**Project title: S**oci**a**l i**n**tegration during psychiatric **i**npatient **t**herap**y** astransdiagnostic predictor of treatment response (SANITY)

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**Zusammenfassung**

Social connections have a strong impact on mental and physical health. Surprisingly, however, there is a paucity of studies probing the predictive validity of perceived social integration such as subjective social support and loneliness for the outcomes of inpatient treatment of major depressive disorder (MDD) and borderline personality disorder (BPD). Although social impairments are key features of MDD and BPD psychopathology, social integration has been largely neglected, which may therefore explain the minimal translation of predictive molecular or imaging-based biomarkers into the clinic.

We hypothesize that the assessment of negative cognitive biases at baseline will help identify those MDD and BPD patients who are likely to experience less social support and more loneliness during inpatient treatment. Furthermore, we expect that the inclusion of social integration indices will increase the incremental validity for the biomarker-based prediction of treatment response.

We plan to recruit 60 MDD and 60 BPD patients (work program, WPs 1 and 7) and assess negative cognitive biases and the underlying neurobiological mechanisms with behavioral, neuroendocrine, psychophysiological and neural readouts before and after a four-week inpatient treatment (WPs 2 and 8). Perceived social support, loneliness and symptom severity will be measured continuously during the inpatient treatment. To evaluate pathological biases, we will compare the patients’ data with a control group of 30 healthy participants who will also be tested twice (WPs 3 and 4). We plan to conduct uni- and multivariate analyses of the baseline measurements to predict patients’ social integration and treatment response during the inpatient therapy and examine which treatment-related changes are disorder-specific (WP 5) or can be generalized across diagnoses (WP 9).

The findings of this project may (i) help identify vulnerable patients that benefit from adjunct therapies targeting negative social biases, (ii) improve biomarker-based models of treatment prediction and (iii) advance an integrative understanding of dimensional commonalities of yet distinct disorder entities. Based on the proposed study, we will apply for funding at the Clinical Trials Programme of the DFG.