

at the addiction unit of "Red de Salud, Pontificia Universidad Católica de Chile", between November 2013 and October 2015. Data included: demographics, medical and psychiatric history, laboratory and imaging tests.

Results Of all the patients, 57% were men, 25 to 67 years of age, 43% between 35–40 years; 57% were married; 57% had completed studies at university. 43% had also alcohol use disorder, 28% marijuana, 28% cocaine and 28% benzodiazepines than in most cases began before OUD. In addition; 57% had medical comorbidity among which stand out obesity (17%), osteoarthritis (17%) and chronic low back pain (17%). Eighty-three percent require hospitalization. Twenty-eight percent had abnormal liver tests and one patient had positive hepatitis B core antibody. Opioids used were: morphine (14%), codeine (43%), tramadol (42%).

Conclusion These results emphasize on the misuse of prescription opioids analgesics, the complexity of patients with OUD and the prevalence of other substance use disorder that precedes and accompany OUD.

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EV41

Predictors of quality of life in opiate-dependent individuals undergoing methadone maintenance treatment

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Introduction Quality of Life (QoL) is an important outcome variable in Methadone Maintenance Treatment (MMT) for opiate dependence. Previous research has focused on demographic variables, treatment features, drug use and physical and mental health as possible predictors of QoL in this condition but interest in genuinely psychological variables (skills and personal repertoires) has been lacking. Experiential Avoidance (EA), the tendency to behave in order to decrease some kind of internal distress, has a strong relationship to psychological disorders and holds promise as a potential predictor of QoL.

Objectives To identify predictors of QoL in clients undergoing MMT, taking into account psychological variables.

Aims To see if EA is related to QoL in clients undergoing MMT.

Methods Using a cross-sectional design, information was gathered from 48 opiate-dependent individuals undergoing MMT. Variables included were QoL (IDUQOL), severity of drug use, social adjustment and physical and mental health (ASI-6), emotional distress (HAD) and EA (AAQ and its version for substance-abusing individuals, AAQ-SA). Mean-comparison tests and correlation tests were carried out, and several variables were entered into a stepwise multiple regression analysis.

Results Anxiety and EA were the only variables which made it into the regression model, accounting for 41.9% of variance of QoL.

Conclusions Contrary to previous research, the predictors of QoL were psychological. It is the first time that EA is related to QoL in this population. Interventions should explicitly target EA and anxiety. Additional research should make use of longitudinal designs and take into account further psychological variables (emotion regulation, coping).

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EV42

The relationship between previous trauma and alcohol and substance misuse in women

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Introduction The association between previous trauma and the development of alcohol and substance misuse is well established, however, much of the research is focused on the association of PTSD with alcohol and substance misuse. This research will be focussing on trauma in general and its influence on the development of alcohol and substance misuse in women.

Objectives The main objective of this study was to investigate the relationship between previous traumatic events and the development of alcohol and substance misuse in women.

Methods This was a retrospective case note study of 146 female patients from a UK based detoxification and rehabilitation centre. Trauma history from patient files were audited, with the trauma experienced being assigned a category.

Results Out of 146 women with alcohol and/or substance misuse, 132 (90%) had experienced a previous trauma. The types of trauma experienced include; domestic (53%), traumatic grief (36%), sexual abuse (35%), physical (15%), bullying (4%) and neglect (4%). These results show that women who suffer from alcohol/substance misuse are highly likely to have suffered a previous trauma.

Conclusions The results from this study suggest that women who have suffered previous trauma are high risk for alcohol and substance misuse problems, therefore early intervention and a robust psychological support system should be provided to women who have a history of trauma. Furthermore in addition to addiction treatment and behaviour focused therapy already in place trauma focussed therapy may prove beneficial.

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EV44

Torsades-de-Pointes Predisposing Risk Factors (TdPPRFs) in a cohort of patients maintained on high dose methadone – a clinical safety caseload analysis

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Introduction Methadone, a long-acting opioid agonist commonly used in the treatment of opiate dependence, has been reported to cause QTc interval prolongation, increasing the risk of a fatal cardiac arrhythmia – Torsades-de-Pointes (TdP). This effect seems to be attributable to methadone's inhibitory effect on the cardiac "hERG"-K⁺ ion channel and is dose-dependent. There is a lack of consensus regarding when to perform an ECG for patients on methadone.

Objectives Identifying other TdPPRFs in a cohort of patients receiving ≥ 85 mg (high dose) methadone daily to inform local clinical safety guidelines.

Methods Our outpatient caseload was filtered to select opiate-dependent patients receiving more than 85 mg methadone daily. Primary care summaries and laboratory results databases were analysed for the presence of other TdPPRFs: female sex a documented history of ECG abnormalities, electrolyte imbalance, liver or renal failure, and concomitant use of other QT prolonging medication or stimulants.

