

=4.55), and from group 2, ($M = 26.87$, $SD = 4.95$). Generalized problematic internet subscales (Mood Regulation, Self-Deficient Regulation, and Negative Consequences) and total score were significantly correlated with both dimensions of ASI-R: Self-Evaluation Saliency (coefficients varied from $r = .31^{**}$ to $r = .47^{**}$) and Motivational Saliency (from $r = .14^*$, to $r = .31^{**}$).

Conclusions: Generalized problematic internet use and the number of social networks are associated with adolescent's cognitive-behavioural investment in one's own appearance. Study carried out under the strategic project of the Centre for Philosophical and Humanistic Studies (CEFH) UID/FIL/00683/2019, funded by the FCT.

Keywords: social networks; appearance schemas; adolescence; Generalized problematic internet use

EPP1312

COVID-19 and technological addiction: The role of loneliness

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Introduction: The Covid-19 outbreak has shown to negatively impact on mental health. Several anecdotal and theoretical evidences argued that lockdown measures would have increased subjective feelings of loneliness and addictions' proneness.

Objectives: In addition, preliminary data underlined a possible increase in the frequency of gaming and social media use. Increased loneliness levels are likely to account for increased gaming and social media addiction during the lockdown.

Methods: We conducted a longitudinal study administering to a sample of 154 Italian adults several self-report questionnaires at the beginning of lockdown (Time 1) and three days before the end of the lockdown (Time 2). We therefore assessed loneliness feelings, frequency of gaming and social media use as well as both gaming and social media addiction. Data were analysed using Structural Equation Modelling.

Results: We observed that loneliness levels longitudinally predicted both gaming and social media addiction also controlling for gaming and social media use at Time 1.

Conclusions: Increased feelings of loneliness, a well-known risk factor for gaming and social media addiction, may be a central variable heightening vulnerability to the onset or the maintenance of technological addiction during forced social isolation. Thus, future prevention interventions may want to target this issue.

Keywords: gaming; loneliness; social network addiction; COVID-19 outbreak

EPP1313

Receiver operating characteristic analysis to determine optimal cutting point of cage in predicting physical and mental comorbidities among alcohol users

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Introduction: Alcohol use disorder (AUD) is highly related to various comorbidities, such as cancer, cognitive impairment, cirrhosis, chronic sclerosing stomatitis, stroke, and depression. The CAGE (Cut down, Annoyed, Guilty, Eye-opener) questionnaire is a simple screening material to make a diagnosis of alcoholism.

Objectives: Our study aimed to find an optimal cut-off point of CAGE for alcohol-related comorbidities in Taiwan.

Methods: We performed demographic analysis for 280 participants with AUD and categorized them into two groups according to CAGE scores. We applied receiver operator characteristic (ROC) analysis to determine optimal cutting point of CAGE in predicting physical and mental problems among alcohol users. Statistical analysis was performed with the Statistical Software Stata version 12.0 (StataCorp LP, College Station, TX, USA).

Results: The mean age of participants was 45.9 ± 10.5 years, and all of them were male. Among 280 participants, 134 (47.9%) had physical diseases, including 37 (13.2%) with liver disease, 10 (3.6%) with pancreatitis, 22 (7.9%) with gout, and 5 (1.8%) with esophageal varices; while 33 (11.8%) had one or more mental illnesses. Patients with CAGE score greater than 3 were more likely to have both mental health problems and/or physical diseases, especially hepatic disease and esophageal varices.

Characteristic	Total (n=280)	Cage 0-2 (n=155)	Cage 3-4 (n=125)	P value
Age at baseline, y 20-74				0.516
≤24	9 (3)	6 (4)	3 (2)	
25-34	35 (13)	24 (15)	11 (9)	
35-44	76 (27)	36 (23)	40 (32)	
45-54	98 (35)	56 (36)	42 (34)	
55-64	55 (20)	30 (19)	25 (20)	
≥65	7 (3)	3 (2)	4 (3)	
Median age (IQR)	45.9 (38-54)			
Male	280 (100)	155 (100)	125 (100)	
Income, k				0.594
0-10 k	39 (15)	20 (13)	19 (17)	
11-20 k	46 (18)	29 (19)	17 (15)	
21-30 k	106 (41)	58 (39)	48 (43)	
31-40 k	40 (15)	24 (16)	16 (14)	
41-130 k	29 (11)	18 (12)	11 (10)	
Physical diseases	134 (48)	57 (37)	77 (62)	0.000
Liver	37 (13)	9 (6)	28 (22)	
Pancreatitis	10 (4)	3 (2)	7 (6)	
Gout	22 (8)	9 (6)	13 (10)	
Esophageal varices	5 (2)	0 (0)	5 (4)	
Mental illnesses	33 (12)	9 (6)	24 (19)	0.000

Table 1. Demographic data of patients divided with cage score 0-2 (n=155) and score greater than 3 (n=125).

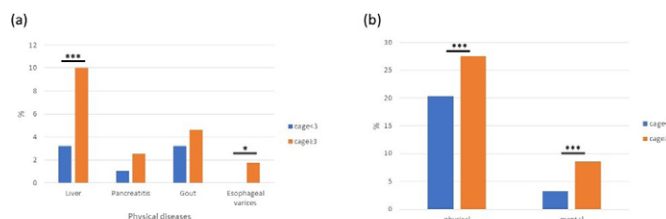


Figure 2. Percentage of patients based on threshold of CAGE scores for (a) liver disease (n=37), pancreatitis (n=10), gout (n=22), and esophageal varices (n=5); and (b) physical diseases (n=134) and mental illnesses (n=33). (*, $p < 0.05$; **, $p < 0.01$; and ***, $p < 0.001$ represent statistical differences compared to control group).

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

EPP1314

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

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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 analyses 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

EPP1316

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

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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

EPP1317

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

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