

Conclusion: These findings let researchers assess cue induced craving as the main predictor of treatment failure. Personality characteristics and addiction severity differences between responder and non-responders to cue induced craving demonstrate underlying structures of substance abuse.

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Impulsive personality characteristics of homeless HIV(+) iv heroin users (IHU) in comparison with homeless HIV(-) IHUs and non-homeless HIV(-) IHUs

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Introduction: Heroin injection is the most prevalent registered cause of HIV transmission in Iran. Regarding the high prevalence of intravenous heroin use among homeless in Tehran; Iran Police force and Ministry of Health collaborated in a national project of capture and reference of these high risk group for opium detoxification using methadone maintenance therapy. We examined impulsive personality characteristics among captured homeless HIV positive or negative IHUs and compared them to their matched none captured, none homeless casually referred cases of intravenous heroin users (IHUs).

Methods: Two groups of HIV positive (25 cases) and HIV negative (25 cases) of Homeless IHUs had been compared to 50 cases of nonhomeless IHUs. We used Eysenk Impulsiveness Questionnaire-7 (EIQ), Barret Impulsiveness Scale-11 (BIS), and Delayed Discounting Task. Results: More prison history, criminal behaviors and longer history of needle sharing and drug abuse have been observed in homeless IHUs. More Impulsiveness indexes according to BIS, EIS and more delayed discounting had been observed in this group. And less venturesomeness measured by EIQ incentive. In the homeless IHUs who were HIV positive, more cognitive impulsivity detected according to EIQ and BIS tools.

Discussion: Significant increase in impulsivity among homeless IHUs and lower life expectancy in addition to more needle sharing behavior in this group can be a clue for HIV transmission spread among this group. High degree of impulsivity alteration and longer history of addiction period, dose and frequency of needle sharing are among the other factors which may predict the risk of HIV spread among homeless IHUs.

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Efficacy of olanzapine in antisocial opioid substance abusers

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Background: Antinociceptive activity of Olanzapine was demonstrated in animals and is a useful drug in controlling of aggression. This study evaluated the efficacy of this drug in treatment of patients that were dependant to Opioids (Opium and Heroin) and had Antisocial Personality Disorder.

Methods: During 6 month (2004) study 36 cases with Opioids substances dependency evaluated and 24 of them introduced as main study group with Antisocial Personality Disorder. Clinical interview and MMPI-2 test has been used in this process. All patients received clonidine and analgesics and 12 of them received

Olanzapine 10-30 mg/day. Patients evaluated after one month of treatment.

Results: Compliance for treatment during One month was better (10 of 12 cases = 83.3%) in cases that have been received Olanzapine than versus group (4 of 12 cases = 33.3% $P < 0.05$). Frequently reported symptoms in second group were irritability (100%), verbal and physical hostility (100%, 84%) and restlessness (100%).

Conclusion: In patients with Opioids dependency and concomitant Antisocial Personality Disorder usefulness of Olanzapine may be in focus of attention in new researches. This drug improves the compliance of treatment especially in acute withdrawal phase.

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Influence of drug misuse in psychiatric inpatient's evolution

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Background and aims: Frequency of drug misuse has increased in the society and also in psychiatric patients. It's known that drugs have a negative influence in psychiatric pathology, so its identification is very important for a better prognosis.

We aim to demonstrate that drug misuse draws out the stay in hospital of psychiatric patients and increases the number of readmissions needed, basing the hypothesis on our laboratory information of drug screening in a psychiatric hospital.

Material and methods: It is analyzed, retrospectively, all admission to a short stay unit in a psychiatric hospital in 2000 and 2005, and compared all patient with a positive result in a urine sample obtained by a drug screening protocol with the rest of admissions to that unit, measuring in both groups the number of readmissions, and the extension of hospitalization.

Results: Our hypothesis is confirmed, being the number of readmissions more frequent and the extension of hospitalization longer when patients are drug-users.

Conclusion: Prevalence of drug misuse has met increased in the last decade and more frequently among mental patients. Drug misuse difficults psychiatric treatments and increases sanitary expenses, being important establishing diagnostic and treatment measures to face this problem. So it's important to take under consideration that this behaviour affects negatively in the progress of hospitalization, as proved in our investigation.

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Alcohol and psychiatric co-morbidity

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Psychiatric co-morbidity in alcohol dependent individuals has been an issue of growing interest for researchers, what is in part justified by the influence of the dependence on the psychiatric morbidity's diagnosis, treatment and prognosis, and vice versa.

After a brief exposition about co-morbidity's concepts, the authors present the results of a retrospective study, based on the collection of data from clinical records of 106 inpatients, who all had an F10 (CID 10) diagnosis at discharge (Mental and Behaviour Disturbances due to the consumption of alcohol). The others psychiatric diagnoses were taken into account, as well as socio-demographic features and other relevant clinical variables.