Results Fourteen opiate-dependent patients (10.29% of patients on methadone) were maintained on ≥ 85 mg methadone daily. Gender distribution was F:M = 1:1.8; 64% misused illicit stimulants; 57% were prescribed other QTc prolonging medication and 29% had a documented history of liver/renal failure or electrolyte imbalance. Only 14% had previous ECGs documented in primary care summaries. Of patients on high dose methadone, 85.7% had at least one TdPPRFs present and 64.3% had at least two.

Conclusions These results demonstrate an increased rate of TdPPRFs in this patient group and highlight the importance of ECG monitoring which ideally should be offered to patients receiving even lower doses of methadone.

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EV47

Gamma-hydroxybutyrate (GHB) withdrawal syndrome: First case report in Lithuania (Kaunas addiction treatment center)

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Gamma-hydroxybutyrate (GHB) is a γ -aminobutyric acid (GABA) precursor and metabolite that naturally occurs in the human body. Initially, GHB was used as an anaesthetic agent but was later also found to have anabolic, hypnotic, antidepressant, anxiolytic as well as cholesterol lowering effects. Recently though, research into GHB has been carried out primarily in assessing its effectiveness in treating alcohol and opioid withdrawal syndrome. There are no epidemiological data about GHB consumption in Lithuania, however during last decade there were observed many fatal cases of GHB users due to GHB intoxication or withdrawal abroad. In this article we will present the clinical case and problems which face the patient of 2-year daily GHB consumption. There were observed mild to moderate abstinence state presented with its clinical course and peculiarities. Whereas using GHB is becoming more popular in Lithuania, it is very important to pay attention to this substance and problems related to its usage.

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EV48

Treatment of patients with opioid addiction with different disease duration

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To study the characteristics of medical and rehabilitation care for patients with opioid dependence we have investigated 50 patients. All patients on long-term use of opioids were divided into 2 groups. The duration of drug abuse in group 1 ranged from 4 months up to 5 years. In the second group, the duration of dependence

was more than 5 years. Patients in the second group of somatic-neurological symptoms were having somatic disorders and organic brain damage. Systematic observation in drug treatment clinics at the place of and maintenance treatment of at least one year was achieved in 8.48% of patients of group 1 and 3.85% of the second group. Consequently, the role of the therapeutic factor in trying to achieve regression syndrome pathological attraction in early stages of the disease, we recognize more productive. Patients of the second group with a large weighting of disease duration was noted clinical abstinence syndrome both by somatic and neurological disorders, as well as by more severe anxiety, dysphoric disorders. These disorders require the inclusion in the scheme of treatment techniques aimed at more effective detoxification and immune reactivity of the organism. Patients of the second group was added to the treatment nootropics and immunomodulators. Analysis of the results of treatment in patients with drug addiction with different disease duration showed significant differences in the effectiveness. In the second group with a duration of more than 5 years of addiction, it is advisable to the treatment nootropics, immunomodulators.

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EV49

Neurobiological basis of mutual influence of stress burden and alcohol addiction: Review of data

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Introduction The current situation in Ukraine is characterized by multitude social-stress factors, resulting in an increase in alcohol consumption and alcohol addiction, which arises as a mechanism to compensate the adverse mental stress and different variant of chronic stress disorder.

Objective Substantiate the neurobiological basis of mutual influence of stress burden and alcohol addiction.

Aim To study the biochemical mechanisms that underlie the vicious circle of stress and alcohol addiction.

Methods Studies the features of hypothalamic-pituitary-adrenal (HPA) axis under stress and alcohol available in Medline, Institute for Scientific Information Databases (Science citation index expanded and Social sciences citation index), EMBASE, and Cochrane Library were identified and reviewed.

Results Alcohol, just like stress, affects the HPA axis, changing the reaction of its parts and, by reducing the production of cortisol, which produces in response to stress and prolongs subjective experiences of nervous tension caused by stress. Stress, through the output of cortisol, reduces the effect of alcohol leads to a desire to further alcohol abuse. The system includes elements of the extended amygdala, which have as reinforcement and stress reactivity. Central nucleus amygdala plays a leading role in the reinforcing effects of pharmacological agents with narcogene potential and performs persuasive role in the activation of hypothalamic reinforcement mechanisms. This allows us to consider neurohormonal system, including the amygdala, hypothalamus, pituitary and adrenal glands as structural and functional basis of formation depending on various narcogene, primarily alcohol.

Conclusions Dysregulation of the HPA axis is a neurobiological basis of mutual influence of stress burden and alcohol addiction.

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