

single nucleotide polymorphisms (SNPs) 15 of RGS2 and 7 of RGS4. Genes were screened using a set-based test (a multiallelic test) in PLINK software followed by single marker association tests, using permutation procedure in order to control for multiple comparison. **Results:** In the set-based test only RGS4 achieve experiment-wide significant association with the comorbidity with SAD ($p=0.046$). Out of the 7 RGS4 single markers SNPs, two (rs12402634 and rs10917672) showed nominally ($OR = 0.22$; $CI_{95\%} 0.07$ to 0.63 ; $p=0.002$) and empirically significant associations that survival correction for the 22 SNPs included in the analysis (corrected p -value 0.040). These two SNPs are in perfect Linkage Disequilibrium. **Conclusion:** In sum, we observed evidence of association between a variant in RGS4 and comorbidity with SAD in PD patients. RGS4 was previously implicated in antihypertrophic effect of secreted natriuretic peptides in the heart and maybe this association with SAD could explain why phobic patients are at higher cardiovascular risk with impact in mortality rates. This study intend to generate hypothesis for future larger studies, designed to confirm this association *a priori* in order to better understand the relation between these variables. Additionally, replication is needed.

AGE OF FIRST ALCOHOL USE AND OPINION ABOUT DUI ENFORCEMENT ARE ASSOCIATED WITH DRINKING AND DRIVING IN BRAZILIAN DRIVERS

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Brazil lacks information about driving under the influence of alcohol (DUI), particularly with data from representative samples from the general population. Anecdotal information suggests a high prevalence of DUI among young Brazilian males. Method: 333 subjects with driver licenses and who drank in the last 12 months were drawn from a random sample of 2,346 adults (18 to 79 years old) from the first Brazilian household survey of patterns of alcohol use. Bivariate analysis tested the association between demographics, type, frequency, and quantity of alcohol used; binge drinking; drinking places; passenger of a drunk driver; frequency of drunk driving accidents; age of first drink; alcohol abuse; alcohol dependence; perceptions about drunk driving and "having driven after drinking at least three units of alcohol". Data were then submitted to multivariable regression analysis. Results: Being male, an alcohol abuser/dependent, and having started to drink between 16 and 17 remained independently associated with heavy drinking and driving after model adjustments. The same is true for having been a passenger in a vehicle where the driver was drinking, as well as a previous DUI accident. Higher support for DUI enforcement was protective against drinking and driving. Comments: Risk factors for DD in a represen-

tative sample of Brazilian adults are similar to those reported in other countries, except for the perception of punishment. Interestingly, it seems that even having strong opinions about DUI enforcement, those subjects do not perceive punishment as effective in the country, which might contribute to the elevated levels of risk factors associated with DD in this sample.

SUPERPROTEÇÃO MATERNA MODIFICA OS EFEITOS DE MAUS TRATOS NA INFÂNCIA NO TRANSTORNO DO PÂNICO EM MULHERES: UM ESTUDO DE INTERAÇÃO

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Objetivo: Avaliar a interação entre a história de trauma na infância e o tipo de parentagem em pacientes adultos do sexo feminino com transtorno do pânico (TP). Método: 87 mulheres com TP e 87 controles femininos pareados por idade e renda foram avaliadas por uma entrevista clínica e MINI (Mini Internacional Neuropsychiatry Interview). Trauma na infância foi avaliado através da aplicação do questionário CTQ (Childhood Trauma Questionnaire) e o tipo de parentagem foi avaliado usando-se o instrumento PBI (Parental Bonding Instrument). Resultados: Trauma na infância ($OR=2,30$; $p=0,043$) e superproteção materna ($OR=2,32$; $p=0,009$) foram associados a uma maior chance de TP na vida adulta em mulheres. A interação entre a mãe superprotetora e a lembrança do trauma teve associação estatisticamente significativa com TP ($p=0,025$). Entre as mulheres sem a superproteção materna, o OR entre trauma e TP foi de 4,40 ($95\%IC 1,50$ à $12,90$; $p=0,006$). Por outro lado, entre as mulheres com mãe superprotetora, o OR entre trauma e TP foi de 0,57 ($95\%IC 0,14$ à $2,36$; $p=0,518$). Conclusão: Em nosso estudo, a superproteção materna pôde funcionar como um efeito tamponante em relação à situação traumática, ajudando na superação de eventos estressantes e evitando TP na vida adulta em mulheres. Mais estudos são necessários para confirmar essa hipótese.

TRANSTORNOS DEPRESSIVOS: UM NOVO MODELO PARA DEFINIR MELANCOLIA

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O DSM-IV-TR trata melancolia como um especificador do Episódio Depressivo Maior, considerando aspectos como humor não reativo, anedonia, insônia terminal, culpa, alterações psicomotoras e de apetite/peso. Segundo alguns autores, a população identificada como melancólica pelo DSM forma um grupo de