Methods Online survey was available on CEIP website (September 2014-March 2015). Ouestionnaire assessed smoking status. tobacco and e-cigarette use, including reasons for use, efficacy, adverse effects and dependence (Fagerström test of cigarette dependence [F] and an adapted version to e-cigarette use [Fm]). One thousand one hundred and twenty-one EC users Results answered (1008 ex-smokers, 113 current smokers), with mean age of  $39 \pm 10$  years and 72% female. Ninety-six percent e-cigarette users agreed that vaping is useful for tobacco cessation, 80% succeeded to quit/reduce their smoking. Reasons for EC use are partial/complete alternative to smoking, lower toxicity, less side effects and lower cost. Most of ex-smokers (66%) has no/low dependence to EC (Fm  $\leq$  4) since current smokers reduced dramatically their tobacco consumption by EC use. Among all EC users, 75% had a craving for EC. Use of EC is described as pleasant as tobacco for 59%

Conclusion E-cigarettes are used primarily for smoking cessation and show effectiveness for harm-reduction, but a secondary dependence to nicotine contains in EC can be observed (Figure 1).

ex-smokers and 39% smokers. Eighty-three percent of ex-smokers

and 68% of smokers do not intend to stop vaping.

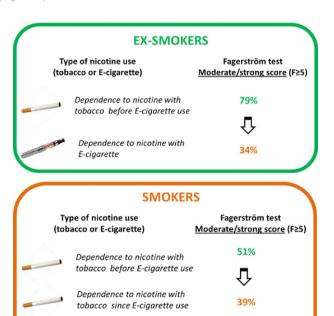


Fig. 1

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

26%

Nicotine cumulative dependence

(tobacco + E-cigarette)

http://dx.doi.org/10.1016/j.eurpsy.2016.01.998

## EV/1/

## Compulsiveness dimension in a case of pathological gambling

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Introduction Pathological gambling (PG) is currently included among Addictive Disorders (DSM-5). However, its phenomenology resembles features of Obsessive Compulsive Disorder. Several models of addiction conceptualize a progression from impulsivity

to compulsivity transitioning from initial positive reinforcement motivations to later negative reinforcement and less pleasurable and automaticity mechanisms.

Clinical presentation A 34-year-old male, since diagnosed with PG in 2013 and prescribed a group rehabilitation therapy, presented in 2015 complaining of intrusive thoughts and depression symptoms. During the psychiatric examination emerged: low mental concentration; dysphoria; hyporexia; irritability; insomnia; persistent ideas and excessive preoccupations to be betrayed by his girlfriend; and behaviours of hyper control on her life. He has been evaluated using MMPI-2 (obsessivity Tscore 70, depression Tscore 67) and BIS-11 (high score of non-planning impulsiveness).

Treatment It appeared there was a shift from ego-syntonic novelty driven/impulsive behaviours focused primarily on gambling to ego-dystonic habit driven/compulsive behaviours focused on her girlfriend. He started an individual psychodynamic psychotherapy centred on dysfunctional beliefs and behavioural strategies for treating the compulsive features. As thought content was the most relevant aspect, he was prescribed olanzapine, not a SSRI (normally indicated for OCD), up to 10 mg/die. After a month obsessions and compulsions reduced, and he seemed to reach a good level of personal functioning, despite a rigid anankastic personality trait.

Conclusions As the management of compulsive behaviours is complex, physician should better assess and recognize psychological personality aspect, collecting patients' complete history, also testing them psychometrically, and paying more attention to an eventual treatment (both psychological and pharmacological). Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.999

## **EV15**

## The impact of addictive disorders on the HIV and syphilis coinfection

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*Introduction* One of the main risk factors for both HIV-infection and syphilis is addictive behavior.

The objective of the study was to determine the impact of addictions on the HIV and syphilis coinfection.

Method Sixty-five HIV-infected patients with syphilis were examined by a clinical method.

Results The sample included 45 men (average age  $32.09 \pm 9.83$ ) and 20 women (average age  $31.7 \pm 5.97$ ). All patients were characterized by risky behavior. Seventy-one percent of men belonged to the category of men who have sex with men (MSM). Eighty-five percent of women had drug dependence (as compared to 61% for men who have sex with women (MSW) and 19% for MSM; P < 0.05). Women were more likely to have opiate dependence (P < 0.001; as compared to men). We revealed a high incidence of drug addiction and alcoholism with the prevalence of dependence on opioids (F11; 55.0%; 7.7%), polysubstance use (F19; 25.0%; 23.1%) and alcoholism (F10; 50.0%; 61.25%) among women and MSW respectively (P < 0.05 as compared to MSM). Only 50% of women and 23% of MSW were in remission. MSM regularly consumed stimulants and cannabinoids without developing dependence.

Conclusions Injecting drug use is typical of women and MSW and plays a leading role in the risk factors for HIV infection and syphilis. Addictive behavior among MSM increases risky sexual behavior and thus influences infection with HIV and syphilis.