Methods: Ten multidrug detoxification inpatients treated with a topiramate-protocol were compared to 10 patients treated with a clonidine-scheme and 10 patients treated with a carbamazepine-mianserine protocol. Comedication, protocol deviations (dose augmentation or reduction) and retention in treatment were compared between groups.

Results: There were significantly less protocol deviations in the topiramate group compared to the other two groups. Topiramate treated patients were less often given antiemetics and sedative antipsychotic drugs. The retention in treatment was comparable between the 3 groups.

Conclusions: Topiramate is a well tolerated and seemingly efficient alternative to standard withdrawal treatments for multidrug users.

P55.04

Longitudinal study of psychiatric comorbidity in MDMA users

J.M. Gines, R. Blanco, M. Torrens, R. Martin-Santos, S. Poudevida, P.N. Roset, M. Farre, R. de la Torre. Instituto Municipal de Investigacion Medica (IMIM), Grup de Recerca en Psiquiatria, Unitat de Recerca en Farmacologia, Spain

Introduction: Prevalence and relationship between psychiatric comorbidity and MDMA use is not clearly established.

Objectives: To study, in a longitudinal case-control design, the prevalence of psychiatric disorders in a sample of MDMA users non-seeking treatment.

Subjects: Forty MDMA users non-seeking treatment and 48 matched controls.

Methods: All subjects were diagnosed (DSM-IV) in a blind manner with the validated Spanish version of a semi-structured interview specifically designed for substance abuse patients (PRISM, 1996)

Results at baseline evaluation:

- Twenty-eight percent of cases had the diagnosis of MDMA abuse disorder and 13 % had MDMA dependence disorder. Most cases showed other substance use disorder (65% cannabis, 28% alcohol, 25% cocaine). Only 2% of alcohol abuse was found in controls.
- Thirty-two percent of cases had other psychiatric disorder nonrelated to substance use (affective 5%, anxiety 8%, eating 3%).
 Only 6% of controls had non-related to substance use psychiatric disorder (affective 2%, anxiety 2%, eating 2%).

Conclusions: MDMA users non-seeking treatment has a higher prevalence of psychiatric comorbidity than controls.

P55.05

Affective disorders and craving to drugs in heroin addiction

M. Rokhlina*, A. Kozlov, S. Mohnatchev. Research Institute on Addiction, Moscow, Russia

Objectives: the affective disorders are the frequent psychopathology caused by drug abuse. Being a clinical manifestation an affective disturbances are frequently included into pathological pattern of craving to drugs.

Methods: 129 heroin addicts (99 men and 30 women) aged from 17 to 36 years old have been examined. Duration of drug misuse varied from 6 months to 6 years.

Results: in the first stage of withdrawal syndrome (5-7 days after the last heroin intake) affective disorders were accompanied by somato-vegetative and algesic symptoms. These disturbances become most prominent after cessation of acute withdrawal symptoms. There were predominant astheno-depressive, anxious and

dysphoric symptoms with behavioral difficulties in the structure of these disturbances. The aggravation of depression with the typical dysphoric features normally indicated to the actualization of pathological craving to the narcotics and needs the treatment. Considering the structure of affective disorders we preferred to administrate medications both with thymoleptic and sedative activity. Antidepressants were combined with mild neuroleptics.

Conclusions: clear association between severity of depressive disorders and intensity of craving to drugs was found. Administration of antidepressants is obligatory in the treatment of heroin addiction.

P55.06

Gambling co-morbidity in heroin addicts in MMT

M. Campana*, M. Metzger, M. Riglietta, L. Tidone. Department of Addictive Behaviours – Asl di Bergamo; ²ECCAS-Network, Italy

Goals: to evaluate co-morbidity for gambling in a group of heroin addicted patients (according to DSM IV criteria) in Methadone maintenance treatment (MMT) for more than 3 months.

Methods: we included all the patients in MMT in a defined week and we sent to all a letter in order to clarify the goals of the research and to collect their informed consent. We used SOGS — Gambling History Test (South Oaks Clinical Team by Lesieur & Blume — 1987) submitted by a trained professional.

Results.

MMT group	715			
MMT group > 3	594			
months				
Tested group	244	M 204	F 40	

	Score						
Group	0–2	%	3–4	%	≥5	%	
244	183	75	19	7.8	42	17.2	

Conclusions: our study shows an interesting result about pathological gambling in this specific group of patients: 25% of these has a significant score (>2) at the SOGS-test. At the present it is quite difficult to compare our results because we do not know if exist any international data about co-morbidity for gambling in addicts.

These results however confirm that it is necessary to better understand the common patterns of different addictive behaviours and to investigate the several aspects of the addictions in every patient to manage them in the best way The mission of our Department clearly defines that every kind of addiction are to study and to treat; for the next future we are defining more focused studies on this problem and we are developing a specific clinical unit to treat pathological gambling.

P55.07

Gender differences among heroin users

S.O. Mokhnatchev*. Research Institute on Addictions, Moscow, Russia

Background: Wide spread of heroin abuse in Russia in recent years makes it necessary to study and understand gender differences among heroin users.