

# PROGRAMME



*Scandinavian College  
of  
NeuroPsychopharmacology*

# SCNP

*58<sup>th</sup> Annual  
Meeting of the  
Scandinavian College  
of NeuroPsychopharmacology*

*Aarhus - 26-28 April 2017*

*<http://scnp.org>*

# Welcome to SCNP 2017

## Dear SCNP 2017 participant..!

### **WELCOME**

Welcome to the 58<sup>th</sup> annual meeting of the SCNP. We have in 2017 attempted to create an educational program with broad appeal.

### **WE WANT YOUR EVALUATION**

As we can always improve our efforts, we ask all participants to fill in the anonymous evaluation form during the meeting, and hand it in upon conclusion. You can also make suggestions to future meetings, as well as other general comments. Hand in your evaluations in the box at the registration desk.

### **POSTER SESSION**

During the poster session, the scientific committee will evaluate the best posters exhibited. The best clinical and best preclinical poster will be awarded each €500 during the dinner.

### **YOUNG SCIENTISTS SYMPOSIUM**

One of the main traditions in the history of SCNP is the young scientists symposium (see page 6), held in the afternoon on Thursday, 27 April.

Six young researchers will present their work in a prestigious competition of the SCNP Young Scientist Award 2017, and €2000. Come and join these impressive lectures....

**The SCNP board**

# Board members

## 2016-2017

### **President:**

Professor Gregers Wegener  
Aarhus (DK)

### **Past President:**

Professor Ole A. Andreassen  
Oslo (NO)

### **Treasurer:**

Assoc. Professor Páll Matthíasson  
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### **Secretary:**

Assoc. Professor Olli Kampman  
Tampere (FIN)

Professor Bo Söderpalm  
Gothenburg (SE)

Professor Anders Tingström  
Lund (SE)

Erik Jedenius - Janssen  
Stockholm (SE)

**PRE-MEETING EVENT**

**WEDNESDAY, 26 April 2017**

**13.00-19.00 CINP EDUCATIONAL WORKSHOP  
UPDATE ON NEUROPSYCHOPHARMACOLOGY**

**ADHD - from diagnosis to intervention**

Workshop speakers & discussants

Michael Huss (Mainz, Germany)

Jacob Ørnberg (Aalborg, Denmark)

Gregers Wegener (Aarhus, Denmark)

Bo Söderpalm (Gothenburg, Sweden)

## **THURSDAY, 27 APRIL 2017**

**09.00- REGISTRATION OPENS**

**09.00-10.00 SCNP GENERAL ASSEMBLY (MEMBERS ONLY)**

**10.00-10.05 SCNP 2017 Opening**

**President's Welcome**

Gregers Wegener (Aarhus, Denmark)

**10.05-10.50 OPENING LECTURE**

**SCNP 2017 Opening Lecture**

Moderator: Gregers Wegener (Aarhus, Denmark)

**A perspective on ethical and practical aspects of  
forced treatment**

Pall Mathiasson (Reykjavik, Iceland)

**10.50-11.00 STRETCHING LEGS BREAK**

**11.00-13.00 PLENARY SESSION**

**Update on new drugs**

Moderators: Ole A. Andreassen (Oslo, Norway), Anders

Tingström (Lund, Sweden)

**Guanfacin - pharmacological profile and clinical use**

Michael Huss (Mainz, Germany)

**NMDA receptor modulators as possible treatments  
for CNS disorders**

Torsten Meldgaard Madsen (Evanston, USA)

**Recent advances in targeting  $\alpha$ 2-adrenergic  
receptors for new neuropsychiatric therapeutics**

Mo Shahid (Turku, Finland)

## 13.00-13.45 LUNCH

## 13.45-15.15 SCNP YOUNG SCIENTIST SYMPOSIUM

Moderators: Gregers Wegener (Aarhus, Denmark) & Ole A. Andreassen (Oslo, Norway)

### **Does stimulation of $\alpha 7$ nicotinic receptors alter NMDA receptor-mediated neurotoxicity in hippocampal cultures?**

Denise Happ (Aarhus, Denmark)

### **A naturalistic study of antipsychotic-associated side effects**

Trude Jahr Iversen (Oslo, Norway)

### **Impact of preadmission anti-inflammatory drug use on risk of depression and anxiety after critical illness**

Clara Reece Medici (Aarhus, Denmark)

### **Inflammatory markers are altered in severe mental disorders independent of comorbid cardiometabolic disease risk factors**

Ragni Mørch (Oslo, Norway)

### **Dose-dependent Social-cognitive Effects of Intranasal Oxytocin Delivered with Novel Breath Powered Device in Adults with Autism Spectrum Disorder: A Randomized Placebo-controlled Double-blind Crossover Trial**

