S324 e-Poster Presentation

Addictive Disorders 03

EPP0401

Benzodiazepine Prescription for Anxiety Disorders Increase the Risk of Substance Use Disorders: A Retrospective Cohort Study

C.-F. Sun¹*, Y. Lin^{1,2,3}, A. S. Pola¹, A. S. Kablinger¹ and R. L. Trestman¹

¹Department of Psychiatry and Behavioral Medicine, Virginia Tech Carilion Clinic School of Medicine, Roanoke, United States; ²Clinical Research Center for Mental Disorders, Shanghai Pudong New Area Mental Health Center, Tongji University and ³Department of Psychiatry, Shanghai East Hospital, School of Medicine, Shanghai, China *Corresponding author.

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Introduction: While the role of benzodiazepines (BZDs) has been well established for anxiety and related disorders, there are significant concerns about BZD dependence, withdrawal, and tolerance. There is a lot of ambiguity regarding the potential long-term effects of BZDs on mental health. However, the risk of developing subsequent other substance use disorders is in question.

Objectives: In this electronic medical record (EMR) based retrospective cohort study, the study cohort was defined as patients between the ages of 18 and 65 with anxiety disorders (ICD-10-CM: F40-F48) prescribed with at least one BZD; the control cohort was defined as patients between the ages of 18 and 65 with anxiety disorders (ICD-10-CM: F40-F48) with no BZD prescription during the five-year timeframe examined. We excluded patients with preexisting substance use disorders (ICD-10-CM: F10-F19), et al.

Methods: We collected data from TriNetX Research database, a real-time international EMR network, from September 2017 to September 2022. Patients in the two cohorts were matched by gender, age, race, ethnicity, and common medical conditions at a 1:1 ratio by propensity scoring and then underwent Kaplan–Meier analysis and association analysis.

Results: A total of 626,754 patients were identified and matched for analysis. Patients in the study cohort were more likely to be female (67.6% vs. 66.7%, p < 0.001), non-Hispanic (65.8% vs. 62.5%, p < 0.001) and white (72.8% vs. 69.1%, p < 0.001). Kaplan–Meier analysis showed the survival probability at the end of the time window was 94.1% for the control cohort and 89.5% for the study cohort (Hazard ratio, 2.20; 95% CI, 2.16-2.25; P < 0.001) in all type of substance use disorders. (Table 1)

Table 1. Hazard ratio of substance use disorders difference in BZD cohort versus the control cohort.

	BZD Cohort n (risk%)	Control Cohort n (risk%)	Hazard Ratio (95% Cl)	P value
Substance Use Disorders*	26,569 (4.2)	11,976 (1.9)	2.20 (2.16- 2.25)	<0.001
Sedative/hypnotic/anxiolytic related disorders	656 (0.1)	152 (0.0)	4.26 (3.57- 5.09)	<0.001
Alcohol Related Disorder	5,749 (0.9)	2,064 (0.3)	2.74 (2.61-2.88)	<0.001
Opioid Related Disorder	2,807 (0.4)	815 (0.1)	3.38 (3.13-3.66)	<0.001
Stimulant Related Disorder	1,658 (0.3)	551 (0.1)	2.94 (2.67- 3.24)	<0.001
Cannabis Related Disorder	3,376 (0.5)	970 (0.2)	3.41 (3.17- 3.66)	<0.001

^{*}Substance use disorders was defined as Mental and behavioral disorders due to psychoactive substance use (ICD-10-CM: F10-F19).

Conclusions: Patients with an anxiety disorder who were prescribed BZDs are at higher risk of not only BZD dependence but all types of substance use disorders than a matched cohort not prescribed BZDs. Given this notable association, clinicians should be cautious while prescribing BZDs and inform the patient about the risks associated with their utilization.

Disclosure of Interest: None Declared

EPP0402

DAILY - A Personalized Circadian Zeitgeber Therapy as an Adjunctive Treatment for Alcohol Use Disorder Patients

N. Springer¹, L. Echtler¹, J. Hochenbleicher¹, E. Hoch^{1,2}, G. Koller¹, A. Hühne-Landgraf¹ and D. Landgraf¹*

¹Psychiatry, Ludwig-Maximilians-Universität München and ²IFT Institut für Therapieforschung, Munich, Germany *Corresponding author.

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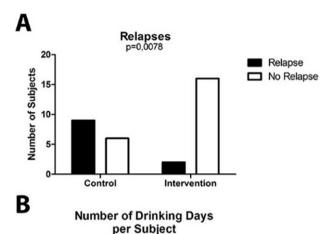
Introduction: Hallmarks of alcohol use disorder (AUD) are disturbances of circadian rhythms and everyday structures. While circadian rhythms dictate the timing of daily recurring activities such as sleep, activity, and meals, conversely, these activities represent time cues, so called *Zeitgebers*, that the circadian system uses to synchronize with the environment. We have developed a novel therapy approach for AUD patients (DAILY), in which we take advantage of this mutual influence and stabilize and strengthen their circadian system by creating strict schedules for daily *Zeitgeber* activities (Hühne *et al.* Front Psychiatry 2021). Since every person has a circadian system with its own characteristics and is subject to social obligations, the daily plans are personalized for each test person.

