
Oltmanns, Kerstin M.	91, 186	Peters, Annette	219
Opel, Nils	218, 239, 392	Peters, Henning	226
Ophoff, Roel	268	Peters, Oliver	284, 308
Opialla, Sarah	243, 247	Peters, Uwe	252
Oppermann-Schmid, Friederike	228	Petersen, Hans-Peter	306
Orlov, Ivan	248	Petersen, Kay-Uwe	207
Orlova, Vera	223, 393	Peters-Strickland, Timothy	270
Orszulak, Kamila	260, 389	Petralia, Antonino	258
Orth, Michael	265, 266, 269	Petrowski, Katja	118
Ortner, Marion	234	Petzoldt, Johanna	118
Ossege, Michael	274	Peukert, Reinhard	72, 155, 184
Osterhagen, Lasse	244	Peus, Verena	224
Oswald, Frank	255	Pezawas, Lukas	238
Ott, Christoph	138	Pfaffenberger, Nicole	237
Ott, Margrit	282	Pfaffinger, Irmgard	134
Otte, Christian	86, 144, 148, 151, 165, 190, 213, 309, 387, 392	Pfäffle, Christine	274
Özer, Fikret	122	Pfammatter, Mario	218
<b>P</b>		Pfaundler, Sebastian	249
Padberg, Frank	139, 166, 200, 203, 238, 240, 249, 260, 264, 283, 381, 389, 390	Pfeifer, Samuel	293, 296, 397
Pail, Gerald	238	Pfeiffer, Andreas	216
Painold, Annamaria	246	Pfeiffer, Ernst	242
Pajonk, Frank-Gerald	86, 144, 232, 292, 295, 394, 396	Pfeil, Sabrina	203
Palagyi, Anja	240, 381	Pfennig, Andrea	158, 179, 187, 189, 205, 292, 295, 396
Palka, Karol	209, 242, 391	Pfleiderer, Bettina	186, 187, 206
Palm, Ulrich	139	Pflüger, Marlon	240
Paluch, Kamila	147, 252, 379	Pfohl, Marvin Alexander	238, 267
Pankow, Anne	257	Pfueller, Ute	218
Panneck, Patricia	235	Pfuhl, Gerit	241
Pantel, Johannes	176, 181, 235, 255, 265, 266	Pfuhmann, Bruno	171
Papageorgiou, Konstantinos	116, 240, 382	Philipp-Wiegmann, Florence	263, 272
Papassotiropoulos, Andreas	67, 182	Phillips, Mary	152, 218, 392
Pape, Hans-Christoph	200	Philipsen, Alexandra	140, 215, 263, 291, 310
Papiol, Sergi	226	Pick, Marion	169, 184
Parellada, Eduardo	237, 257, 258	Pickel, Sabine	131
Paret, Christian	230, 394	Piepka, Florian	249
Parzer, Peter	135, 243, 244	Pierzchala, Wladyslaw	264
Pastore, Martina	261	Pietsch, Uta-Carolin	268
Patel, Anita	189	Pilgramm, Juliane	160
Patricia Helena, Ackermann	246	Pilhatsch, Maximilian	259
Paucke, Madlen	128	Pillmann, Frank	181, 262
Paul, Franc	179	Pintat, Beatrice	245
Paul, Mechthild	122	Pintzinger, Nina	251
Pauli, Jan Di	285	Piontek, Daniela	210
Pauli, Paul	167, 212	Piosczyk, Hannah	166, 248, 249
Paulus, Peter	216	Piperevska, Kalina	241
Paulus, Walter	283	Pirsig, Thomas	124
Paulus, Wolfgang	180, 202	Pistja, Edmond	218, 392
Pauly, Katharina	166, 174, 248	Pitschel-Walz, Gabi	138, 172
Paulzen, Michael	147, 171, 272, 379	Pjrek, Edda	240, 382
Paus, Tomas	268	Plant, Claudia	210
Pavlichenko, Aleksey	217, 392	Plattner, Barbara	202
Pawelzik, Markus	249	Pleak, Richard	133, 376
Pawils, Silke	231	Plener, Paul	266
Pawliczek, Christina	148, 210, 267	Pleschutzign, Wolfgang	264
Pawlik, Aleksandra	209, 391	Plichta, Michael M.	267
Pedersen, Anya	135	Plöderl, Martin	163
Pekal, Jaro	135	Plum, Peter	235
		Pogarell, Oliver	139, 236, 265
		Pöhländ, Lydia	246, 248
		Pohl, Anna	174
		Pohlmann, Bettina	132

Polak, Thomas	166, 245, 246	Ratheesh, Aswin	158
Pollmächer, Thomas	63, 115, 123, 132, 143, 151, 161, 169, 176, 189, 197, 209, 214, 221, 227, 293, 297, 389, 397	Rätze, Irene	264
Poltrum, Martin	116, 157, 205	Rauch, Anna-Sophia	154
Polywka, Susanne	256	Rauch, Astrid Veronika	247
Pomper, Ulrich	256	Raufelder, Diana	246, 248
Pompili, Maurizio	124	Rauh, Reinhold	143
Ponizovskiy, Pavel	256	Reck, Corinna	118, 160, 206, 224, 236, 239, 241, 249, 269
Popa-Wagner, Aurel	263	Recker, Florian K. J.	267
Pope, Harrison G.	241	Redlich, Ronny	152, 210, 218, 239, 247, 392
Popov, Tzvetan	237	Reetz, Kathrin	222, 267, 268
Popova, Petia	258	Regenbogen, Christina	174
Popovic, Ana	238	Regen, Francesca	284
Poppinga, Sina	243	Rehse, Michael	247
Pörtl, Daniela	262	Reichel, Valeska	242
Pöttgen, Jana	166, 208	Reichert, Susanne	271
Poustka, Fritz	241	Reicherts, Philipp	248
Poustka, Luise	268	Reicherzer, Markus	172, 194
Poznic-Jesic, Milana	236	Reif, Andreas	197, 201, 212, 215, 245, 248, 260, 261, 268, 269, 390
Prehn-Kristensen, Alexander	179	Reimer, Fritz	160
Preller, Katrin	157, 271	Reimer, Jens	123, 183, 253, 256, 310
Premphe, Pamela	203	Rein, Theo	271
Preuss, Ulrich	159, 170	Reinbold, Hartmut	260
Preuss, Ulrich W.	159, 170	Reinel, Claudia	262
Priebe, Stefan	153, 380	Reinfelder, Samuel	261
Priller, Josef	90, 144, 176, 193, 235, 246, 283, 292, 396	Reinhard, Iris	148, 256
Prins, Sibylle	122	Reininghaus, Eva	246
