Conclusions: This study revealed that with CAGE score greater than 3, male patients with AUD are at higher risks of both physical and mental comorbidities. Further research as well as female participants are needed to identify the associations between the severity of alcohol use disorder and related diseases for comprehensive evaluation in Taiwan.

Keywords: receiver operator characteristic (ROC) analysis; alcohol use disorder (AUD); comorbidities; CAGE

Assessing altered executive functioning in substance use disorder: Evidence from a novel neurocognitive screening battery

M. Balconi1, D. Losasso2, A. Balena2 and D. Crivelli3
1International Research Center For Cognitive Applied Neuroscience - Ircan, Research Unit In Affective And Social Neuroscience, Department Of Psychology, Catholic University of the Sacred Heart, Milan, Italy; 2Serd Canzio, Dsmd, ASST Fatebenefratelli-Sacco, Milan, Italy; and 3International Research Center In Cognitive Applied Neuroscience – Ircan, Research Unit In Affective And Social Neuroscience, Department Of Psychology, Catholic University of the Sacred Heart, Milan, Italy
*Corresponding author.

Introduction: Recently, clinical models based on neuroscientific evidence have highlighted the detrimental role of executive functions impairments in negatively contributing to the functional decline of patients with Substance Use Disorder (SUD). Yet, despite these potential implications, the screening tools that are typically used to assess such impairments are not specific for patients presenting addiction and are not able to properly sketch their dysfunctional executive control profile.

Objectives: This study aimed at testing the clinical potential of a novel screening battery for neurocognitive disorders in addiction.

Methods: The screening battery was tested on 151 patients with SUD and 55 control subjects. The battery consisted of five neuropsychological tests tapping on verbal and working memory, focused attention, and cognitive flexibility and two computerized neurocognitive tasks (Stroop and Go/No-go tasks adapted for the evaluation of interference inhibition, executive control, and attention bias towards drugs of abuse).

Results: Statistical analyzes showed worse cognitive performance in patients with SUD compared to controls, both at neuropsychological tests of cognitive flexibility, focused attention and verbal memory and at neurocognitive tasks, suggesting the presence of deficit of regulatory mechanisms involved in inhibition and orientation of attention/cognitive resources. These results were also confirmed by second-level analyses where the role of age and education as potential moderators was checked, suggesting the robustness of the tested measures.

Conclusions: The results further stress the link between specific executive impairments and SUD and suggest the potential of the battery as a quick yet valid neurocognitive screening tool.

Keywords: Neurocognitive screening; Cognitive control; Substance Use Disorder; Executive functions

Clinical and therapeutic aspects of the alcohol addiction phenomenon in elderly women

I. Sosin1, G. Mysko1, O. Honcharova1, O. Misna1 and O. Minko2
1Narcology Department, Kharkiv Medical Academy of Postgraduate Education, Kharkiv, Ukraine and 2Department Of Urgent Psychiatry And Narcology, INPN NAMSU, Kharkiv, Ukraine
*Corresponding author.

Introduction: Age-related features of alcohol addiction in elderly women (AAEW) have not been studied properly. The WHO classifies 60-75 years as elderly age (‘early old age’), when morphological and physiological functions of all organs and systems fade away, causing severe post-intoxication and withdrawal disorders, giving organic tint to alcohol dependence clinical picture, and rapid onset of alcoholic mental degradation of personality.

Objectives: To study specific clinical, diagnostic and pathophysiological basis of alcohol dependence in aged women for innovative approaches to AAEW treatment.

Methods: Clinical and medical history questioning, international tests and scales to identify alcohol dependence and complications in elderly women. Follow-up monitoring of basic biochemical, clinical, laboratory and electrophysiological findings at treatment runtime.

Results: Multifactorial study and specific gender features in AAEW development allowed to identify abundant dual comorbidity, prevalence, high degree of affective disorders (depression, anxiety, dysphoria) combined with various somatic conditions and diencephalic symptoms in this alcoholic disease pattern. New treatment modality for alcohol dependence in elderly women was proposed and tested; along with classical detoxification and symptomatic therapy, the patients received anxiolytic agent (serotonin receptor stimulator) Buspirone SANDOZ, 5 mg 3 times a day, followed by individually corrected effective dose. The drug stopped anxiety, balanced the mood, causing no addiction. Buspirone was combined with bromine and sodium sulfate transcerebral electrophoresis № 5 and selective psychotherapy.