Objectives: We investigated whether the DAILY intervention can serve to increase the success of standard psychotherapy service and reduce alcohol use and relapse in AUD patients who are currently undergoing qualitative detoxification or post-detoxification therapy and are highly vulnerable to relapse at this stage. In addition, we investigated whether possible depressive symptomatology, sleep quality, and physical recovery of the participants are improved.

Methods: In a 6-week controlled, randomized, single-blinded, parallel-group intervention study, we used detailed, 14-day diary entries to determine the optimal eating and sleeping times for each participant individually and used these to create personalized daily structure plans. Intervention participants were encouraged to adhere strictly to this plan for the following four weeks, with compliance verifiable by continuing the diary. Relapses and dropouts were documented, and questionnaires on mood state and sleep quality were completed at the beginning and end of the intervention. The control group received a sham treatment with no effect on their daily structure. **Results:** Our data show that DAILY therapy significantly improves meal and sleep time regularity and significantly reduces relapse rates, with 60% relapse rate in the control group and 11% in the intervention group (Figure 1A). In addition, the data show that among the few intervention participants who had relapses, these occurred on significantly fewer days during the study period than among relapsing control participants (Figure 1B). While depressive symptoms were unaffected by the DAILY therapy, sleep quality improved significantly (Figure 2).

European Psychiatry S325





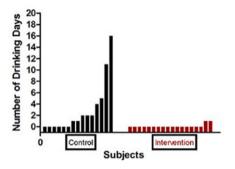
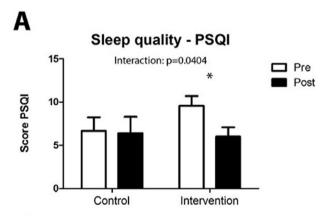
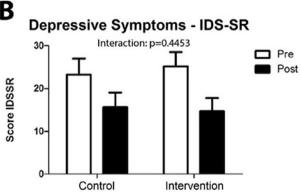


Image 2:





Conclusions: Our data show that increasing the regularity of individual eating and sleeping times with DAILY is an effective tool to substantially promote abstinence during a period when AUD patients are particularly vulnerable to alcohol use and relapse, and in addition, to improve their sleep quality and accelerate physical recovery during therapy.

Disclosure of Interest: None Declared

EPP0403

The culture of winemaking as a protective factor against at-risk drinking: a peer-led intervention with adolescents

E. Rossero¹[⋆] and A. Barbieri²

¹Eclectica+ Research and Training, Turin and ²Mental Health Department, ASL CN1, Cuneo, Italy

*Corresponding author.

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Introduction: Alcohol consumption is part of the global youth culture and represents a dimension of young people's social identity. Even if at-risk drinking in the young population is lower in Italy compared to other countries, the increasing complexity and changes in global values may influence risky behaviours, which therefore require attention and preventive strategies.

Objectives: The intervention followed a pilot named *The Vineyard Project*, which engaged a group of young mental health service users in local practices of hand-harvesting grape. The initiative was hosted in the wine-producing area of Langhe (Italy), which shows lower rates of at-risk drinking also due to the protective role played by the cultural dimension of winemaking craft. The pilot inspired a peer led-intervention in a local high school, acknowledging the crucial role that educational settings play in the lives of young people and the relevance of peer influence on adolescents' behaviours.

Methods: Semi-structured interviews with young people participating in *the Vineyard Project* have been conducted, audiorecorded and shared with high school students (n=80) to become the object of dedicated workshops. Interviews explored participants' experience in the vineyard, the relationship they developed with the vines and with professional vine growers, their role in the winemaking process, and the emotional and sensorial contents of their immersion in the viticultural landscape.

Results: The peer-led intervention showed promising results in producing benefits beyond the group of young people directly involved in the vineyard activities. By narrating their experiences through the interviews, participants acted as cultural mediators with the students who subsequently listened to their stories. Their narratives represent unusual accounts of the world of wine and its production, drawing on the perspective of non-expert, young people that are not familiar with the viticultural landscape. The embodied knowledge they could learn from professional vine growers, concerning the harvest as well as other activities of care for the vines, contribute to portray wine as a cultural product, which is the result of traditions handed down from generation to generation, hard work, competent interventions on the vines and the other living beings of the vineyard. This unusual perspective on wine was perceived as particularly surprising for students who lived in the area, who became so acquainted with the viticultural landscape and the discourses around its products to the point of taking it for granted in a non-reflexive attitude.