Daniel Quintana (Oslo, Norway)

### **Rapid augmentation of antipsychotic drugs by sodium nitroprusside (SNP). Behavioral assessment and effect on brain dopaminergic transmission in rats.**

Joep Titulaer (Stockholm, Sweden)

# Congress Programme

## **15.15-15.45 COFFEE BREAK**

## **15.45-16.30 SCNP LECTURE**

Moderator: Páll Matthíasson (Reykjavik, Iceland)

### **Progressive neuroanatomical abnormalities in he psychoses and the impact of psychopharmacology**

Colm McDonald (Galway, Ireland)

## **16.30-17.15 SCNP LECTURE**

Moderator: Olli Kampmann (Tampere, Finland)

### **Erythropoietin to target cognitive impairment: key findings from studies in mood disorders and methodological implications**

Kamilla W. Miskowiak (Copenhagen, Denmark)

## **17.15-18.45 POSTER SESSION**

Refreshments

## **19.45- SCNP 2017 Dinner**

Dinner at Restaurant Nose2tail, Copenhagen

## **FRIDAY, 28 APRIL 2017**

### **09.00-09.45 SCNP LECTURE**

Moderator: Anders Tingström (Lund, Sweden)

#### **Rapid acting antidepressant intervention: from ketamine to future strategies**

Gregers Wegener (Aarhus, Denmark)

### **09.45-10.15 COFFEE BREAK**

### **10.15-11.45 PLENARY SESSION**

#### **Treatment responses and pathophysiology in mood disorders**

Moderators: Ole Andreassen (Oslo, Norway) & Bo Söderpalm (Gothenburg, Sweden)

#### **Biomarkers of lithium response**

Thomas G. Schulze (Munich, Germany)

#### **Quinolinic acid and suicide**

Sophie Erhardt (Stockholm, Sweden)

#### **CSF GABA is reduced in first-episode psychosis and associates to symptom severity**

Göran Engberg (Stockholm, Sweden)

### **11.45-13.15 PLENARY SESSION**

#### **Recent new updates on ADHD and Autism spectrum disorders**

Moderators: Per Hove Thomsen (Aarhus, Denmark) & Bo Söderpalm (Gothenburg, Sweden),



**ADHD in criminal offenders: short and long term effects of treatment**

Ylva Ginsberg (Stockholm, Sweden)

**How to evaluate the treatment of ADHD in adults**

Mats Fredriksen (Vestfold, Norway)

**Treatment and pathophysiology of Autism spectrum disorders**

Lars Westberg (Gothenburg, Sweden)

**13.15-14.00 LUNCH**

**14.00-14.45 SCNP LECTURE**

Moderator: Olli Kampmann (Tampere, Finland)

**Comparative efficacy and acceptability of anti-manic drugs in acute mania: a network meta-analysis**

Andrea Cipriani (Oxford, United Kingdom)

**14.45-15.15 LEG STRETCHING BREAK**

**15.15-16.45 PLENARY SESSION**

**Effects of Glucagon-like Peptide-1 (GLP-1) Receptor Stimulation - a Molecular Target relevant for Psychiatry**

Moderators: Anders Fink-Jensen (Copenhagen, Denmark) & Gregers Wegener (Aarhus, Denmark)

**Effects of glucagon-like peptide-1 (GLP-1) receptor stimulation on alcohol consumption in mice and non-human primates**

Morgane Thomsen (Copenhagen, Denmark)

**GLP-1 receptor agonists have a sustained stimulatory effect on corticosterone release after chronic treatment**

Vallo Volke (Tartu, Estonia)

**The GLP-1 Analog Liraglutide Improves Glucose Tolerance and Reduces Body Weight in Schizophrenia Spectrum Disorder Patients Treated with Clozapine or Olanzapine**

Anders Fink-Jensen (Copenhagen, Denmark)

16.45

**CONCLUSION OF THE MEETING**

# Practical information

The meeting will be held at

## Panum Institute

University of Copenhagen, Faculty of Health Sciences  
Blegdamsvej 3B (Main Entrance of the Maersk Tower)  
DK-2200 Copenhagen N, Denmark



## Latuda® ▼ (lurasidone)

### PRESCRIBING INFORMATION-SCHIZOPHRENIA FILM-COATED TABLETS

Please refer to the full Summary of Product Characteristics (SPC) before prescribing, particularly in relation to adverse reactions, precautions and contraindications.

