

The following comparisons reached statistical significance: the VAS score for craving at baseline was lower among retained clients at T30 ($p=0.01$) and T60 ($P=0.02$), and so was the OCDS compulsion score at baseline among retained clients at T30 ($p=0.04$); those receiving a psychopharmacological therapy after the start-up phase showed a better retention at T30 ($p=0.01$) and at T60 ($p=0.04$).

Conclusion: According to this preliminary analysis, alcohol-related symptom distress at baseline and lack of psychiatric medication after the intensive treatment phase are more frequently observed in early drop-out. Further analysis is necessary to identify true predictors of retention in a multivariate model.

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Positivity of borna disease virus (BDV) in patients with substance abuse

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Backgrounds and aims: BDV is a RNA virus belonging to the family Bornaviridae with a high affinity to the limbic system. BDV interferes with receptors in the CNS, causing changes in neurotransmitter systems, mood and behavioural changes. Higher positivity of BDV has been described in psychiatric patients during the acute course of disorders in comparison with remission and healthy individuals. Substance abuse is associated with behavioural, mood changes, craving, chronic course and high risk of relapses. These characteristics are explained by the influence of drugs and alcohol to opioid and dopamine systems accountable for the reward mechanism. We suppose higher BDV positivity in substance addict patients in the beginning of treatment, lower positivity due to the abstinence period associated with decrease of craving.

Methods: Examination of hospitalised patients for substance abuse according to ICD 10 for serum positivity of BDV infection (antigens-Ag, circulating immunocomplexes-CIC) by ELISA on day 1 and day 56 (2 months of abstinence). Evaluation of Questionnaire of Psychic Dependence on day 1 and 56.

Results: We have investigated 21 patients to day. Till December 2006 we suppose there will be minimally 30 investigated patients. We have at disposition results with statistical evaluation in February 2007.

Conclusions: Higher BDV positivity in substance addict patients can be associated with immune changes during abuse. BDV can influence through neurotransmitter systems (dopamine) behaviour of these patients (craving) and be associated with higher risk of relapse. Higher BDV positivity is supposed in the beginning of treatment and associated with more intensive craving.

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Alexithymia in patients with substance addiction being treated by cognitive-behavioural psychotherapy within Minnesota model treatment

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Background and aims: Alexithymia is the incapacity to identify and describe one's own feelings. Our study questions whether alexithymia is a constant personality "trait" or a "state" phenomenon occurring in addicted patients. Our hypothesis is that this may change with cognitive-behavioural psychotherapy.

Method: 96 patients (69 male and 27 female) suffering from multiple substance addictions defined by DSM-IV criteria participated in

group cognitive-behavioural treatment sessions, for a period of 8 weeks. The patients did not have concurrent psychotic and organic cerebral diseases, withdrawal syndrome, and were abstinent from psychoactive and substitution medication. Each patient was evaluated at the beginning of the first and the last week of psychotherapy according to Schalling-Sifneos Personality Scale Revised, State-Anxiety Inventory of Spilberger, Hospital Anxiety and Depression Scale, Hopelessness Scale. Duration of the addiction, educational and social-economic states were analysed.

Results: 60% of patients (44% of female and 67% of male) were established as alexithymic. These patients showed the highest scores in all psychometric tests compared with non-alexithymic patients.

After cognitive-behavioural psychotherapy the majority of the patients improved their scores and only 30% of patients (22% of female and 33% of male) remained alexithymic. There are correlations between alexithymia and the severity of anxiety-depression manifestations, the duration of addiction, the educational and social-economic states.

Conclusion: Alexithymia is a "state" phenomenon within patients with substance addiction and can be improved with cognitive-behavioural psychotherapy.

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Aggregate - level beverage - specific effect of alcohol on alcoholism and alcohol psychoses rate

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Background: It is very important to monitor and analyze statistics on the adverse consequences of alcohol abuse. In fact, there is already a tradition of using the alcohol consumption per capita level as an index of magnitude of alcohol-related problems.

Statistical data of narcological service reports turns out to be a unique source of information regarding the problem.

Purpose: In the present paper we focused on the aggregate-level, beverage-specific effect of alcohol consumption on alcoholism and alcohol psychoses morbidity rate.

Method: Trends in alcoholism and alcohol psychoses morbidity rate and beverage-specific level of alcohol consumption per capita from 1970 to 2005 in Belarus were analyzed employing ARIMA analysis in order to assess bivariate relationship between time series.

Results: According to official statistics, alcohol psychoses rate increased 3.5 fold (from 6.8 to 23.7 per 100.000 of population) and alcoholism rate increased 6.0 fold (from 51.5 to 304.7 per 100.000 of population).

The results of analysis suggest close relationship between alcohol psychoses morbidity rate and total level of alcohol consumption per capita ($r = 0.72$; $SE = 0.18$), as well as strong spirits (vodka) consumption ($r = 0.47$; $SE = 0.18$).