Conclusions: The proposed integrated therapy for AAEW was proven to be effective by statistical reliability and patient-specific clinical illustrations.

Keywords: Alcohol addiction; women; Treatment

Insomnia at the onset of addiction treatment may be related to earlier relapses: A one-year follow-up study

R. Palma Álvarez1, C. Daigre2, E. Ros-Cucurull1, P. Serrano-Pérez3, G. Ortega-Hernandez1, C. Fadeuilhe1, M. Sorribes1, A. Pereira1, J.A. Ramos-Quiroga2, C. Roncero3 and L. Grau-López3
1Secció D’addiccions I Patologia Dual, Hospital Universitari Vall d’Hebron, Barcelona, Spain; 2Psychiatry, Hospital Universitari Vall d’Hebron, Barcelona, Spain and 3Psychiatry, Complejo Asistencial Universitario de Salamanca. Instituto de Biomedicina de Salamanca., Salamanca, Spain
*Corresponding author.
Introduction: Insomnia has been related to a more severe substance use disorder presentation (1). There are few longitudinal studies in outpatients center for SUD treatment that evaluate how insomnia impacts on relapses.

Objectives: To analyze how insomnia impacts on the time of the first substance relapse in SUD outpatients after the onset of addiction treatment.

Methods: This is a one-year follow-up study performed on 116 patients (73.3% males; mean age 43.4±14.3) for whom we had information from baseline insomnia and the time for the first relapse. A Kaplan-Meier survival analysis was performed. This is part of a greater research on Alexithymia in SUD in a longitudinal study.

Results: The initial sample consisted of 116 patients, information on relapses was available for 113 patients. The main substances used at base line were alcohol (62.1%), cocaine (56.0%), cannabis (42.2%), and opiates (30.2%).

<table>
<thead>
<tr>
<th>Insomnia (any type)</th>
<th>%</th>
<th>Time of abstinence in months (m)</th>
<th>Typical error</th>
<th>χ²</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>47.8</td>
<td>3.7</td>
<td>0.5</td>
<td>10.103</td>
<td>0.001</td>
</tr>
<tr>
<td>No</td>
<td>52.2</td>
<td>6.1</td>
<td>0.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Onset insomnia</td>
<td>Yes</td>
<td>32.7</td>
<td>3.5</td>
<td>0.6</td>
<td>6.126</td>
</tr>
<tr>
<td>No</td>
<td>67.3</td>
<td>5.6</td>
<td>0.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sleep fragmentation</td>
<td>Yes</td>
<td>37.2</td>
<td>3.8</td>
<td>0.8</td>
<td>5.521</td>
</tr>
<tr>
<td>No</td>
<td>62.8</td>
<td>5.6</td>
<td>0.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early morning awakening</td>
<td>Yes</td>
<td>17.7</td>
<td>3.8</td>
<td>0.8</td>
<td>2.212</td>
</tr>
<tr>
<td>No</td>
<td>82.3</td>
<td>5.2</td>
<td>0.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nightmares</td>
<td>Yes</td>
<td>13.3</td>
<td>3.8</td>
<td>0.8</td>
<td>1.642</td>
</tr>
<tr>
<td>No</td>
<td>86.7</td>
<td>5.1</td>
<td>0.5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Conclusions: It is important to evaluate insomnia at the onset of addiction treatment because insomnia may be related to earlier relapses. Furthermore, it should be analyzed further on how insomnia treatment impact on substance relapses. REFERENCES I. Miller MB, Donahue ML, Carey KB, Scott-Sheldon LAJ. Insomnia treatment in the context of alcohol use disorder: A systematic review and meta-analysis. Drug Alcohol Depend. 2017;181:200-207. doi:10.1016/j.drugalcdep.2017.09.029