**Presentations:** Latuda film-coated tablets, containing lurasidone hydrochloride equivalent to 18.6mg, 37.2mg and 74.5mg lurasidone. **Indication:** Latuda is indicated for the treatment of schizophrenia in adults (≥18 years). **Dosage and Administration:** For oral administration. **Adults:** Recommended starting dose: 37mg once daily with a meal. No initial dose titration is required. Effective dose range: 37 to 148mg once daily. Dose increase should be based on physician judgement and observed clinical response. Maximum dose: 148mg per day. **Elderly (≥65 years):** Caution when treating with higher doses. **Children and adolescents (<18 years):** Not recommended, safety and efficacy not established. Dose adjustments are required in moderate and severe hepatic and renal impairment, see SPC for further details. **Contraindications:** Hypersensitivity to the active substance or any excipients. Concomitant administration of strong CYP3A4 inhibitors and inducers. **Warnings and Precautions:** Clinical improvement may take a few days to some weeks; closely monitor patient during this period. Use with caution in elderly patients with dementia who have risk factors for stroke. Not studied in elderly patients with dementia. Discontinue if patient develops signs or symptoms of neuroleptic malignant syndrome. Consider discontinuation if signs of tardive dyskinesia appear. May exacerbate underlying parkinsonism symptoms. Risk of extrapyramidal symptoms. Caution and clinical monitoring is recommended in patients with a history of seizures or conditions which potentially reduce seizure threshold, cardiovascular disorders, orthostatic hypotension, diabetes or risk factors for diabetes and weight gain. May elevate prolactin levels. All risk factors for venous thromboembolism (VTE) should be identified before and during treatment and preventative measures taken. Caution in patients with a family history of QT prolongation, hypokalaemia and concomitant medication known to prolong the QT interval. Closely supervise high risk patients for risk of suicide. Avoid grapefruit juice. **Pregnancy and lactation:** Do not use during pregnancy unless potential benefit clearly outweighs potential risk to the foetus. Breast feeding should be considered only if the potential benefit of treatment justifies the potential risk to the child. **Interactions:** Caution is advised when combining with alcohol or CNS active medications, and medicines known to cause QT prolongation; P-gp and BCRP inhibitors may increase exposure to lurasidone, lurasidone is an inhibitor of P-gp and BCRP, see SPC for details. Dose adjustment is recommended in combination with CYP3A4 inhibitors and inducers, see SPC for details. Monitoring recommended when lurasidone and CYP3A4 substrates known to have a narrow therapeutic index are coadministered. **Undesirable effects:** In clinical trials, the following adverse drug reactions were reported: **very common** (≥10%): akathisia, somnolence; **common** (≥1% to <10%): weight increased, insomnia, agitation, anxiety, restlessness, parkinsonism, dizziness, dystonia, dyskinesia, nausea, vomiting, dyspepsia, salivary hypersecretion, dry mouth, upper abdominal pain, stomach discomfort, musculoskeletal stiffness, blood creatinine phosphokinase increase, serum creatinine increase, fatigue; **uncommon** (≥0.1% to <1%): decreased appetite, blood glucose increased, catatonia, tardive dyskinesia, tachycardia, hypertension, hypotension, alanine aminotransferase increase, blood prolactin increased; **rare** (≥0.01% to <0.1%): eosinophilia, rhabdomyolysis, neuroleptic malignant syndrome (NMS). This is not a complete list of adverse reactions. Prescribers should consult the SPC in relation to all adverse reactions. **Special precautions for storage:** Store in the original package in order to protect from light. **Special precautions for disposal and other handling:** Any unused medicinal product or waste material should be disposed of in accordance with local requirements. **Legal classification:** Prescription Only Medicine (POM). **Package Quantities and Basic Costs:** Country specific. **Marketing Authorisation Holder:** Sunovion Pharmaceuticals Europe Ltd, Southside, 97 – 105 Victoria Street, London, SW1E 6QT. Latuda is a registered trade mark. **Marketing Authorisation Number(s):** EU/1/14/913/001-021. **Date of Preparation:** February 2016 (MI-LAT-000766).

▼ This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions

**Adverse reactions should be reported to the Competent Authority in your country. Adverse reactions should also be reported to Sunovion Pharmaceuticals Europe Ltd. on +44207 821 2899**

**References:** 1. Meltzer HY *et al.* *Am J Psychiatry* 2011;168:957-967. 2. Loebel A *et al.* *Schiz Res* 2013;145(1-3):101-109. 3. LATUDA Summary of Product Characteristics. 4. Stahl SM *et al.* *J Clin Psychiatry* 2013;74:507-51.



