**EW0294**

**Use of novel psychoactive substances and induced psychiatric symptoms: Outcomes from the Eivissa Project**

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**Introduction** Polydrug abuse seems to be especially popular in Ibiza, an important market for new psychoactive substances (NPS). The misuse of psychoactive substances can lead to serious psychiatric symptoms.

**Aims** To evaluate symptoms induced by NPSs and other club drugs, correlating with the main classes of drugs.

**Methods** Ninety subjects (M/F 59/31) admitted in the Psychiatric Unit of Can Misses Hospital (Ibiza) referring a recent intake of substances were enrolled. The following scales were administered: TLFB (Timeline follow-back); Positive and Negative Symptoms Scale (PANSS); Symptom checklist-90 (SCL-90); Young Mania Rating Scale (YMRS); Hamilton Depression Scale (HAM-D); Hamilton Anxiety Scale (HAM-A); Modified Overt Aggression Scale (MOAS); Columbia Suicide Severity Rating Scale (C-SSRS).

**Results** Polydrug abuse was reported by 67.4% of the sample; the sample was grouped by the main preferred substance in THC-, stimulants-, and depressors-users. The majority of patients reported a previous psychiatric history. Positive symptoms resulted to be higher among THC-users ($P < .05$). Anxiety evaluated by SCL-90 was prevalent in the group of Depressors-users ($P < .05$). The scores of MOAS and SCL-90 subscale for hostility/aggression resulted to be significantly ($P < .01$) greater in the THC-users group.

**Conclusions** Some specific psychiatric symptoms are characteristic of some classes of substances and may help to identify them when a urine sample is not available. The possibility to develop psychiatric symptoms after a recent drug use is more common in THC-users ($P < .05$). Anxiety evaluated by SCL-90 was prevalent in the group of Depressors-users ($P < .05$). The scores of MOAS and SCL-90 subscale for hostility/agression resulted to be significantly ($P < .01$) greater in the THC-users group.

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

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**e-poster walk: Bipolar disorders – Part 2**

**EW0295**

**The concentration of the factors involved in trafficking of stem cells in long-term treated bipolar disorder patients**

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**Introduction** After analysis of biological and pharmacological data, we formulated the hypothesis that the factors involved in trafficking of stem cells could be engaged in aetiology of bipolar disorder (BP).

**Aims** To evaluate symptoms induced by NPSs and other club drugs, correlating with the main classes of drugs.

**Methods** Ninety subjects (M/F 59/31) admitted in the Psychiatric Unit of Can Misses Hospital (Ibiza) referring a recent intake of substances were enrolled. The following scales were administered: TLFB (Timeline follow-back); Positive and Negative Symptoms Scale (PANSS); Symptom checklist-90 (SCL-90); Young Mania Rating Scale (YMRS); Hamilton Depression Scale (HAM-D); Hamilton Anxiety Scale (HAM-A); Modified Overt Aggression Scale (MOAS); Columbia Suicide Severity Rating Scale (C-SSRS).

**Results** Polydrug abuse was reported by 67.4% of the sample; the sample was grouped by the main preferred substance in THC-, stimulants-, and depressors-users. The majority of patients reported a previous psychiatric history. Positive symptoms resulted to be higher among THC-users ($P < .05$). Anxiety evaluated by SCL-90 was prevalent in the group of Depressors-users ($P < .05$). The scores of MOAS and SCL-90 subscale for hostility/aggression resulted to be significantly ($P < .01$) greater in the THC-users group.

**Conclusions** Some specific psychiatric symptoms are characteristic of some classes of substances and may help to identify them when a urine sample is not available. The possibility to develop psychiatric symptoms after a recent drug use is more common in THC-users ($P < .05$). Anxiety evaluated by SCL-90 was prevalent in the group of Depressors-users ($P < .05$). The scores of MOAS and SCL-90 subscale for hostility/aggression resulted to be significantly ($P < .01$) greater in the THC-users group.

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

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