Prox-Vagedes, Vanessa	244	Reinke, Britta	181, 265
Prüß, Harald	193	Reinken, Volker	241
Prüssmann, Klaas	219, 232, 395	Reis, Julia	272
Prüter-Schwarte, Christian	162	Reis, Olaf	147
Prvulovic, David	174, 181, 237, 239, 251, 265, 266	Reischies, Friedel-Martin	309
Psota, Georg	89, 168, 212, 229	Reissner, Volker	120, 251, 252
Puetz, Vanessa	246	Reiter, Andrea M. F.	236
Puls, Imke	262	Reiter, Elke	274
Puschner, Bernd	123	Reitt, Markus	271
Putz, Wolfgang	132, 137	Reker, Martin	159
Putz-Bankuti, Csilla	259, 260, 389	Remschmidt, Helmut	134
Pycha, Roger	124, 136, 212, 275, 377	Renneberg, Babette	203, 238, 240, 252, 381, 390
<b>Q</b>		Renner, Tobias	236, 240, 269, 271
Quante, Arnim	284	Rentrop, Michael	172
Quednow, Boris	157	Repple, Jonathan	267
Quibeldey, Heike	274	Resch, Franz	135, 236, 243, 244
Quirrenbach, Stephan	270	Resch, Selina	240
<b>R</b>		Reschauer, Gerda	251
Rabenschlag, Franziska	195	Rettenbacher, Maria	218, 237, 258
Rabenstein, Rafael	251	Retz, Wolfgang	144, 161, 173, 197, 215, 244, 263, 264, 272
Rabeschlag, Franziska	273	Retz-Junginger, Petra	141, 173, 244, 263, 264
Rabl, Ulrich	238	Reuschenbach, Bernd	245
Rabus, Anja	265, 266	Reuter, Benedikt	214
Radeloff, Daniel	190, 387	Reuter, Uwe	90, 176
Radenbach, Christoph	236	Rexroth, Christian	202
Radenbach, Katrin	85, 87, 92, 129, 155, 190, 274	Reymann, Gerhard	170, 260
Radisch, Jeanett	195	Rhein, Mathias	236, 256, 267
Radke, Sina	232, 395	Richardt-Salzbürger, Elke	245
Radtke, Martina	169, 184, 187, 238, 259	Richter, André	269
Raether, Andreas	245	Richter, Dirk	145, 177, 200, 215, 306
Rahn, Ewald	160	Richter, Jörg	256
Rainer, Michael	231	Richter, Julia	243
Ramirez, Alfredo	172, 179	Richter, Kneginja	132, 288
Rammes, Gerhard	271	Richter, Matthias	217
Ramseyer, Fabian	135	Richter, Nadja	227
Ramuschkat, Meike	253	Richter, Rainer	151, 168
Rancans, Elmars	237, 257, 258, 276	Richter, Stefanie	217
Rapp, Alexander	170, 174	Richter, Sylvia	127, 232, 395
Rapp, Michael Armin	131, 156, 219	Ricken, Roland	126
		Rickmeyer, Constanze	174, 237
		Ridder, Neele	262
		Riecher-Rössler, Anita	115, 168, 188, 207, 262, 383, 386

Rieckmann, Nina	150, 254	Roth, Kornelius	221
Riedel, Andreas	169, 184	Roth, Tanja	225
Riedel, Jeannette	177	Rothenhäusler, Hans-Bernd	259, 260, 389
Riedel, Michael	174	Roth-Sackenheim, Christa	90, 119, 156, 168, 178, 190
Riedel-Heller, Steffi G.	53, 68, 70, 114, 115, 122, 127, 131, 138, 154, 156, 161, 172, 175, 182, 194, 202, 216, 227, 231, 293, 296, 385, 388, 396	Rottschy, Claudia	174
Riederer, Peter	131, 171, 234	Rotzoll, Maike	131, 154, 171, 172, 292, 294, 396
Riedl, Valentin	226	Röver, Christian	271
Rief, Winfried	146, 149, 162, 183	Roy, Mandy	215, 244
Riemann, Dieter	146, 166, 179, 227, 248, 249, 262, 293, 297, 397	Rudolf, Sebastian	286
Riemenschneider, Matthias	269	Rüegg, Sebastian	273
Riepe, Matthias	165, 245, 271	Ruepp, Beatrix	251
Riera Knorrenschild, Rafael	256	Rufer, Michael	239, 262, 266
Ries, Zivile	189	Ruf-Leuschner, Martina	203, 390
Rietschel, Liz	123, 179, 204, 240, 257, 260, 382, 389	Ruge, Hannes	264
Rietschel, Marcella	85, 129, 133, 142, 164, 224, 227, 232, 238, 240, 267, 268, 382, 395	Ruggeri, Mirella	194, 388
Riley, Brien	182	Ruhrmann, Stephan	137, 152, 158, 178, 198, 237, 256, 258, 309
Ringelhan, Stefanie	275	Rujescu, Dan	152, 179, 181, 224, 237, 238, 268, 271
Rinkel, Klaus	89, 168	Ruland, Tillmann	167
Ripke, Stephan	133, 180, 385	Rummel, Julia	209, 248, 262, 391
Rippberger, Henrike	247	Rummel-Kluge, Christine	172, 189
Rist, Fred	210	Rumpf, Hans-Jürgen	183
Ritschel, Franziska	241, 242, 246	Rune, Gabriele	138
Ritter, Dirk	253, 275, 276	Ruof, Jörg	150
Rivero, Olga	268	Rupp, Claudia I.	241
Roa Romero, Yadira	247	Ruppelt, Friederike	252, 253
Robert, Philippe	217	Rupprecht, Rainer	57, 66, 114, 136, 166, 192, 265, 271, 363, 369, 374, 377
Rockstroh, Brigitte	237, 258, 261	Rüsch, Nicolas	204, 211, 220, 391
Roder, Volker	174	Ruthardt, Cornelia	284
Rodewald, Katlehn	247	Rüther, Eckart	66, 165, 175, 188, 191, 289, 369, 387
Rodgers, Stephanie	203, 240	Rüther, Tobias	134, 139, 207, 236
Roebers, Sabine	120	Rutkowski, Krzysztof	147, 261, 379
Roediger, Eckhard	117, 291	Rutten, Bart P. F.	268
Roelofs, Karin	232, 395	Ruzicka, Evzen	249, 265
Roesch-Ely, Daniela	218, 247, 288	Ruzicka, Filip	249, 265
Roessner, Veit	203, 241	Rybakowski, Janusz	209, 391
Rohde, Anke	207, 211, 240, 288	Rzyski, Herbert	201
