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EV1422

Amy Winehouse Foundation young persons' substance use survey–pilot findings

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Introduction Government-funded research indicates the prevalence of substance use in this age group is decreasing. However, anecdotal evidence suggests otherwise.

Previous surveys have been limited by:

- difficulty recruiting schools;
- the range of substances included;
- paper surveys.

Objectives To determine whether a secure online survey method improves substance use prevalence data collection in school age adolescents.

Method An online survey was created following literature review, and assessment of the reliability and validity of existing surveys. A comprehensive range of substances were included. A total of 750 students (11–16 yrs) from a mainstream school in Lancashire completed the survey during a supervised classroom session. Focus groups were conducted with students and teachers.

Results No technical problems were encountered and survey data was securely transferred to Excel allowing instant analysis.

Teachers felt the survey would be unproblematic to administer independently and found the inclusion of substances such as legal highs, and energy drinks, especially relevant.

Most students completed the survey within the session and reported a positive experience, although some difficulties understanding wording were mentioned. They felt an online survey improved confidentiality (and therefore honesty) and was easier to fill in. However, there was concern about teachers reading their responses.

Conclusions A secure online survey may be acceptable to both teachers and students, and enables the collection of hundreds of surveys in a short time period. It also improves analysis techniques. Further analysis of whether there is a teacher-versus-researcher supervision effect on the honesty of student responses is required.

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EV1423

Population characteristics of methamphetamine shabu users

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Introduction Shabu is a crystal methamphetamine whose consumption is common among the community of Philippine immigrants in Spain.

Objectives To describe the sociodemographic, healthcare and clinical characteristics of patients using shabu who have been treated by the psychiatry and addiction department of a tertiary hospital.

Methods We describe the cases of patients treated in the psychiatry and addiction department of the hospital del Mar in Barcelona, Spain with methamphetamine use disorder. We collected sociodemographic variables, monitoring features and psychiatric comorbidity from the review of medical records.

Results Ten cases of patients with severe use disorder of shabu were identified. Eight patients are from the Philippines. Nine are men (90%). At the beginning of the medical follow-up the average age was 30 years (21–41 years). All of them reported being unemployed. Four patients were referred urgently to the hospital from an ambulatory care center, two belonged to a specific program for children and adolescents, two were treated at the emergency department and two were assessed during their admissions in other departments. Regarding clinical characteristics, six had associated psychiatric disorders: two have paranoid schizophrenia, two had induced psychotic episode, one had unspecified psychosis and other had conduct disorder.

Conclusions Shabu is a drug that the Philippine community in Spain consumes in their daily life in a social context. However, consumption of this drug could be linked to the onset of psychotic symptoms. Registration is necessary to standardize the consumption pattern in order to establish a relationship between consumption and the appearance of psychotic and organic symptoms.

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EV1424

Elevated neutrophil lymphocyte ratio in patients with substance use disorders

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Introduction Disturbances in inflammatory processes may play a role in the pathophysiology of psychiatric disorders. The neutrophil lymphocyte ratio (NLR) and C-reactive protein (CRP) are indicators of the systemic inflammatory response.

Objectives The current study was prepared based on the assumption that dysregulated immune function and elevated inflammation markers may be seen in substance use disorders.

Aims Our aim was to investigate whether NLR and CRP are higher in patients diagnosed with substance use disorders than in healthy subjects.

Methods The participants in the study included 115 male inpatients diagnosed with alcohol ($n=41$), heroin ($n=46$), or synthetic cannabinoid ($n=28$) dependence according to the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV-TR), and 32 healthy male volunteers. We used NLR and CRP as measures of systemic inflammation. Blood samples were taken on the next morning of admission for detoxification. Addiction severity was assessed using the Addiction Profile Index (API).

Results The difference between the groups with respect to NLR was statistically significant ($P=0.014$). Patients diagnosed with alcohol, heroin or synthetic cannabinoid dependence had similar NLR. Patients with alcohol or synthetic cannabinoid dependence had significantly higher NLR than healthy controls ($P=0.001$ and $P=0.029$, respectively). Patients with heroin dependence trended towards statistically significantly higher NLR compared to healthy controls ($P=0.067$). CRP levels did not differ significantly between

the patient and control groups. NLR and CRP were not significantly correlated with API scores.