**Job code:** LAT467-17. **Date of preparation:** April 2017

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FOR THE TREATMENT OF

# TREAT THE MIND RESPECT THE BODY

**LATUDA is a once-daily oral atypical antipsychotic which demonstrated:**

**Efficacy:** At doses between 37mg/day and 148mg/day LATUDA separated significantly from placebo at week 6 both in PANSS total score (primary endpoint) and CGI-S score (key secondary endpoint).<sup>1,2</sup>

In a post-hoc analysis, LATUDA was not significantly different from olanzapine in efficacy at week 6.<sup>1</sup> LATUDA showed statistical separation from placebo from as early as day 4 and at all subsequent study visits on PANSS total score<sup>2</sup>

**Tolerability:** Low risk for effect on metabolic parameters<sup>3</sup>, LATUDA had a negligible effect on mean weight in both short and long term studies.<sup>2,4</sup> Some patients may gain weight and this was identified as a common side effect of LATUDA<sup>4</sup>

**Safety:** In clinical trials less than 1% of Patients on LATUDA had hyperprolactinaemia reported as an adverse event<sup>3</sup>



**Latuda**<sup>®</sup>

lurasidone

18,5mg | 37mg | 74mg

SCHIZOPHRENIA IN ADULTS (≥18 YEARS)<sup>3</sup>

## **ABOUT SCNP**

SCNP (Scandinavian College of Neuropsychopharmacology) is the leading psychopharmacology organisation in the Nordic countries, Sweden, Norway, Denmark, Iceland and Finland.

Its mission is to promote research and education in neuropsychopharmacology. It also provides advice on all aspects of neuro-psychiatric drugs. Through these activities, SCNP seeks to advance research thus leading to improved patient care.

The SCNP journal, 'Acta Neuropsychiatrica' is becoming an essential journal and grows in importance.

SCNP welcomes membership applications from all who are dedicated to the highest quality research in neuropsychopharmacology.

### **Benefits of Membership**

- Being part of the leading Nordic organisation focused on neuropsychopharmacology.
- Your own personal subscription including on-line access to 'Acta Neuropsychiatrica', as well as a heavily discounted delegate fee for all meetings organised by SCNP.
- Access to the members-only area on the website, from where selected presentations from the annual meetings can be streamed
- Regular SCNP member letters.

The regular annual membership fee is very low, in 2017, only DKK 400. We invite you to send in your application...!

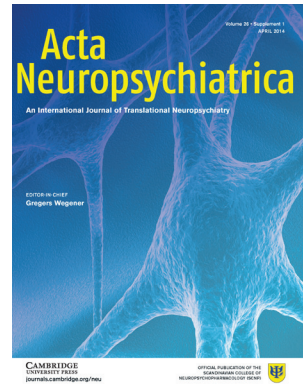
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# Acta

## Neuropsychiatrica 'The journal of SCNP'



Acta Neuropsychiatrica is an international journal that publishes translational high-quality research papers in neuropharmacology, neuropsychiatry and neuroscience.

The journal provides a forum for original basic and clinical research from disciplines and research areas relevant to the pathophysiology, neurobiology, and treatment of neuropsychiatric disorders.

Acta Neuropsychiatrica provides its readership with the latest perspectives from current and emerging fields of psychiatry, neurology, pharmacology, genetics and neuroimaging. Such research may derive from the full spectrum of biological and psychological fields of inquiry encompassing classical and novel techniques/strategies. Emphasis will be given to translational original research that is of wide interest and clearly advances the field.

Acta Neuropsychiatrica welcomes Full-length Original Research Articles, Short Communications, Perspectives, as well as Review Articles. Debate is encouraged in the form of Letters to the Editor. All articles published in Acta Neuropsychiatrica undergo peer review.

Acta Neuropsychiatrica is published bi-monthly by Cambridge University Press on behalf of SCNP, and freely available to all members of SCNP.



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## Acknowledgements

*At the 58<sup>th</sup> Annual Meeting of the SCNP, the Board wishes to acknowledge the unrestricted grants from **LivaNova, Janssen, Shire, HB Pharma and Sunovion** enabling SCNP to invite speakers of highest international standards to our meeting.*

*In particular, the Board of the SCNP wish to acknowledge that **Acta Neuropsychiatrica** has made it possible for the SCNP to invite young scientists to participate in a competition for an oral presentation in Young Scientists Symposium, where the winner of the competition will receive 'The SCNP Award to Young Scientists'.*

*This initiative has developed into a most valuable tradition of the SCNP Annual meetings and has added very much to stimulating young scientists in their performance when participating in scientific meetings.*

*We would also like to acknowledge **the University of Copenhagen** for supporting our meeting with the meeting facilities.*

*Without these sponsorships, we would not have reached the high standard of the meeting.*

*On behalf of the Board of the SCNP*

*Yours sincerely*

**Gregers Wegener**, *President*

