Methods: This retrospective cohort study was conducted using Danish nationwide registers. The risk of mortality among ED patients with/without AUD and/or CUD was compared to matched control subjects with/without AUD and/or CUD using hazard ratios (HRs).

Results: Of the 20,759 included ED patients, 4.7% and 4.3% had AUD and CUD, respectively. The corresponding figures for the 83,036 control subjects were 1.0% (AUD) and 1.3% (CUD). ED patients without SUDs exhibited an increased risk of mortality compared to control subjects without SUDs (adjusted HR 2.9, P<.001). Mortality risk was higher among ED patients with AUD (adjusted HR 11.8, P<.001) or CUD (adjusted HR 4.6, P<.001) compared to control subjects without AUD/CUD. In addition, patients with AN, BN, and USED, who had comorbid AUD and/or CUD, exhibited an elevated risk of mortality compared to control subjects without AUD/CUD (AN: adjusted HR 11.3, P<.001; BN: adjusted HR 5.9, P<.001; USED: adjusted HR 10.9, P<.001).

Conclusions: Comorbid AUD and/or CUD increase mortality risk in patients with EDs. In order to reduce mortality in ED patients, prevention and treatment of AUD and CUD is important.

Disclosure: No significant relationships.

Keywords: Eating Disorders; cannabis use disorder; Alcohol use disorder; mortality

EPP0003
An innovative combination of cyproheptadine and prazosin for the treatment of alcohol use disorder: a double-blind, randomised, parallel-group, three-arm, multicentre, placebo-controlled phase 2 trial.

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Introduction: Animal studies have shown that the simultaneous blockade of α1b-noradrenergic receptors and 5HT2A-serotonergic receptors strongly decreases alcohol intake. In recent, clinical studies have indicated that the selective α1b antagonist prazosin could be effective on alcohol use reduction in alcohol-dependent subjects.

Objectives: Cocktail is a double-blind, randomised, parallel-group, three-arm, multicentre, placebo-controlled phase 2 proof-of-concept study aiming at demonstrating the superiority of a 12-week treatment with the KT110 combination of cyproheptadine (8 mg/day or 12 mg/day) and prazosin (5 mg/day or 10 mg/day) over placebo on the reduction of total alcohol consumption.

Methods: The study two main inclusion criteria are a DSM5 diagnosis of severe alcohol use disorder and a WHO high-risk drinking risk level. The primary endpoint is the change from baseline (4 weeks preceding randomization) to the end of treatment (Weeks 9-12) in the mean quantity of alcohol consumed per day in the three groups. Daily alcohol consumption is determined using the Timeline Follow Back, automatically be filled in on the basis of the electronic patient reported outcomes platform. The 12-week treatment period is followed by a 4-week post-treatment follow-up.

Results: One hundred and eighty patients are planned to be randomized 1:1:1 into the two treatment groups. Enrollment of patients started in November 2019, and will end in July 2021.

Conclusions: In this communication, we will present the rationale for the development of the KT110 combination of cyproheptadine and prazosin for the treatment of alcohol use disorders, as well as the main features of the Cocktail study. ClinicalTrials.gov identifier: NCT04108104.

Disclosure: Member of advisory boards, DSMB, or steering committees, speaker honoraria or consultancy for Bioprojet, D&A Pharma Ethypharm, and Kinnow Pharmaceuticals, Lundbeck, and Pfizer D&A Pharma, Ethypharm, Kinnow Pharmaceuticals, Lundbeck, and Pfizer.

Keywords: Alcohol use disorder; Randomised Controlled Trial; Treatment

EPP0004
The association between social media use and mental health among adolescents and young adults

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Introduction: The associations of problematic social media use, the special use of image-based social media (photo editing, following celebrities) and mental health (body dissatisfaction, self-esteem, depression) have been established (e.g. Yurdagül et al., 2019; Gioia, Griffiths, Boursier, 2020; Lowe-Calverley and Grieve, 2021). The links may be explained with the theory of social comparison and self-objectification.

Objectives: Testing theory-oriented hypotheses related to image-based social media use and body dissatisfaction, gender specifically, among adolescents and young adults.

Methods: Three surveys have been conducted with convenience sampling: (1) 117 Hungarian university students in person (mean age=22.4, SD=2.9, 79% female), (2) 383 high school students in person (mean age=16.5, SD=1.2, 58% female); (3) 124 Israeli adolescents online (mean age=16.8, SD=2.7, 68% female).

Results: (1): The tendency of modifying body image in social media (the frequency of modifying pictures, the use of filters) mediates the association between body shame and problematic social media use. Physical appearance social comparison mediates the association between self-related negative emotions and attitude (low self-esteem+ineffectiveness) and problematic social media use. (2): The technology-based social comparison mediate the association between muscle checking and problematic Instagram use among boys. (3) Physical appearance social comparison mediates the association between the frequency of following celebrities and body dissatisfaction among girls, but not among boys.

Conclusions: During the use of image based social media, social comparison and the exposure to the beauty standards may lead to poorer mental health, which could result in problematic social media use as maladaptive coping.

Disclosure: No significant relationships.

Keywords: Adolescents; problematic social media use; young adults; mental health