Rohner, Christian	270	<b>S</b>	
Röhrig, Jeanette	126, 210	S., Gesa	119
Roick, Christiane	152	Sabaß, Lena	203, 238, 240, 260, 287, 381, 389, 390
Roiz, Julie	258	Sabatowski, Rainer	162
Roll, Sibylle C.	188, 283	Sabunaeva, Maria	140, 378
Romanos, Marcel	212	Sachs, Josef	197
Romer, Georg	127, 189, 258	Sachse, Rainer	287
Romero, Barbara	202	Sack, Ulrich	214
Romero, Yadira Roa	256	Sadohara-Bannwarth, Chiharu	263
Röpke, Stefan	148	Sagebiel, Anne	271
Rosa, Hartmut	145	Sahlender, Sandra	235
Rosch, Ingeborg	141	Saimeh, Nahlah	94, 114, 141, 178, 208, 216, 272, 292, 294, 396
Roschinski, Benjamin	241	Saiz-Matinez, Pilar	264
Rose, Dirk-Matthias	253	Salize, Hans-Joachim	123, 151, 171, 184, 194, 231, 388
Rose, Nina	214	Salo, Benny	173
Rosemann, Matthias	184	Saltuari, Petra	224
Rosenblau, Gabriela	143	Salz, Anna-Lena	128
Roser, Patrik	273	Salzwedel, Cornelia	269
Röska, Kerstin	234	Sämann, Philipp	265
Röske, Thomas	47, 121, 131, 357, 374	Sambataro, Fabio	265, 266
Rösler, Michael	130, 140, 161, 173, 215, 244, 263, 264, 272, 310	Sambhi, Rajvinder Singh	136, 377
Rossegger, Astrid	146, 208	Samman, Irene	284
Roßkopf, Silke	250	Sanchez, Raymond	270, 271
Rössler, Wulf	127, 163, 190, 195, 203, 212, 220, 240, 261, 273, 274, 285	Sander, Christian	128, 271
Rößner, Veit	241, 242, 246	Sander, Kerstin	250
Roth, Gerhard Dieter	234	Sandner, Gabriele	126

Sänger, Sylvia	199	Scherer, Martin	172, 182, 185
Santangelo, Philip	148	Scherer, Sandra	118
Santtila, Pekka	173	Scherk, Harald	260
Sappok, Tanja	128, 181, 243	Schermelleh-Engel, Karin	254
Sarkheil, Pegah	266	Schermuly-Haupt, Marie Luise	151
Sartorius, Alexander	129, 152, 174, 185, 194, 244, 251, 280, 292, 376, 388, 396	Scherpiet, Sigrid	243, 247, 266
Sartorius, Norman	52, 87, 148, 158, 161, 167, 186, 204, 217, 361, 379, 381, 383, 386, 391	Scherrmann, Ulrich	282
Sartory, Gudrun	132, 173, 228	Scheu, Florian	218
Saß, Henning	54, 104, 129, 136, 155, 156, 162, 170, 377, 382	Scheurich, Armin	288
Sasse, Johanna	238	Scheuvens, Lea	246
Satrapi, Peyman	284	Schichov, S. N.	226
Sauer, Heinrich	182, 219	Schilbach, Leonhard	185
Sauerbier, Anne-Lena	179, 204, 252, 253, 258	Schillen, Thomas	116, 221
Saur, Ralf	226, 234, 266	Schilling, Claudia	179
Sauter, Cornelia	169	Schilling, Lisa	242
Sauter, Dorothea	134, 160	Schilling, Oliver Karl	245
Sauter, Michael	134	Schiltz, Kolja	200, 272, 390
Savaskan, Egemen	225	Schimke, Josefin	226
Sawall, Anna	245	Schimmelmann, Benno G.	123, 253
Scavladze, N.	223, 393	Schindler, Christoph	264
Schabram, Ina	265	Schindler, Cornelia	229
Schachtzabel, Claudia	182	Schindler, Stephanie	240, 267, 381
Schädle-Deining, Hilde	145	Schirm, Sandra	287
Schad, Daniel J.	210	Schläfke, Detlef	272
Schaefer, Christof	288	Schlagenhauf, Florian	174, 187, 210, 235, 236, 246, 257, 270
Schaefer, Roland	264	Schläpfer, Thomas E.	58, 66, 93, 104, 107, 114, 122, 129, 148, 154, 155, 161, 185, 191, 200, 204, 217, 261, 292, 364, 369, 374, 376, 379, 380, 387, 396
Schäfer, Ina	210	Schlauf, Eckehard	211, 274
Schäfer, Ingo	125, 145, 183, 198, 204, 205, 223, 251, 386, 391	Schlegl, Sandra	127
Schäfer, Jörg	221	Schliebener, Gudrun	72, 102, 104, 129, 155, 227
Schäfer, Lena	210	Schlimme, Jann E.	217, 292, 295, 396
Schäfer, Martin	143, 170	Schloss, Patrick	251
Schäfer, Tobias	275	Schlosser, Hans-Georg	265
Schalinski, Inga	258	Schlösser, Ralf	182
Schall, Arthur	176, 235	Schlüter-Müller, Susanne	224
Schaller, Ulrich Max	143	Schmahl, Christian	124, 140, 148, 242, 243, 261, 378
Schamisso, Yasmine	236, 246	Schmauß, Max	130, 202, 234, 250, 281
Schanda, Hans	197	Schmeck, Klaus	224
Schanze, Christian	173, 384	Schmid, Peter	253
Schärer, Lars O.	261	Schmid, Petra	253
Scharf, Maria	245	Schmid-Siegel, Brigitte	235
Scharinger, Christian	238	Schmidt, Astrid	245
Scharnholz, Barbara	224	Schmidt, Christiane	256
Schatzberg, Alan F.	57, 66, 114, 121, 136, 363, 369, 374, 377	Schmidt, Claudia	274
Schaub, Annette	247	Schmidt, Frank	240, 268, 381
Schaub, Daniela	275	Schmidt, Konrad	128, 251, 264
Schaub, Markus	155, 239	Schmidt, Luise	214
Schauer, Maggie	203, 390	Schmidt, Marion	229
Schäufele, Martina	156, 255	Schmidt, Roger	261, 286
Schedlowski, Manfred	143	Schmidt, Silke	95, 229
Scheele, Dirk	188	Schmidt, Sonja	120, 251, 252
Scheerer, Hanne	239, 243	Schmidt, Ulrike	182
Scheffler, Klaus	226, 234	Schmidt-Degenhard, Michael	156
Scheibe, Monika	265, 266	Schmidtgen, Kerstin	263
