of impairments of cardiovascular and excretory systems does not reveal similar consistence: renal impairments are clinically diagnosed in 7,2% of cases, disorders of cardiovascular system in clinical picture of opioid addiction are found in not more than 10% of patients. As a rule, possibilities of early and quick development of dystrophic (fatty) and sclerotic processes in cardiac muscle and coronary vessels as well as epithelium of canals of kidneys that during a morphological diagnosis are revealed in 41,4% and 53,4% of cases, respectively, are not taken into account. Sclerotic alterations and fatty dystrophy of organs as well as another somatic pathology revealed lifetime and during autopsy testify to early disturbances of metabolic processes in chronic opioid intoxication characterized by progression, formed for short time (3,6 years) and at young age $(22,5\pm3,1)$ years).

P0036

Life events, social support and alcohol relapse risk

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Introduction: There is an increasing focus on the impact of psychosocial factors and stressors on the course of Alcohol Use Disorders. Exposure to traumatic events is common among individuals with substance use disorders. PTSD symptoms were associated with greater risk of relapse in intrapersonal and negative physiological contexts. Causative chains are multifactorial and complex, and genetic factors can influence life event exposure. The purpose of this study is to describe the relationships stressful life events and alcohol relapse in a clinical sample of Alcohol Dependent Subjects.

Methods: Seventy detoxified alcoholics meeting clinical criteria for Alcohol Dependence were consecutively recruited, after a short detoxification period, and then regularly followed for a period of one year. In the occurrence of alcohol relapse, patients were evaluated by the Paykel Interview for Recent Life Events. All patients were assessed by the Global Assessment of Functioning, the Quality of Life Index, and the Social Adaptation Self-evaluation Scale.

Results: Forty-six subjects were still in treatment at the end of the study period. Stressful life events, did not determine an increased relapse rata and were not associated with alcohol relapse.

Discussion: This study suggests that the role of psychosocial risk factors should be reconsidered toward a better understand of the factors implicated in alcohol relapse. Other aspects, such as the psychological functioning, the family environment, the peer relationships, and biological and genetic characteristics are further aspect to investigate.

P0037

Efficacy and safety of Pregabalin in alcohol dependent subjects: A pilot study

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Introduction: Pregabalin is a new anxiolytic that acts as a presynaptic inhibitor of the release of excessive levels of excitatory neurotransmitters. To the best of our knowledge pregabalin has not been investigated in alcohol dependence, a disorder frequently characterized by high levels of anxiety, panic attacks, and unsteadiness.

Methods: Twenty detoxified alcohol dependent subjects meeting clinical criteria for Alcohol Dependence were consecutively recruited, after a short detoxification period, and then orally treated

with flexible doses of pregabalin (mean dosage = 260.5 mg/day) for 6 monthss. The level of craving for alcohol was evaluated through a Visual Analogue Scale (VAS) and the Obsessive-Compulsive Drinking Scale (OCDS). Psychiatric symptomatology was evaluated through the Symptom Check List 90 Revised (SCL-90 R). Effectiveness measures included the Clinical Global Impressions scale (CGI) and the Quality of Life Index (QOL).

Results: eleven patients (55%) maintained an alcohol free condition for all the study period. Subjects experienced a reduction of craving in both OCDS (F=13.2; p<.001) and VAS (F=11.2; p<.001), a decrease of the SCL-90 subscore of ostility-aggression (F=8.1; p<.05). At the end of the study improvements were evidenced on both CGI (p<.001) and QOL (p<.001).

Discussion: the data of this pilot clinical study, suggest a possible role for this drug in the treatment of individuals with alcohol problems. If it could be demonstrated in controlled randomised trials that pregabalin is efficacious in decreasing alcohol use, lessening craving, and attenuating psychopathological symptom severity, we will have gained a powerful agent for the treatment of alcohol dependent subjects.

P0038

Adolescence and behavioural addictions: Results from an Italian sample

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Introduction: Adolescence seems to be a critical period of addiction vulnerability, based on both neurobiological, social, and familiar factors. The earlier onset of behavioural/substance dependence seems to predict greater addiction severity, morbidity, and multiple addictive disorders. The aim of this study was to assess the presence of multiple addictions in an Italian adolescent high-school population.

Methods: Data were collected from a sample of 2907 high school students recruited in the area of Barletta (Puglia) and Latina (Lazio). The sample had an average age of 16.69+/-1.89 years. Through different multi-item scales we evaluated different behavioural addictions: Pathological Gambling, Internet Addiction, Compulsive Buying, Sexual Addiction, Relationship Addiction, Mobile Phone Addiction, Exercise Addiction, Work Addiction.

Results: the presence of pathological gambling was found in 4.4%, compulsive buying in 8.3%, internet addiction in 1.1%, work addiction in 7.2%, exercise addiction in 6.7% of the subjects. Males showed higher scores (p<.001) for pathological gambling, internet and exercise addiction, whereas females showed an higher score (p<.001) for mobile phone addiction. A positive correlation (p<.001) was found between all the scale employed, apart from the Compulsive Buying Scale, which was negatively correlated (p<.001) with the other scales.

