Methods Our outpatient caseload was filtered to select opiate-dependent patients receiving more than 85 mg methadone daily. Primary care summaries and laboratory results databases were analysed for the presence of other TdPPRFs: female sex a documented history of ECG abnormalities, electrolyte imbalance, liver or renal failure, and concomitant use of other QT prolonging medication or stimulants.
Results Fourteen opiate-dependent patients (10.29% of patients on methadone) were maintained on ≥ 85 mg methadone daily. Gender distribution was F:M = 1:1.8; 64% misused illicit stimulants; 57% were prescribed other QTc prolonging medication and 29% had a documented history of liver/renal failure or electrolyte imbalance. Only 14% had previous ECGs documented in primary care summaries. Of patients on high dose methadone, 85.7% had at least one TdPPRFs present and 64.3% had at least two.
Conclusions These results demonstrate an increased rate of TdPPRFs in this patient group and highlight the importance of ECG monitoring which ideally should be offered to patients receiving even lower doses of methadone.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV47

Gamma-hydroxybutyrate (GHB) withdrawal syndrome: First case report in Lithuania (Kaunas addiction treatment center)

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Gamma-hydroxybutyrate (GHB) is a γ-aminobutyric acid (GABA) precursor and metabolite that naturally occurs in the human body. Initially, GHB was used as an anaesthetic agent but was later also found to have anabolic, hypnotic, antidepressant, anxiolytic as well as cholesterol lowering effects. Recently though, research into GHB has been carried out primarily in assessing its effectiveness in treating alcohol and opioid withdrawal syndrome. There are no epidemiological data about GHB consumption in Lithuania, however during last decade there were observed many fatal cases of GHB users due to GHB intoxication or withdrawal abroad. In this article we will present the clinical case and problems which face the patient of 2-year daily GHB consumption. There were observed mild to moderate abstinence state presented with its clinical course and peculiarities. Whereas using GHB is becoming more popular in Lithuania, it is very important to pay attention to this substance and problems related to its usage.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV48

Treatment of patients with opioid addiction with different disease duration

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To study the characteristics of medical and rehabilitation care for patients with opioid dependence we have investigated 50 patients. All patients on long-term use of opioids were divided into 2 groups. The duration of drug abuse in group 1 ranged from 4 months up to 5 years. In the second group, the duration of dependence was more than 5 years. Patients in the second group of somatic-neurological symptoms were having somatic disorders and organic brain damage. Systematic observation in drug treatment clinics at the place of and maintenance treatment of at least one year was achieved in 8.48% of patients of group 1 and 3.85% of the second group. Consequently, the role of the therapeutic factor in trying to achieve regression syndrome pathological attraction in early stages of the disease, we recognize more productive. Patients of the second group with a large weighting of disease duration was noted clinical abstinence syndrome both by somatic and neurological disorders, as well as by more severe anxiety, dysphoric disorders. These disorders require the inclusion in the scheme of treatment techniques aimed at more effective detoxification and immune reactivity of the organism. Patients of the second group was added to the treatment nootropics and immunomodulators. Analysis of the results of treatment in patients with drug addiction with different disease duration showed significant differences in the effectiveness. In the second group with a duration of more than 5 years of addiction, it is advisable to the treatment nootropics, immunomodulators.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV49

Neurobiological basis of mutual influence of stress burden and alcohol addiction: Review of data

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Introduction The current situation in Ukraine is characterized by multitude social-stress factors, resulting in an increase in alcohol consumption and alcohol addiction, which arises as a mechanism to compensate the adverse mental stress and different variant of chronic stress disorder.
Objective Substantiate the neurobiological basis of mutual influence of stress burden and alcohol addiction.
Aim To study the biochemical mechanisms that underlie the vicious circle of stress and alcohol addiction.
Methods Studies the features of hypothalamic-pituitary-adrenal (HPA) axis under stress and alcohol available in Medline, Institute for Scientific Information Databases (Science citation index expanded and Social sciences citation index), EMBASE, and Cochrane Library were identified and reviewed.
Results Alcohol, just like stress, affects the HPA axis, changing the reaction of its parts and, by reducing the production of cortisol, which produces in response to stress and prolongs subjective experiences of nervous tension caused by stress. Stress, through the output of cortisol, reduces the effect of alcohol leads to a desire to further alcohol abuse. The system includes elements of the extended amygdala, which have as reinforcement and stress reactivity. Central nucleus amygdala plays a leading role in the reinforcing effects of pharmacological agents with narcogene potential and performs persuasive role in the activation of hypothalamic reinforcement mechanisms. This allows us to consider neurohormonal system, including the amygdala, hypothalamus, pituitary and adrenal glands as structural and functional basis of formation depending on various narcogene, primarily alcohol.
Conclusions Dysregulation of the HPA axis is a neurobiological basis of mutual influence of stress burden and alcohol addiction.
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