Scheibenbogen, Oliver	157	Schmidt-Kastner, Rainald	268
Scheiblich, Antonia	266, 269	Schmidt-Kraepelin, Christian	188, 280
Scheidegger, Milan	152	Schmieder, Matthias	275
Scheidhacker, Michaela	251	Schmierer, Phöbe	232, 395
Scheier, Katharina	275	Schmitgen, Mike M.	218
Scheithauer, Herbert	146	Schmitt, Andrea	251
Schelle, Mercedes	273	Schmitt, Ruth	124
Scheller, Maryse	262	Schmitt, Wolfram	217
Schellong, Julia	223	Schmitz, Christoph	206
Schepker, Renate	123, 130	Schmuhl, Hans-Walter	65, 131, 137, 227, 394
Scherag, André	164	Schmüser, Anke	258
Scherbaum, Norbert	243	Schneck, Micheal	249
Scherer, Anne	249, 254, 276	Schneibel, Rebecca	238, 284

Schneider, Anja	188, 226, 386	Schüle, Cornelius	241
Schneider, Barbara	211, 220, 275, 293, 297, 397	Schulte, Bernd	256
Schneider, Evelyn	246	Schulte-Körne, Gerd	115
Schneider, Frank	48, 65, 68, 70, 89, 117, 121, 137, 155, 163, 168, 174, 180, 182, 193, 200, 203, 227, 266, 267, 293, 297, 358, 375, 394, 397	Schulte-Markwort, Michael	204, 205, 251
Schneider, Jan	274	Schultheis, Julia	239
Schneider, Miriam	269	Schultz, Christoph	182
Schneider, Nico	128, 273	Schultz, Jobst-Hendrik	287
Schneider, Nora	242	Schultz, Robert T.	244
Schneider, Roland	237	Schulz, André	242
Schneider, Sabrina	246, 264, 265	Schulz, Andrea	128, 239
Schneider, Silvia	183	Schulz, Eberhard	246, 250
Schneider, Sophia	188, 386	Schulz, Holger	126, 259, 269, 375
Schneider, Udo	256	Schulz, Michael	120, 134, 145, 177, 222, 276
Schneider, Wolfgang	258	Schulz-Du Bois, Anna Christina	235
Schneider-Haßloff, Henriette	174	Schulz-Du Bois, Christian	219, 235
Schnell, Knut	124, 213, 218, 259	Schulze, Constanze	127
Schneller, Carlotta	221, 252	Schulze, Dietmar	172
Schnieder, Hildegard	231	Schulze, Thomas G.	84, 86, 133, 163, 186, 226, 227, 238, 258, 281, 382
Schnitzler, Alfons	165	Schulz-Schäffer, Walter	206
Schnitzler, Romina	235, 255	Schumacher, Sarah	160
Schober, Ilka	241, 242, 246	Schumann, Gunter	133, 183, 268
Schoepf, Dieter	124, 213, 259	Schura, Richard	186
Schoettle, Daniel	258	Schuster, Rilana	256
Scholl, Gina	244	Schutova, Barbora	263
Scholtes, Stefanie	264	Schütz, Frank	272
Scholtysik, Dirk	200	Schütze, Maren	117
Scholz, Christine	238	Schwab, Michael	245
Scholz, Claus-jürgen	260	Schwab, Simon	246, 265
Schomerus, Georg	183, 198, 220, 386	Schwahn, Christian	165, 266, 268
Schön, Daniela	256	Schwarte, Kathrin	201, 205, 390
Schön, Gerhard	131	Schwarting, Rainer	247
Schönfeld, Johannes	276	Schwartz, Caroline	214
Schönig, Kai	269	Schwarzbach, Michaela	175
Schönknecht, Peter	234, 240, 267, 268, 271, 381	Schwarz, Constanze	259
Schoppmann, Susanne	145	Schwarz, Peter	191
Schorn, Holger	272	Schwarz, Sabine	252
Schossner-Haupt, Alexandra	117, 251	Schwarz, Stefan	245
Schott, Björn	127, 181, 232, 395	Schwarz, Vera	147
Schöttle, Daniel	123, 138, 179, 198, 204, 252, 253	Schweckendiek, Jan	182
Schouler-Ocak, Meryam	61, 139, 163, 168, 178, 195, 240, 291, 292, 294, 367, 382, 383, 396	Schweiger, Ulrich	86, 91, 117, 123, 140, 144, 151, 191, 192, 282
Schøyen, Helle	261	Schweigkofler, Hansjörg	275
Schramm, Elisabeth	124, 166, 187, 213, 250, 259, 262	Schwendemann, Sven	247
Schramme, Thomas	191	Schwappe, Alexander	260
Schrank, Beate	220	Schwerthöffer, Dirk	172, 226
Schreckenbach, Daniela	254	Schwitzer, Josef	275
Schredl, Michael	132, 179	Sebold, Miriam	210
Schreiber, Wolfgang	95, 140, 227	Sedlmeier, Peter	141
Schreiner, Andreas	237, 257, 258	Seeger, Eva	241, 242
Schreiner, Simon	219, 232, 395	Seeher, Christian	239
Schreitmüller, Brigitte	245	Seemüller, Florian	171
Schriner, Friederike	148	Seewald, Katharina	146
Schrittwiesser, Ulrike	275	Seffer, Dominik	247
Schröder, Johanna	166, 208	Segmiller, Felix	162
Schröder, Johannes	210, 247, 255, 280	Sehmer-Kurz, Kerstin	271
Schröder, Katrin	251	Seibert-Grafe, Monika	188
Schröder, Welf	170	Seidel, Maria	241, 242, 246
Schroeder, Friederike	268	Seidel, Michael	173, 196, 221, 292, 296, 384, 396
Schroeder, Katrin	204, 391	Seidenbecher, Constanze	127, 181, 232, 395
Schroeter, Matthias	229, 235, 247, 249, 265, 266	Seidl, Elias	238
Schroth, Jennifer	254	Seidl, Ulrich	120, 247
Schubert, Christiane	214	Seidler, Andreas	115
Schuberth, Madeleine	235	Seifert, Dieter	144
Schubring, David	237	Seifert, Nina Y.	232, 395
Schuhen, Gregor	175	Seiffert, Ernst	253
Schui, Gabriel	254	Seifritz, Erich	88, 134, 157, 161, 239, 249, 266, 269, 270, 272, 376
		Seikkula, Jaakko	194, 388
		Seitz, Hannah	272