Conclusion: The outcome of present study suggests that alcohol psychoses morbidity rate is considered to be reliable enough statistical index reflecting the level of alcohol-related problems in the society.

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Influence of childhood adhd history on personality traits of pathological gamblers

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Background and aims: Different personality factors have been investigated in connection with addictive disorders such as pathological gambling. “Impulse control”, proposed as a dimension of personality in modern “Big Five” models, has been associated with pathological gambling. Pathological gamblers have a high prevalence of childhood attention-deficit/hyperactivity disorder (ADHD), which is also associated with high impulsivity. Based on a five-factor personality model, our objective was to compare different personality dimensions in a group of pathological gamblers with childhood ADHD history, a group of pathological gamblers without such history and a control group. Special emphasis was placed on the factor “emotional stability”, which includes the subdimensions “emotion control” and “impulse control”.

Methods: A sample of 30 pathological gamblers with childhood ADHD history (ADHD+PG group), 33 pathological gamblers without ADHD history (ADHD-PG group) and 42 control subjects were assessed using the Big Five Questionnaire (BFQ). The different BFQ dimensions and subdimensions were compared.

Results: For the “emotional stability” factor, the T-scores obtained indicated statistically significant differences between groups (ADHD+PG group: 44.1; ADHD-PG group: 51.9; control group: 57.9; ANOVA, $p < 0.001$). Scheffé's post hoc analysis showed the ADHD+PG group to be less emotionally stable than both the ADHD-PG ($p = 0.002$) and the control groups ($p < 0.001$); the ADHD-PG group also scored lower on this “emotional stability” factor than the control group ($p = 0.015$).

Conclusions: Pathological gamblers with a history of childhood ADHD exhibit differential personality traits. ADHD history is associated with a lower score on the “emotional stability” factor, which includes the subdimensions “emotion control” and “impulse control”.

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Neuropsychology and alcoholism: Influence of childhood ADHD history

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Background and aims: A high prevalence of childhood attention-deficit/hyperactivity disorder (ADHD) history has been found in alcoholic patients. Patients with this history have an earlier onset and greater intensity of alcohol use, more polysubstance use and a poorer prognosis. Our objective was to study differences in neuropsychological functioning in a group of alcoholic patients according to the presence or absence of a history of childhood ADHD.

Methods: A sample of 136 male alcoholic patients and 56 male control subjects were evaluated using the Continuous Performance Test (CPT); execution in both groups was compared. The sample of alcoholic patients was then divided into two subgroups according to the presence or absence of a history of childhood ADHD, namely the ADHD+ OH subgroup (61 patients with childhood ADHD history) and the ADHD- OH subgroup (75 patients without this history); CPT execution in these two subgroups was also compared.

Results: The group of alcoholic patients made more omission ($p = 0.008$) and commission ($p = 0.009$) errors in the CPT than the control group. When comparing subgroups, ADHD+ OH patients made

more omission and commission errors than ADHD- OH patients, although the differences did not reach statistical significance.

Conclusions: Alcoholic patients perform more poorly on the CPT than control subjects. In the sample of alcoholic patients, a history of childhood ADHD was not associated to significant differences in the execution of this test.

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Smoking prevalence in the different psychiatric diagnoses in a hospitalisation unit

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Background and aims: Smoking is an important health problem associated with different medical and psychiatric disorders. A high prevalence of smoking has been described in psychiatric patients. Our objective was to determine the prevalence of smoking in inpatients admitted to a psychiatric hospitalisation unit in a general hospital, and to study the possible differences in this prevalence according to the different psychiatric diagnoses.

Methods: A retrospective analysis of the medical records and discharge reports of the 659 patients admitted to our psychiatric hospitalisation unit during three consecutive years (2003-2005) was carried out.

Results: At the time of their admission, 70.2% of our patients were smokers. This percentage reached 97.2% among patients with substance-use disorders (SUDs), and 95.5% among patients with dual diagnosis. However, only 48.6% of patients without concurrent SUDs were smokers; this difference reached statistical significance ($p < 0.001$). According to psychiatric diagnosis, significant differences were also found regarding the percentage of smokers: 83.0% in schizophrenia, 80.0% in schizophreniform disorder, 70.7% in bipolar disorder, 29.3% in major depressive disorder and 56.8% in other disorders ($p < 0.001$).

Conclusions: Although smoking prevalence among psychiatric patients is higher than in the general population, differences were found between the various psychiatric diagnoses. Thus, the prevalence of smoking was highest among psychotic patients and among those with concurrent use of other substances, whilst depressive patients had rates of smoking similar to those of the general population.

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Heavy drinkers with recreational cocaine use: Who does become a cocaine or alcohol dependent 4 years later?

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Background: Alcohol and cocaine are frequently used together. Little is known about which factors are related with the development of either cocaine or alcohol dependence in dually users.

Aims: To determine variables associated with the risk from the development of either cocaine or alcohol dependence in non-dependent drinkers with recreational cocaine use during a 4 year-follow-up period.