

(ACR criteria) were enrolled at a faculty ambulatory specialized consultation. They were assessed by means of clinical interview, a life events interview (LEDS) and by the following questionnaires: TAS-20, AAS -R, BSI, and SF-36. A second evaluation occurred after one year (55 patients), regarding the same psychosocial factors. All patients were diagnosed according to criteria adopted internationally, the clinical variables assessed were: length of disease, SLICC, SLEDAI and medication. All patients were not compromised cognitively. **Results:** We observe significant levels of stressful life events (with a mean of 1.311 event per patient). We found high prevalence of alexithymia (59%), depressive symptoms (49%), insecure attachment, and somatization. After one year, the same patients exhibit levels of stressful life events (mean of 0.67). We also found stability in insecure attachment, in alexithymia (58%), depressive symptoms (53%), and somatization. In the first moment we only found significant statically correlations between SLEDAI and stressful life events. But in the second moment we did find significant associations between SLEDAI and psychopathological symptoms as somatization, anxiety and depression; also, with stressful life events and alexithymia. **Conclusions:** The association between stressful life events and clinical variables it is very important, highlighting the importance of understating what happened to the life of the SLE patients, and how they are dealing with it. The present results are interesting but confounding as they underline the complexity of this disease, of its presentation, of its course, and strengthens the unpredictability of the disease, that potentiates significant psychic suffering.

## 29 Infants' physiological responses during the Face-to-Face Still-Face at 3 months according to the patterns of attachment at 12 months

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**Background:** Patterns of organized behavior employed by infants to manage interactive stressful situations have been described in both attachment and Face-to-Face Still-Face (FFSF) research. The current study examined the infants' heart rate responses during the FFSF at 3 months according to the patterns of attachment at 12 months. **Methods:** One hundred and eight full-term infants and their mothers participated in the FFSF paradigm at 3 months and in the Strange Situation procedure (SSP) at 12 months. Infants' heart rate during the FFSF was assessed. **Results:** The results indicate that the heart rate of infants in the three patterns of attachment was

statistically higher at the still-face episode compared to the baseline, showing the typical still-face effect in terms of physiological responses. However, only the heart rate of secure infants recovered to baseline levels. The heart rate of ambivalent infants tended to increase even more in the reunion episode, while there were no statistically significant differences between the heart rate of avoidant infants at baseline and reunion as well as at still-face and reunion. Infants later classified as secure recovered baseline levels suggesting that the dyads were effective in repairing the interactive disruption. Inversely infants later classified as insecure ambivalent and insecure avoidant maintained or increased the heart rate levels in the reunion, showing the inefficacy of the dyadic system to repair and reestablish the interaction. **Conclusions:** The results suggest that infants develop a regulatory strategy in response to parental unavailability as early as 3 months that appear to be developmental precursors of attachment styles.

## 30 Predicting patterns of regulatory behavior in the still-face paradigm at 3 months

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**Background:** The current study addressed two aims: to describe different patterns of infant regulatory behavior during the Face-to-Face Still-Face (FFSF) paradigm at 3 months of age; to identify specific, independent predictors of these patterns from an a priori set of demographic data, infant (e.g., temperament), and maternal (e.g., sensitivity) variables. **Methods:** Analyses were based on data collected for 121 mother-infant dyads assessed longitudinally in the newborn period and again at 3 months. In the newborn period, infants' neurobehavior was evaluated using the Neonatal Behavioral Assessment Scale (NBAS) and mothers reported on their caregiving confidence and their newborns' irritability and alertness. At 3 months, mothers reported on their infant's temperament, and mother-infant interactions were videotaped during free play and the FFSF. **Results:** Three patterns of infant regulatory behavior were observed. The most common was a Social-Positive Oriented Pattern, followed by a Distressed-Inconsolable Pattern, and a Self-Comfort Oriented Pattern. Results of multinomial logistic regression indicated that categorical assignment was not associated with demographic or infant characteristics, but rather with dyadic regulatory processes in which maternal reparatory sensitivity played a crucial role.