		Seitz, Jochen	241

Selberdinger, Christina	260, 389	Spindler, Gabriela	208
Selhausen, Peter	248	Spitzer, Carsten	165, 190, 203, 387
Semrau, Maya	217	Spitzer, Philipp	210, 255, 269
Senkowski, Daniel	247, 256	Spörrle, Matthias	275
Sepanski, Beate	266	Spreckelmeyer, Katja N.	244
Serretti, Alessandro	180, 385	Sprick, Ulrich	135, 249
Setyawan, Juliana	243, 263	Springer, Vivian	256
Severus, Emanuel	187	Sproeber, Nina	266
Seweryn, Mariusz	240, 260, 382, 389	Stäblein, Michael	174, 237, 239
Shababi-Klein, Julia	262	Stadler, Christina	125
Shaw, Ida	117	Stadler, Jörg	167
Sibitz, Ingrid	220	Stadtmüller, Godehard	273
Sieberer, Marcel	193	Staggl, Siegmund	251
Siedentopf, Christian	266	Stalder, Tobias	128
Siegel, Erhard G.	182	Stalla, Günter	269
Siegel, Stefan	186	Stamm, Thomas	187, 252
Siegmund, Ansgar	235	Stämpfli, Philipp	266
Siegrist, Eveline	262	Stane, Laura	276
Siegrist, Johannes	53, 182, 385	Stang, Andreas	262
Sielaff, Gyöngyvér	127, 199	Stanghellini, Giovanni	168, 383
Siemann, Holger	210, 218, 392	Stanischewski, Dominika	152
Signerski-Krieger, Jörg	200	Starcke, Katrin	135
Sikirica, Vanja	243	Stark, Rudolf	160, 182
Sikorski, Claudia	175	Stasun, Ulrike	189
Simon, Alfred	274	Stauber, Rudolf	259, 260, 389
Simon, Andor	159	Staudt, Eva	254
Simon, Perikles	250	Stawski, Mike	173, 384
Singewald, Evelin	251	Stecher-Moor, Julia	148
Singewald, Nicolas	251	Steding, Julius	234, 245
Singh, Jay P.	208	Steffanowski, Andrés	134
Sipos, Valerija	91, 117, 123, 282	Steffen, Astrid	261
Skiba, Martina	239	Steger, Florian	144, 175
Skugarevsky, Oleg	268	Stegmann, Benedikt	244
Skuhareuskaya, Maryna	268	Stegmayer, Katharina	171
Smesny, Stefan	219	Steil, Christian	252
Smiatek-Mazgaj, Bogna	147, 379	Steinau, Sarah	262
Smirnova, Daria	217, 392	Steinböck, Herbert	178
Smolina, N. V.	223, 226, 393	Steinbrecher, Kristina	251
Smolka, Michael	210, 236, 248, 259	Steiner, Johann	56, 67, 136, 153, 182,
Snagowski, Jan	242		200, 377, 390
Snellgrove, Brendan	236	Steinert, Tilman	123, 136, 161, 177, 183,
Sobanski, Esther	169, 215, 244, 262		184, 200, 236, 237, 242, 243,
Sobanski, Jerzy	147, 379		253, 273, 274, 377, 386
Sobieraj, Anna	147, 240, 252, 262, 379, 382	Steinhagen, Volker	94, 283
Sobotka, Lubos	203, 391	Steinhart, Ingmar	177
Soch, Joram	127, 181, 232, 395	Steininger, Stefanie	219, 232, 395
Solati, Jalal	262	Steinmann, Susanne	131
Solojenkina, Xenia	169	Stek, Max L.	237
Soltwedel, Laura	241	Stelzel, Christine	219
Sommer, Iris	174	Stemer, Bettina	260, 389
Sommer, Jens	135, 267	Stemmer, Renate	131
Sommer, Olaf	246	Stengler, Katarina	177, 198, 220, 281, 293, 296, 397
Sorensen, Per	272	Stepan, Alexandra	259, 389
Sorg, Christian	158, 226, 234, 381	Stephan, Patrik	289
Soyka, Michael	162	Stephan, Quirrenbach	270
Sozanska, Ewa	264	Stepniak, Beata	138, 203, 226
Spahn, Daniel	253	Steup, Maja	269
Spanagel, Rainer	209, 391	Stevanovic, Dejan	244
Spangenberg, Gwen	306	Stevens, Andreas	246, 264
Spangenberg, Lena	254, 276	Steyer, Rolf	134
Spannhorst, Stefan	120	Stiegler, Anette	253
Speidel, Susan	143	Stieglitz, Rolf-Dieter	125, 138, 244, 254, 262,
Spellmann, Ilja	174		263, 291
Spengler, Steffi	247	Stieltjes, Bram	120, 243, 247
Spengler, Stephanie	185	Stien, Jochen	245
Sperling, Wolfgang	240, 248, 250, 258, 261,	Stiens, Gerthild	217
	269, 274, 382	Stiglmayr, Christian	123, 148, 203
Sperner-Unterweger, Barbara	260, 389	Stingl, Julia C.	142
Spiegel, Silvana	271	Stochel, Martyna	242
Spiegelhalter, Kai	262	Stoecker, Winfried	200, 390
Spiering, Sharlina	261, 274	Stolle, Martin	251
Spies, Claudia	128, 183	Stompe, Thomas	116

- Stoppe, Gabriela 217  
 Stopper, Helga 271  
 Stopsack, Malte 208, 209  
 Storchak, Helena 174, 237  
 Storch, Monika 273  
 Stösser, Dieter 228  
 Stransky, Elke 245  
 Stratmann, Mirjam 267  
 Straub, Hans-Beatus 248  
 Straub, Joana 266  
 Straube, Benjamin 174, 186, 187, 206  
 Strauß, Bernhard 122, 128, 134, 151, 167  
 Strauß, Maria 128, 240, 267, 381  
 Streit, Fabian 238  
 Streitbürger, Daniel-Paolo 266  
 Streit-Emberger, Brigitte 158  
 Strik, Werner 246, 265  
 Strik, Werner-Konrad 139, 154, 171, 180, 377  
 Strömé, Friederike 135, 236  
 Ströhle, Andreas 94, 150, 157, 160, 186, 187, 191, 206, 222, 254, 270  
 Stroh, Christine 192  
 Ströhmer, Rachel 242  
 Strom, Frederik 273  
 Strohmaier, Christine 245, 250, 271  
 Strohmaier, Jana 238, 240, 260, 268, 382, 389  
 Strunz, Laura 244, 263  