Discussion: The high number of subjects reporting a behavioural dependence is an unexpected data, which creates concern, and need an adequate analysis. It should be valued if these typologies of "addiction without the substance" are a temporary phenomenon occurring in adolescents or if they are a stable trait, and a consequent risk factor for a substance misuse.

P0039

Reaction time in relation to the duration of heroin abuse

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Background and Aims: As a result of long-term heroin abuse we can see impairment of cerebral structures that leads to specific deficits in cognitive and conative area. Reaction time(RT) is an interval between reception of the certain stimulus and movement execution, as a response to received stimulus. It includes unharmed perceptive functions, attention, concentration and psychomotor coordination. The aim of this study was to evaluate the effect of heroin abuse on RT.

Method: 90 heroin addicts, divided in tree groups, regarding to abuse duration, were included in study. Reaction time was estimated by specially designed computer program, based on the modified Donders's model of reaction time.

Results: Averige RT increase in corelation to duration of heroin addiction

Results have shown that heroin abuse is connected with the prolongation of simple and choice reaction time, in both visual and auditory modality. Also, there is significant relation between prolongation of choice reaction time and duration of heroin abuse.

Conclusion: Heroin abuse duration is related to decrease of psychomotor speed and impairment of psychomotor coordination.

P0040

Effects of opiate prescription analgesic medication

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Purpose: To document if prescription opioid medications used for pain enhanced or worsened pain syndromes from medical conditions in patients who received a diagnosis of prescription opioid dependence as determined by a diagnosis by DSM-IV criteria. Further, whether detoxification improved or worsened pain perceptions and self reports in patients who chronically administered prescription opioid medications.

Methods: Our study consisted of a retrospective sample of patients taken from the Addiction Treatment Unit at St. Lawrence Hospital in Lansing, Michigan. Patients were selected from those who voluntarily sought detoxification from opioid medications in an inpatient setting. Selection criteria for the study consisted of a DSM-IV diagnosis of opioid prescription medication dependence, willingness to undergo medical detoxification, cooperation with self-report scales and abstinence from opioid medications. Study patients were randomly selected from discharges in patient census for the years 2001-2003.

Results: The significant findings were that self reported pain scores improved during the detoxification from admission to discharge, from a mean of 5.5 at admission to mean of 3.4 at discharge (0 is no pain, and 10 is the most pain). The detoxification period extended to an average of 5 days. While oxycodone CR (OxyContin) produced higher levels of self-reported pain at admission and discharge, these patients experienced significant levels of pain reduction as with other opioid medications.

Conclusions: Patients with a DSM-IV diagnosis of prescription opioid dependence reported (self) less pain with detoxification and abstinence from the opioid medications.

Key words or phrases: opioid medications, opioid dependence, prescription, medical conditions, diagnosis.

P0041

Effectiveness of Baclofen in treatment of opium dependency. A double-blind randomized controlled trial

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Background and Aims: Results of some studies suggest that Baclofen (a GABA receptor agonist) maybe effective in detoxification of opium dependency. Thus we have done this study in order to identify possible efficacy of Baclofen for detoxification of opium dependency.

Methods: This study is a double- blind randomized clinical trial. We selected 52 patients with opium dependency and with other criterias that we have designed on the basis of DSM-IV TR. Then we randomly assigned patients to two outpatient groups. The first group received Baclofen (40 mg/day) and second group received placebo for two weeks accompanied by similar drugs. The severity of the opium withdrawal symptoms was measured by SOWS (short opiate withdrawal scale) and two other questionnaires for measuring mental and physical symptoms of opium withdrawal in days of 0, 2, 4, 7 and 14.

Results: Baclofen group showed a superiority over placebo in the management of withdrawal symptoms of opium dependency, but there was not a significant statistical relationship.

Conclusions: Baclofen maybe considered as an effective adjuvant agent in the management of mental and physical symptoms of opium withdrawal. However further studies to confirm our results is warranted.

P0042

A case report of Benzylpiperazine induced new onset affective symptoms in a patient with schizophrenia

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Background: We have noticed in our clinical practice a few patients with psychoses whose mental health was affected by the use of Benzylpiperazine related compounds. Benzylpiperazine and related compounds were sold legally in the UK until March 2007 when they were declared illegal. They are still legal in New Zealand whilst it is classified as a Class one drug along with LSD, cocaine and cannabis in the USA, Sweden, Denmark and Greece.

Aims: To understand the effect of Benzylpiperazine based party pills on the mental health of a patient who already had a diagnosis of Schizophrenia.

Methods: We followed up the clinical psychopathology of the patient while he was in our acute Psychiatry ward in 2007 during an admission precipitated by the use of Benzylpiperazine based party pills. Also we went through his previous notes to find out the symptomatology during all his previous admissions and outpatient appointments.

Results: Use of Benzylpiperazine based party pills resulted in manic symptoms in this patient with Schizophrenia who did not have these symptoms until he started using the party pills.

Comments: Benzylpiperazine based party pills have mood elevating properties and also induce insomnia in users. From our anecdotal experience it is seen that in patients with mental illness this leads to