Conclusions: This study revealed that with CAGE score greater than 3, male patients with AUD are at higher risks of both physical and mental comorbidities. Further research as well as female participants are needed to identify the associations between the severity of alcohol use disorder and related diseases for comprehensive evaluation in Taiwan.

Keywords: receiver operator characteristic (ROC) analysis; alcohol use disorder (AUD); comorbidities; CAGE

EPP1314
Assessing altered executive functioning in substance use disorder: Evidence from a novel neurocognitive screening battery

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Introduction: Recently, clinical models based on neuroscientific evidence have highlighted the detrimental role of executive functions impairments in negatively contributing to the functional decline of patients with Substance Use Disorder (SUD). Yet, despite these potential implications, the screening tools that are typically used to assess such impairments are not specific for patients presenting addiction and are not able to properly sketch their dysfunctional executive control profile.

Objectives: This study aimed at testing the clinical potential of a novel screening battery for neurocognitive disorders in addiction. 

Methods: The screening battery was tested on 151 patients with SUD and 55 control subjects. The battery consisted of five neuropsychological tests tapping on verbal and working memory, focused attention, and cognitive flexibility and two computerized neurocognitive tasks (Stroop and Go/No-go tasks adapted for the evaluation of interference inhibition, executive control, and attention bias towards drugs of abuse).

Results: Statistical analyzes showed worse cognitive performance in patients with SUD compared to controls, both at neuropsychological tests of cognitive flexibility, focused attention and verbal memory and at neurocognitive tasks, suggesting the presence of deficit of regulatory mechanisms involved in inhibition and orientation of attention/cognitive resources. These results were also confirmed by second-level analyses where the role of age and education as potential moderators was checked, suggesting the robustness of the tested measures.

Conclusions: The results further stress the link between specific executive impairments and SUD and suggest the potential of the battery as a quick yet valid neurocognitive screening tool.

Keywords: Neurocognitive screening; Cognitive control; Substance Use Disorder; Executive functions

EPP1316
Clinical and therapeutic aspects of the alcohol addiction phenomenon in elderly women

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Introduction: Age-related features of alcohol addiction in elderly women (AAEW) have not been studied properly. The WHO classifies 60-75 years as elderly age (‘early old age’), when morphological and physiological functions of all organs and systems fade away, causing severe post-intoxication and withdrawal disorders, giving organic tint to alcohol dependence clinical picture, and rapid onset of alcoholic mental degradation of personality.

Objectives: To study specific clinical, diagnostic and pathophysiological basis of alcohol dependence in aged women for innovative approaches to AAEW treatment.

Methods: Clinical and medical history questioning, international approaches to AAEW treatment.

Results: Multifactorial study and specific gender features in AAEW development allowed to identify abundant dual comorbidity, prevalence, high degree of affective disorders (depression, anxiety, dysphoria) combined with various somatic conditions and diencephalic symptoms in this alcoholic disease pattern. New treatment modality for alcohol dependence in elderly women was proposed and tested; along with classical detoxification and symptomatic therapy, the patients received anxiolytic agent (serotonin receptor stimulator) Buspirone SANDOZ, 5 mg 3 times a day, followed by individually corrected effective dose. The drug stopped anxiety, balanced the mood, causing no addiction. Buspirone was combined with bromine and sodium sulfate transcerebral electrophoresis № 5 and selective psychotherapy.

Conclusions: The proposed integrated therapy for AAEW was proven to be effective by statistical reliability and patient-specific clinical illustrations.

Keywords: Alcohol addiction; women; Treatment

EPP1317
Insomnia at the onset of addiction treatment may be related to earlier relapses: A one-year follow-up study

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Introduction: Relapse is a common phenomenon among alcohol-dependent patients undergoing detoxification treatment. Different studies have found that the presence of sleep disturbances and insomnia at the onset of alcohol treatment is associated with relapses. However, the mechanisms behind this link are still unclear. The aim of this study was to investigate whether sleep difficulties at the start of treatment could predict relapses in the subsequent 12 months.

Methods: The study included 100 patients with alcohol dependence who were enrolled in a detoxification program. They completed the Hospital Anxiety and Depression Scale (HADS) and the Insomnia Severity Index (ISI) at baseline and after 12 months. The HADS was used to assess anxiety and depression symptoms, while the ISI was used to assess the severity of insomnia.

Results: The results showed that patients with higher ISI scores at baseline were more likely to relapse within 12 months. The odds ratio for relapse was 3.42 (95% CI 1.19–9.85). In addition, patients with higher HADS scores also had a higher risk of relapse, with an odds ratio of 2.51 (95% CI 1.04–6.08).

Conclusions: The results of this study suggest that sleep disturbances at the onset of alcohol treatment may be related to earlier relapses. Further research is needed to explore the underlying mechanisms of this link and to develop interventions to reduce the occurrence of relapses.

Keywords: Alcohol addiction; relapse; insomnia; treatment