 Stuart, Heather 52, 149, 361, 379  
 Stübler, Jonathan 150  
 Stübner, Susanne 153, 175, 250, 280, 289  
 Studerus, Erich 271  
 Stuhldreher, Nina 273  
 Stuhmann, Anja 239, 247  
 Stuke, Katharina 266  
 Stuppäck, Christoph 239  
 Sturm, Dieter 142  
 Sude, Kerstin 254  
 Suliman, Husam 275  
 Sülz, Christoph 181  
 Sulz, Serge 134, 194  
 Sulzer, James 266  
 Sumaski, Laura 150, 166  
 Sümngig, Ariane 248  
 Sundet, Kjetil 261  
 Sungurtekin, Idil 241  
 Sünkel, Ulrike 245  
 Supprian, Tillmann 253, 255  
 Suslow, Thomas 210, 247, 258  
 Süßenbacher, Stefanie 274  
 Süssmuth, Sigurd 269  
 Suttner, Gerald 250, 258, 261, 274  
 Svilokos, Stevan 236  
 Switala, Christina 261  
 Syrejschikova, T. 223, 393  
 Szczegielnik, Anna 209, 242, 250, 391  
 Szecsenyi, Joachim 115
- T**  
 Tadic, André 188, 201, 390  
 Tagay, Sefik 283  
 Tamvakou, Elena 246  
 Tanasic, Sascha 271  
 Tantra, Martesa 203, 226  
 Tataru, Nicoleta 153, 380  
 Tauber, Simone 147, 379  
 Taupitz, Jochen 197  
 Taylor, Kirsten I. 255  
 Tebartz van Elst, Ludger 169, 184, 193, 262, 283, 285, 292, 396  
 Teichmann, Christin 245  
 Teimann, Sonia 120  
 Teipel, Stefan 188, 210, 217, 219, 225, 234, 252, 386  
 Tendolkar, Indira 210, 218, 259, 389, 392  
 Tereh, Anina Deborah 265  
 Tesky, Valentina 235, 251  
 Teumer, Alexander 165, 266  
 Themeli, Alba 218, 392  
 Theodoridou, Anastasia 220  
 Theune, Michael 119, 306  
 Thiel, Christian 251  
 Thiel, Friederike 235  
 Thiel, Holger 306  
 Thiel, Nicola 262  
 Thies, Annekatrin 251  
 Thomann, Philipp Arthur 120, 247, 265, 266  
 Thomas, Anna 84, 85, 96, 121, 135, 230  
 Thomas, Christine 120, 131, 244, 262, 288  
 Thomasius, Rainer 107, 128, 170  
 Thomé, Friederike 250  
 Thome, Johannes 175, 196, 249, 263, 310, 388  
 Thorand, Barbara 166  
 Throm, Siegfried 131  
 Thürauf, Norbert 207  
 Thyrian, Jochen René 226, 234  
 Thyrian, René 147  
 Tidow, Nicola 201, 205, 390  
 Tiesler, Fabian 128  
 Tietz, Alexandra 118, 160, 206, 224  
 Tigges, Wolfgang 192  
 Timm, Jürgen 188  
 Timmer, Barbara 281  
 Timmermann, Lars 165  
 Timmers, H. Th. Marc 268  
 Tischinger, Michael 273  
 Titze, Doris 127  
 Tiwari, Arun 174, 179, 385  
 Tlach, Lisa 185, 199  
 Todd, Oliver 262  
 Tokarev, V. 223, 393  
 Tölle, Thomas R. 182  
 Tominschek, Igor 117  
 Töpner, Theresia 260  
 Töpfer, Max 120  
 Torhorst, Arnold 252, 293, 296, 397  
 Tornau, Friederike 120, 245  
 Tort Herrando, Vicente 153, 380  
 Torup, Lars 272  
 Tost, Heike 179  
 Toto, Sermin 153, 250, 256, 289  
 Touil, Elina 274  
 Tragl, Karl Heinz 234  
 Tränkner, Anja 240, 271, 381  
 Trapp, Kristin 185, 258  
 Trapp, Sabrina 247  
 Trapp, Wolfgang 128, 255  
 Traub, Joachim 141, 273  
 Träuble, Birgit 239  
 Trautmann-Villalba, Patricia 206, 224  
 Treetck, Bernhard van 293, 296, 396  
 Trenckmann, Ulrich 260  
 Trettin, Marco 239  
 Trinka, Eugen 266  
 Tritt, Karin 273  
 Troitzsch, Ute 251  
 Trost, Sarah 267  
 Trotzke, Patrick 135  
 Tschacher, Wolfgang 135, 218, 259  
 Tschiesner, Reinhard 261, 275  
 Tschitsaz, Armita 239  
 Tschudin, Sibil 118  
 Tuin, Inka 220  
 Tumani, Visal 228, 262

- Tumova, Jana 203, 391  
 Turck, Chris 192  
 Turmes, Luc 224, 260  
 Turner, Robert 267  
 Tuschen-Caffier, Brunna 187, 238, 259  
 Tüscher, Oliver 262  
 Tyrer, Peter 162, 382
- U**  
 Udvardi, Patrick Thomas 264  
 Uhlmann, Carmen 242, 243, 253  
 Uhlmann, Christina 187  
 Uhr, Manfred 192  
 Ullmann, Utz 200  
 Ullrich, Heiko 235, 249  
 Ulrich, Finckh 234  
 Ulrich, Rolf 250  
 Unschuld, Paul G. 232, 395  
 Unschuld, Paul Gerson 219  
 Unterberger, Iris 266  
 Unterecker, Stefan 171  
 Urbanowicz, Tatiana 269  
 Urbanski, Marcin 250  
 Urech, Corinne 118  
 Urgosik, Dusan 249  
 Usher, Juliana 267  
 Utschakowski, Jörg 252  
 Utsch, Michael 221, 293, 296, 397  
 Uwe, Herwig 239  
 Uzbekov, Marat 223, 226, 393
- V**  
 Vaaler, Arne 261  
 Vaitl, Dieter 160  
 Valdes-Stauber, Juan 181  
 Vallon, Pierre 212  
 Valzdorf, Elena 276  
 van Belle-Kusse, Patty 173, 384  
 van de Glind, Geurt 211  
 van den Brink, Wim 272  
 van den Bussche, Hendrik 131, 156  
 van der Auwera, Sandra 128, 239  
 van der Kloet, Dalena 159, 381  
 van Eijndhoven, Philip 218, 392  
 van Harmelen, Anne-Laura 159, 381  
 van Os, Jim 268  
 van Tol, Marie-José 167  
 van Treeck, Bernhard 120, 220  
 Vardar, Azra 139  