Keywords: Relapse; Addiction; Insomnia; Substance Use Disorder

EPP1319

Ethnic differences in the prevalence of online behaviors in adolescents in the southern regions of siberia

N. Semenova1,2,*, L. Evert L1, Y. Kostyuchenko1 and S. Tereshchenko1

1Scientific Research Institute For Medical Problems Of The North, Federal Budgetary Scientific Institution «Federal Research Centre Krasnoyarsk Scientific Centre of Siberian Division of Russian Academy of Sciences», Krasnoyarsk, Russian Federation and 2Research Institute For Medical Problems In The North, Federal Research Center “Krasnoyarsk Scientific Center of the Siberian Branch of the RAS”, Krasnoyarsk, Russian Federation

*Corresponding author.


Introduction: An urgent problem all over the world is the growing number of adolescents with maladaptive (Internet addicted) Internet use.

Objectives: To study the prevalence of various types of online behavior in adolescents in the southern regions of Siberia (Caucasians and Mongoloids).

Methods: 4351 adolescents aged 12-18 in the city of Krasnoyarsk and the city of Abakan (Republic of Khakassia) were surveyed. Ethnicity is determined by the nationality of the mother. Online behavior was studied using the Chen Internet Addiction Scale (CIAS): adaptive internet use (API) – 27-42 points, non-adaptive (NPI) – 43-64 points and pathological (PPI) ≥ 65 points. The indicators were compared in 2 groups: Caucasians and Mongoloids. The program “Statistica 12” was used, the percentage of the share, the significance of the differences (p) and the values of the Pearson χ² test were indicated.

Results: Caucasians by their mothers accounted for 3663 (84.2%) and the share of Mongoloids reached 688 (15.8%). AIP was recorded in 44.0% of Caucasians and 7.9% of Mongoloids (p <0.0001; χ² = 1474.99), NPI was recorded in 34.7% of Caucasians and 6.2% of Mongoloids (p <0.0001; χ² = 1084.65), PPI was found in 5.5% of Caucasians and 1.7% of Mongoloids (p <0.0001; χ² = 90.49).

Conclusions: Ethnic features of the prevalence of online behavior in adolescents in the southern regions of Siberia include a higher frequency of NPI and PPI in Caucasians compared to Mongoloids. The reported study was funded by RFBR according to the research project № 18-29-22032/18.

Conflict of interest: The reported study was funded by RFBR according to the research project № 18-29-22032/18.

Keywords: Internet; prevalence; ethnic; adolescents

EPP1320

Method of relieving alcohol dysphoria in the structure of hypertoxic alcohol abuse state with compulsive craving manifestations

I. Sosin1,*, G. Mysko2, O. Sergienko1, O. Honcharova2, Y. Babenko1 and O. Minko2

1Narcology Department, Kharkiv, Kharkiv Medical Academy of Postgraduate Education, Kharkiv, Ukraine; 2Narcology Department, Kharkiv Medical Academy of Postgraduate Education, Kharkiv, Ukraine and 2Department Of Urgent Psychiatry And Narcology, INPN NAMSU, Kharkiv, Ukraine

*Corresponding author.


Introduction: Alcohol dysphoria is a pathognomonic, severe, and therapeutically resistant syndrome considerable for alcohol and drug-addicted patients. The term “dysphoria” (from Greek δυσφορέω to suffer, torment, annoy) means an abnormally low type of mood, characterized by anger, gloom, irritability, feelings of hostility to others. In addictology, it is often identified in the withdrawal syndrome structure.

Objectives: To develop innovative improvement in treatment for alcohol dysphoria.

Methods: Valid clinical diagnostic, laboratory, biochemical, electrophysiological, psychological (scaling, testing), statistical methods identifying alcohol dependence complicated by dysphoria.

Results: The proposed method involves a complex of anti-affective, physiological, psychological (scaling, testing), statistical methods, and differs from those conventional, along with psychotherapeutic potentiation, by additional targeted pharmacological triad (peroral Carbamazepine 200 mg twice a day: in the morning and in the evening; intramuscular Halopril (Haloperidol) 1 ml