that naltrexone implants are very effective. Most common reason for stopping use of naltrexone implant: lack of money 46%.

Complications:

Severe	Severe infection, implant removed	1	1.25%
	(psychiatric patient, history of auto mutilation)		
Minor	Withdrawal symptoms after insertion	1	1.25%
	Infection suspected, antibiotics prescribed	5	6.25%
	Itching	4	5%
	Swelling	20	25%

Reason for stopping Naltrexone implant treatment in 54 patients

	Nr of Patients		
End of treatment year	17	31%	
No money for next implant	25	46%	
Complications	2	3%	
Cosmetic reasons	2	3%	
Relapse, not coming back for next implant	9	16%	
Reason unknown	6	11%	

P0011

Alpha7 nicotinic receptor polymorphisms in schizophrenia and nicotinic replacement therapy

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Patients with schizophrenia and with ADHD smoke cigarettes at a higher rate than normal subjects (Borland and Heckman 1976). Forty-two percent of men and 38% of women diagnosed with ADHD are current smokers, almost twice as high as the number in an unselected population (Milberger et al. 1997; Pomerleau et al. 1995). In this study we hypothesized that the allele 113bp in D15S1360 marker at CHRNA7 and the 2bp deletion allele at CHRFAM7A are associated with increased smoking in patients with schizophrenia and Adult ADHD. Our sample consisted of 78 DSM-IV patients affected by Adult ADHD and schizophrenia from the Toronto area. Current smoking status was assessed by a medical history questionnaire, and there were 29 current smokers and 49 non-smokers. We analyze the single marker association by chi-square and the CHRNA7-CHRFAM7A interaction by logistic regression, considering the 113bp and the -2bp deletion dominant. In our sample the 113bp allele in CHRNA7 does not confer risk for smoking in the ADHD (chi-sq=0.47, 1df, p=0.492). Finally, we compared the frequency of the 133bp genotype in schizophrenic smokers with non psychiatric smokers who started nicotine replacement treatment and we found significant difference in genotype distribution (p=0.0063). The analysis of a7 genes in ADHD showed no association with smoking. The molecular hypothesis of a7/a7like interaction and the number of a7like copy variation remains very interesting for psychiatric phenotype and nicotine addiction even though the a7/a7like showed no interaction in conferring risk for smoking in this sample.

P0012

Alcohol consumption: Heroin addiction aftermath

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Background:Narcotics addiction has commonly been regarded as a single-substance phenomenon.

Aims and Methods: Follow-up interviews on a sample of 32 heroin addicts who had been in nonmethadone treatment for narcotics addiction at our Institute (spring 2007) were used to examine alcohol use and substitution of alcohol for heroin. Groups were classified as: no use of alcohol, irregular consumption and daily consumption, with aim to identify background and baseline factors related to substitution. We analyzed data relevant to the aims of our research in two stages of addiction career (before the treatment and 6 months after the beginning of treatment)

Results: One fourth of the sample (8 patients) used alcohol as a substitution pattern. The substitution was found to be related to higher levels of alcohol problems before addiction. The results showed a strong relationship between substitution and parental alcohol problems and family quarrels which had existed before the treatment, as well as 6 months after they entered the treatment Aggressive behavior of the subjects who used alcohol in the substitution pattern caused problems with law in the both stages of addiction career. All 8 patients fulfilled criteria for depression (HAM/D below 21).

Conclusions: The results confirmed the validity of substitution as a powerful construct in identifying behavioral differences before and after addition. The phenomenon of substance substitution during the treatment should be considered not as evidence of the treatment failure but as an additional aspect of the addiction that must be addressed within the therapeutic framework.

P0013

Modafinil for cocaine addiction: Multi-site clinical trial

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Background and Aims: Modafinil was tested for efficacy in facilitating abstinence in cocaine-dependent patients, compared to placebo.

Methods: This is a double-blind placebo-controlled study, with 12 weeks of treatment and a 4-week follow-up. 210 treatment-seekers with DSM-IV diagnosis of cocaine dependence consented and enrolled. 72 participants were randomized to placebo, 69 to modafinil 200mg, and 69 to modafinil 400mg, taken once daily on awakening. Participants attended the clinic three times per week for assessments and urine drug screens, and had one hour of individual psychotherapy once per week. The primary outcome was the increase in weekly percentage of non-use days. Secondary outcomes included: decrease in the weekly median log of urine benzoylecgonine, subgroup analyses of balancing factors and co-morbid conditions, self-report of alcohol use, addiction severity, craving, and risk behaviors for HIV.