 Varikuti, Deepthi 167  
 Varvagiannis, Konstantinos 267  
 Vasic, Nenad 265, 266  
 Vauth, Roland 171, 195, 225, 285, 308  
 Veckenstedt, Ruth 218  
 Vedder, Helmut 249  
 Veidt, Jennifer 238  
 Veil, Cornelia 226, 234  
 Veit, Ralf 230, 394  
 Veling, Wim 163, 382  
 Veltrup, Clemes 170  
 Vengelienne, Valentina 209, 391  
 Venkatesha, Murthy 258  
 Vennewald, Nadja 167  
 Verbanck, Paul 236, 246  
 Verhülsdonk, Sandra 235, 255  
 Vernaleken, Ingo 209, 268, 272, 283, 391  
 Veselinovic, Tanja 147, 272, 379  
 Vettorazzi, Eik 218  
 Vetter, Johannes 239, 249, 269  
 Vetter, Nora 259  
 Vetter, Stefan 117  
 Victor, Thanuja 235
- Vidailhet, Pierre 237, 257, 258  
 Vida, Peter 243  
 Vieker, Henning 267  
 Vierheilig, Nina 166  
 Vietze, Stephanie 264  
 Villringer, Arno 213  
 Vilsmeier, Frank 122, 145, 276, 292, 295, 396  
 Vilyanov, V.B. 248  
 Vimont, Alexandre 258  
 Vitacco, Deborah 118  
 Vlaskalic, Zivko 244  
 Vllasaliu, Leonora 239  
 Vocke, Sebastian 185  
 Voderholzer, Ulrich 114, 127, 145, 147, 181, 214, 262, 269, 287, 385  
 Vogel, Matthias 258  
 Vogel, Peter-Christian 90, 156, 178  
 Vogeley, Kai 134, 143, 163, 181, 184, 243  
 Voget, Mareike 248  
 Voigtländer, Brigitte Sandy 154, 274  
 Volkert, Julia 248, 261  
 Volkmann, Jens 245  
 Vollenweider, Franz X. 271  
 Vollmann, Jochen 132, 137, 168, 189  
 Vollmar, Horst Christian 217  
 Vollmayr, Barbara 129, 194, 248, 376, 388  
 Vollstädt-Klein, Sabine 247, 268  
 Volman, Inge 232, 395  
 Volz, Hans-Peter 309, 310  
 Völzke, Henry 125, 266, 375  
 von Arnim, Christine 228  
 von Ascheraden, Christoph 168  
 von dem Berge, Ulrich 134  
 von dem Knesebeck, Olaf 185  
 von Der Haar, Michael 162, 178  
 von Georgi, Richard 236  
 von Hecker, Birgit 153  
 von Heymann, Friedrich 273  
 von Holt, Klaus 250  
 von Klitzing, Kai 127, 189  
 von Lersner, Ulrike 95, 177, 229  
 von Ploetz, Klaus 128  
 von Spreckelsen, Regina 257  
 von Wolff, Alessa 166, 231  
 Voß, Bianca 148, 210, 219, 267, 268  
 Voss, Martin 216, 258  
 Voß, Tatjana 201, 289  
 Vukicevic, Andrija 290  
 Vymazal, Josef 249, 265
- W**  
 Wabitsch, Martin 192  
 Wächtler, Claus 289  
 Wachtlin, Daniel 188  
 Waehnke, Olaf H. 217  
 Wagels, Lisa 167  
 Wagenblast, Barbara 133, 227  
 Wagner, Birgit 128, 138, 254  
 Wagner, Gerd 149, 182  
 Wagner, Michael 132, 222, 228  
 Wagner, Thomas 286  
 Wahl, Sonja 126  
 Wahl, Hans-Werner 244, 245  
 Wahl-Kordon, Andreas 214  
 Waimer, Reinhold 199  
 Walder, Nadja 235  
 Waler, Manfred 251  
 Walger, Petra 228  
 Walkenhorst, Ursula 292, 294, 396  
 Walloch, Judith 251  
 Walser, Gerald 266  
 Wälte, Dieter 288



Waltenberger, Johannes	150, 254	Wessels, Helen	228
Walter, Bertram	182	Westphal, Sabine	241
Walter, Henrik	53, 61, 64, 124, 152, 157, 168, 169, 207, 213, 219, 229, 232, 247, 259, 393, 395	Wetter, Thomas-Christian	157, 209, 227, 293, 297, 397
Walter, Marc	125, 159	Wettstein, Anne Laure	262
Walter, Martin	118, 152, 167, 185, 196, 200, 201, 207, 223, 247, 248, 390	Wewetzer, Christoph	241
Walther, Sebastian	171	Weydt, Patrick	269
Waltereit, Robert	269	Weyerer, Siegfried	172, 175
Walton, Esther	203	White, Tonya	203
Wancata, Johannes	229, 274	Whitworth, Alexandra B.	241
Wandinger, Klaus-Peter	200, 390	Wichers, Marieke	211
Wandschneider, Roland	263	Widschwendter, Christian	218, 257, 258
Wankerl, Matthias	128	Wieczorek, Arnold	170
Wanner, Stefanie	263	Wiedemann, Georg	132, 194, 228
Warnke, Andreas	215	Wiedemann, Klaus	190, 251, 267, 269, 310, 387
Warnke, Ingeborg	190	Wiedl, Karl H.	246
Warschburger, Petra	122	Wiefel, Andreas	189
Wartelsteiner, F.	218	Wieggers, Maike	247
Wasserman, Danuta	59, 119, 156, 244, 365, 374, 380	Wiers, Corinde	185, 247
Watzka, Carlos	211	Wiese, Birgitt	131, 172, 250
Watzke, Birgit	185, 259	Wiesemann, Claudia	141
Weber, Bernhard	239	Wiesener, Michael S.	264
Weber, Christian	191	Wiesjahn, Martin	220
Weber, Heike	268	Wieske, Franziska	262
Weber, Stefanie	239	Wiesmann, Ulrich	177
Weber-Fahr, Wolfgang	129, 152, 194, 255, 376, 388	Wiggins, Osborne P.	52, 129, 361, 375
Wedekind, Dirk	242, 256, 271	Wilbertz, Tilmann	236
Wedemeyer, Niclas	117, 289	Wilczyński, Krzysztof	209, 391
Wedler, Hans	125	Wild, Barbara	170
Wedler, Kristina	272	Wild, Marlene	202
Weeg, Dagmar	255	Wildeisen, Benedict	261
Weeß, Hans-Günter	169	Wildgruber, Dirk	143, 196
Wegmann, Elisa	243	Wildt, Bert Theodor te	290