Conclusions Our findings suggest that NLR is elevated in patients with substance use disorders in comparison to healthy controls.

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EV1425

Retrospective analysis of a novel community opiate detoxification programme within Bristol specialist drug & alcohol service (BSDAS)

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Introduction Until recently community opiate detoxification strategies have largely been limited to gradual dose reductions in opiate substitute treatment (OST). These detoxes are often lengthy leading to “windows of opportunities” in patients’ motivation to detox being missed. Furthermore, many patients remain on sub-optimal OST doses for long periods of time, during which they are more vulnerable to relapse to illicit opiate use.

Within our community service, we adapted and implemented a novel two-week community opiate detoxification programme using buprenorphine front-loading and lofexidine. We worked in partnership with Bristol drugs project (BDP) to offer an 8-week psychosocial intervention alongside the medically assisted detoxification.

Objectives Assessing the completion rates and clinical safety of this intervention.

Methods Data collection was performed through retrospective review of patients’ case notes over a 9-month period.

Results Seventy-five percent of the patients starting an opiate detox successfully completed the intervention.

Lofexidine improved the mean opiate withdrawal scores by 28% at 45 min after the first dose and this was a sustained effect throughout the detox. Mean systolic blood pressure dropped by 6.2 mmHg at 45 min after the first dose of lofexidine and by 16.5 mmHg two days later however this was asymptomatic in all patients. There was no significant change in the heart rate and no adverse events.

Conclusion Our team innovatively adapted and tailored a cost-effective community opiate detoxification programme using a multi-agency strategy in a climate of limited funding and staff resources. Our data clearly indicates positive outcomes in terms of completion rates and clinical safety.

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EV1426

Nalmefene effectiveness in reducing alcohol consumption and prevention of craving: A case report

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Introduction Alcohol use disorder is a pressing problem in our society. However, only a small percentage of patients with alcohol use disorder are ever treated. Nalmefene acts as an antagonist

of mu opioid receptors preventing the pleasurable sensation that often accompanies alcohol consumption, while its modulation of kappa opioid receptors can decrease the dysphoria associated with alcohol withdrawal.

Aim Studying the effect of nalmefene on patients with alcohol use disorder who are trying to reduce their daily alcohol consumption.

Methods This is a descriptive study that pretends to assess the effect of nalmefene 18 mg/day on alcohol intake in a sample of five patients (3 men and 2 women) that came to our psychiatric consultation from March to September 2016. They all had tried in the past to stop or reduce their alcohol consumption but were unable to do so. We initiate follow-up with the patients in psychiatric consultation for the next three months with a monthly frequency.

Results Out of the 5 patients, 4 reported to have reduced their alcohol consumption over the observation time, going from 32 drinks per week to 18 drinks per week on average. The fifth patient abandoned prematurely the treatment due to the appearance of side effects (nausea). No other relevant side effects were detected.

Conclusions Nalmefene appears to be effective and safe reducing abusive alcohol intake and avoiding alcohol withdrawal syndrome. Therefore, nalmefene can be considered a good therapeutic option helping reduce alcohol consumption in patients with alcohol use disorder.

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EV1427

The effectiveness of case management interventions for patients suffering from substance use disorders

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Introduction Substance use disorder (SUD) is a growing health problem which needs a very complex range of care due to the chronic and relapsing nature of the disorder and the multiple psychosocial problems involved. There are often difficulties in current outpatient programs to deliver and coordinate ongoing care and access to different health care providers. To improve treatment outcomes various case management (CM) models have been developed, at first in other psychiatric domains but also for patients with SUD.

Aims The aim was to assess the effectiveness of CM for patients with SUD using existing studies.

Methods Systematic review of CM interventions for patients with SUD by analyzing randomized controlled studies on this matter found on the electronic database PubMed published between 1996 and 2016.

Results and conclusions Most of the analyzed studies showed improvement on the chosen outcome measures, although, these varied in the different studies. Mainly the treatment adherence improved, but substance use only reduced in a third of the studies. Overall functioning improved in about half of the studies. Further, studies are necessary to determine inclusion criteria for CM treatment for patients suffering from SUD in order to orientate patients most likely to benefit from this approach to the specific CM programs. There are still only few studies on this intervention and SUD. Further, studies are needed to examine the effect of treatment intensity of the CM intervention. Also longitudinal studies are needed to ensure the effectiveness of these treatments.

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