Results: 125 participants completed 12 weeks of treatment (60%). The GEE regression analysis showed that for the total sample, the difference between modafinil groups and placebo in the weekly percentage of cocaine non-use days over the 12-week treatment period was not statistically significant (p=0.95). A post-hoc analysis showed a significant effect for modafinil, only in the subgroup of cocaine patients without alcohol dependence. Modafinil 200mg also showed significant effects of an increase in the total number of consecutive non-use days for cocaine (p=0.02), and a reduction in craving (p=0.04).

Conclusions: These data suggest that modafinil, in combination with individual behavioral therapy, was effective for increasing cocaine non-use days in participants without co-morbid alcohol dependence, and in reducing craving.

P0014

The typical circumstances surrounding initial drug use in young people in Tehran

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The Asian Harm Reduction Network embarked upon a multi-site research conducted in four countries in Asia including Iran to gain insight in drug careers of young people and the impact of the environment. This article is the abridged synthesis of Tehran research report on description of the typical circumstances surrounding initial drug use in young people.

It was a qualitative research whose data were gathered through analysis of existing data; interviews with key informants; focus group discussions with family members, PUD (Person using drugs), service providers, policy makers, law enforcement officers; and a quantitative survey with 281 PUDs.

Curiosity, peer pressure and acceptance among friends are the most important factors that drive initiation. Having friends who use drugs is an important factor during the initiation stage. Mostly, the drug is given for free by friends and taking drugs is done with some good friends during initiation, as well as afterwards. The initial stage of one's drug use tends to be without any serious adverse effects or problems. Problems usually start -or become more serious- when dependency develops and money becomes an issue, which, in turn, can lead to criminal behavior. Financial consequences of one's drug use are often mentioned as the core problem. As expected, problems tended to become more pronounced, when people had switched towards injecting or towards an opiate.

Development community-building activities towards early detection of drug use might help young people not to continue their drug use.

P0015

Knowledge and awareness level on drug use and its related harms among the youth in Tehran

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The Asian Harm Reduction Network embarked upon a multi-site research conducted in four countries in Asia including Iran to gain insight in drug careers of young people and the impact of the environment. This article is the abridged synthesis of Tehran research report on knowledge on drug use and its related harms.

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Mass media, governmental and non-governmental organizations can reach a large group of people, whereas school, parents and other family members fail to spread information on health issues such as AIDS and Hepatitis C. Drug related issues are commonly discussed with fellow PUD. Knowledge levels among PUDs in regards to HIV transmission are low. Knowledge on Hepatitis C is extremely low. The image of a drug does not significantly differ between PUDs who have used that particular drug and those who haven't. Most non-PIDs despite PIDs (People injecting drugs) are aware of health risks related to injecting and this is a major factor in the decision not to inject. The addictive nature of injecting is widely recognized amongst PIDs, yet PIDs remain optimistic about the possibility to be able to abstain.

Policy makers are urged to plan more towards youth in the field of education to reach the general population with information regarding HIV/AIDS and Hepatitis.

P0016

The typical circumstances surrounding switching to using a different drug or a different mode of intake in Tehran

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For health promotion policy purposes, switches towards and away from injecting as well as switches towards or away from an opiate are of great importance. The Asian Harm Reduction Network embarked upon a multi-site research conducted in four countries in Asia including Iran to gain insight in drug careers of young people and the impact of the environment. This article is the abridged synthesis of Tehran research report on description of the typical circumstances surrounding initial drug use in young people.

It was a qualitative research whose data were gathered through analysis of existing data; interviews with key informants; focus group discussions with family members, PUD (Person using drugs), service providers, policy makers, law enforcement officers; and a quantitative survey with 281 PUDs.

Drug careers of young people tend to be dynamic and changeable. 26% switched towards an opiate and 50% of the respondents switched towards injecting at some stage in one's career. Expectedly, the occurrence of positive switches is low, compared to negative counterparts, yet maybe not as low as one might have expected. Shifts from one drug to the other as well as from one mode of intake to the other occur regularly and sometimes very quickly. More than 40% of the respondents switched to injecting after having used other modes of intake for more than five years.

Effectively targeting the period between the onset of drug use and switching to injecting for secondary prevention and harm reduction interventions might help PUDs.

P0017

Abuse of Tianeptine: A case report

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The objective of the authors is to make a reflection about the causes of tianeptine abuse and dependence. In the scientific literature we can