Wehmeier, Peter M.	243, 269	Wilhelm, Barbara	169
Weickelt-Starzinski, Elke	270	Wilke, Marko	226, 234, 266
Weidner, Kerstin	223	Willenborg, Bastian	86, 89, 91, 92, 151, 191, 281, 282
Weidt, Steffi	262, 266	Willrodt, C.	151
Weierstall, Roland	197, 198	Wilms, Bettina	280
Weigl, Johannes	269	Wiltfang, Gaby	251
Weih, Markus	274	Wiltfang, Jens	120, 173, 189, 210, 218, 225, 235, 244, 246, 252, 255, 263, 265, 269, 310, 392
Weikert, Thomas	267	Wimmer, Lioba	247
Weiller, Cornelius	267	Wimmer-Puchinger, Beate	207
Weinbeer, Johannes	210	Windischberger, Christian	201
Weinman, John	245, 271	Winet, Ruedi	274
Weisbrod, Matthias	163, 236, 243, 247, 288, 309	Wingenfeld, Katja	148, 159, 165, 190, 213, 254, 381, 387, 392
Weisenberger, Bruno	255	Wink, Charlotte	260, 389
Weißflog, Sabine	145, 306	Winkler, Daniela	138
Weiss, Jessica	241, 242	Winkler, Dietmar	240, 382
Weiß, Kathrin	159	Winkler-Pjrek, Edda	240, 382
Weiß, Saskia	176	Winter, Bernward	167
Welpé, Isabell	261, 275	Winter, Christine	209, 226, 248, 260, 262, 389, 391
Welschehold, Michael	221	Winter, Dorina	124, 148, 243
Welsch, Kathrin	263	Winter, Klaas	184
Wendt, Carolin	231	Winter, Lotta	290
Wendt, Frank	94, 216	Wippermann, Volker	234
Weniger, Godehard	117	Wirtz, Gustav	223, 243, 282
Wensing, Michel	251	Wirtz, Markus	143
Wenzel-Seifert, Katharina	202	Wissen, Franziska	236
Wenzler, Sofia	239	Wißmann, Peter	176
Werkstetter, Lara	120, 251, 252	Witowski, Lukasz	209, 391
Werner, Christian	270, 271	Witt, Karsten	185
Werner, Jan-Dirk	258	Witt, Stephanie	201, 232, 267, 268, 390, 395
Werner, Jillian	255	Wittchen, Hans-Ulrich	118, 142, 162, 186, 187, 197, 206, 212
Weschenfelder-Stachwitz, Heike	127, 189	Wittekind, Charlotte	161
Wesenberg, Sandra	255	Wittfeld, Katharina	125, 266, 268, 375
Wessa, Michèle	207		
Wessel, Bernd	170		

Wittmann, André	186, 187, 206	<b>Z</b>	
Wittmann, Werner W.	134	Zabel, Ronald	217
Wittorf, Andreas	132, 193, 228, 388	Zahs, Stefan	306
Witzel, Joachim	272	Zamarian, Laura	266
Wobrock, Thomas	90, 149, 173, 178, 250	Zänkert, Sandra	128
Wöckel, Lars	241	Zarbock, Gerhard	117
Wodarz, Norbert	170	Zawada, Karolina	264
Wöhr, Markus	247	Zeidler, Thorsten	150
Wojcik, Sonja	226	Zeiler, Joachim	201
Wolak, Anna Maria	242	Zejda, Jan	242
Wolburg, Anna	262	Zeller, Julia B. M.	245, 246
Wolfersdorf, Manfred	125, 137, 146, 211, 220, 253, 293, 297, 397	Zemlin, Claudia	176
Wolff, Christian	263	Zens, Christine	175, 290
Wolff, Jan	189, 275	Zepf, Florian D.	241, 268
Wolff, Ulrike	248	Zerres, Klaus	267
Wolff-Menzler, Claus	214	Zeschel, Eike	187
Wolf, Isabell	224	Zetzsche, Thomas	274
Wolf, Maike	199	Zhu, Gu	260, 389
Wolf, Margarete	272	Ziegenbein, Marc	193
Wolf, Martin	249	Ziegenhain, Ute	164
Wolf, Nadine Donata	265, 266	Ziegler, Matthias	243
Wolf, Rainer	275	Zieglgänsberger, Walter	149, 196
Wolf, Ralf	141	Zielasek, Jürgen	149, 251, 280
Wolf, Robert Christian	120, 221, 247, 265, 266	Zietlow, Anna-Lena	160, 224, 239, 269
Wöfling, Klaus	107, 128, 167, 210, 231, 283	Ziewitz, Jörg	221, 252
Wolfinger, Thomas	154	Zill, Jödis M.	189
Wollburg, Eileen	238	Zill, Peter	174, 203, 240, 381, 390
Wolters, Carolin	243	Zilles, David	248
Wölwer, Wolfgang	132, 228	Zimmer, Claus	226
Wormeck, Imke	95, 229	Zimmermann, Jörg	181, 246
Wörner, Verena	249	Zimmermann, Marco	244, 263
Worrack, Susanne	128, 251, 264	Zimmermann, Peter	186, 198
Wortmann, Viola	269	Zingsheim, Rebecca	271
Wright, Margaret	240, 382	Zink, Mathias	153, 257
Wucherer, Diana	147	Zinkhan, Melanie	262
Wudarczyk, Olga	190, 254, 387	Zinkler, Martin	177, 183, 205, 386
Wüstenberg, Torsten	185, 247, 258	Zipfel, Stephan	165, 166, 253
Wylezek, Leontyna	240, 382	Zipser, Britta	118
Wyss, Michael	219, 232, 395	Zittel, Sulamith	249
		Znoj, Hansjörg	135
<b>X</b>		Zohsel, Katrin	135
Xepapadakos, Franziskos	274	Zolotova, Julia	132
		Zorn, Peter	194, 291
<b>Y</b>		Zuaboni, Gianfranco	306
Yakushev, Igor	266	Žukov, Ilja	254
Yalcin-Siedentopf, Nursen	154, 218, 237, 257	Zurowski, Bartosz	188, 214, 386
Yamamoto, Raina	234	Zwaan, Martina de	56
Yassouridis, Alexander	269	Zwanzger, Peter	129, 157, 166, 167, 181, 201, 205, 212, 239, 247, 376, 390
Yeaw, Jason	243	Zwarg, Thomas	189, 263
Yemeliantsava, Tatyana	243	Zwipp, Johannes	241
Yung, Alison	158	Zwitserslood, Pienie	247

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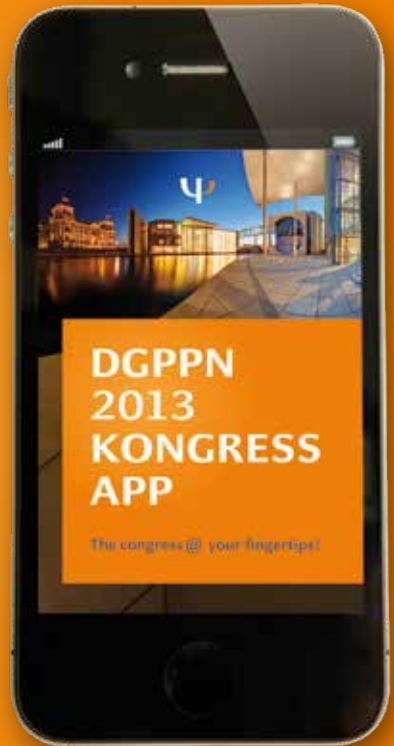
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