appropriate words. Results The PG patients showed different alterations at the WCST as compared with healthy subjects. There was a great difficulty to create alternative methods of problem-solving, the patients decreased instead of increasing the efficiency during the consecutive phases of the test, that is, they could not exploit the learning as a positive reinforcement. On the contrary, the mean score at the WMR-S was 97 (within the normal range) and the FAS average score was P=27 (normal value >20): this means that the basic language of the subjects and their ability of communication were within the normal limits. Discussion and conclusions Our findings showed that patients affected by PG showed sufficient intellectual, linguistic and normal visual-spatial abilities. On the contrary, they presented different abnormalities at the WCST. Because the WCST is sensitive to damage on the dorsolateral portion of the prefrontal cortex, as well as to damage of non-prefrontal cortical regions connected to the prefrontal cortex, our data would suggest a generalized frontal lobe cognitive deficit. Our results would seem to confirm an altered functioning of the prefrontal areas which would determine a deficit in the executive functions; this could represent a factor of vulnerability for the development of impulsive and/or compulsive behaviours, such as PG.

Sunday, April 3, 2005

P-01. Poster session: Substance-related disorders I

Chairperson(s): Karl Mann (Mannheim, Germany), Ulrich Preuss (Greifswald, Germany)
11.15 - 12.15, Gasteig - Foyers

P-01-01

Neuroimaging in alcoholism: Voxel-based-morphometry shows correlation of cingulate and frontal lobe atrophy with lifetime drinking history

A. Diehl, A. Jatzko, G. Ende, H. Welzel, T. Demirakca, K. Mann. *CI of Mental Health Addictive Behavior, Mannheim, Germany*

Objective: Brain atrophy is well documented in alcoholism. Morphometric MRI studies have shown alcoholic brain alterations mainly focused in the frontal cortex and the cerebellum. But classical MRI-based volumetry requires segmentation of a priori region of interest.

Methods: To determine a detailed distribution of brain atrophy in relation to lifetime alcohol consumption we measured volumetric brain alterations in alcoholics shortly after withdrawal and in healthy social drinkers. MRI studies were performed on a 1.5 T Siemens Vision system. Structural T1-weighted 3D mprage datasets with a resolution of 1 mm³ were obtained from 48 alcoholics (27m, 21f) and 36 healthy social drinkers (23m, 13f). Postprocessing of the images was performed using Matlab and SPM2. Volumetric evaluation was performed with Voxel-Based-Morphometry (VBM) that does not require a priori regions of interest and fits especially for cross-sectional examinations.

Results: We found regional grey matter atrophy correlating with the lifetime drinking history (LDH) only in the cingulate and in the frontal lobe (p=0.05) in alcoholics and healthy controls.

Conclusion: VBM give information about localized morphologic changes, indicating that there is an alcohol related brain atrophy in distinct areas correlating to alcohol consumption in alcoholics and healthy social drinkers.

P-01-02

Alcohol craving and the A1 allele of the D2 dopamine receptor gene

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Objective: Significant association has been reported between the D2 dopamine receptor (DRD2) minor Taq 1A (A1) allele and substance misuse, while dopamine hypo functioning seems as well involved in substance craving. In contrast, the putative link between the A1 allele of the DRD2 and alcohol craving has seldom been studied. Our goal was to determine whether an association could be found between those parameters in alcohol dependant patients.

Methods: 60 male DSM IV alcohol dependant patients between 18 and 65 years of age were included. They were hospitalized for withdrawal and given diazepam for 8 days while all other drugs were stopped. Alcohol craving was monitored weekly throughout their 4-week stay and twice in 2 months after they were discharged, using the Obsessive Compulsive Drinking Scale (OCDS). Genomic DNA was extracted from peripheral leukocytes. Polymerase Chain Reactions (PCR) amplifying Taq 1 polymorphisms of the DRD2 were performed. The impact of DRD2 (A1 or A2 alleles) on alcohol craving was assessed by ANOVAs.

Results: While the A1 allele of the DRD2 didn't influence OCDS scores during the hospitalization, a statistically significant difference was found two months after discharge between carriers and non carriers of the A1 allele. Patients with the A1 allele (whether hetero or monozygous) exhibited higher OCDS scores than homozygous patients for the A2 allele (5.81 ± 5.06 versus 0.3 ± 0.67, F = 12.262, p = .004). This difference was also observed with the Obsessive Thinking subscale of the OCDS (3.8 ± 3.34 versus 0.2 ± 0.42, F = 12.103, p = .004) and with the Compulsion subscale of the OCDS (2.0 ± 1.87 versus 0.1 ± 0.31, F = 10.499, p = .006).

Conclusion: Alcohol craving may be influenced by genetic differences in alcohol dependant patients both in its obsessive and in its compulsive components. However, carrying the A1 allele of the DRD2 increases craving only when patients are no longer hospitalized, suggesting that this influence is exerted on individuals subjected to usual drinking cues they didn't experience during their hospitalization.

P-01-03

Asialotransferrin: A porr biomarker of alcohol abuse

R. Schwan, F. Legros, V. Nuyens, L. Malet, I. Chéreau-Boudet, P. M. Llorca. *University Hospital Psychiatry B, Clermont-Ferrand, France*

Objective: The spectrum of alcohol use disorders covers hazardous use, alcohol abuse and alcohol dependence. A recent study reported that asialotransferrin, a newly proposed biomarker, offers the best discrimination between moderate and abusive alcohol consumption. However, the 'alcohol abusers' in this study were probably inadequately identified. The present study thus evaluated the performance of asialotransferrin in detecting alcohol abuse and alcohol dependence.

Methods: A four-month trial was conducted in three groups of subjects: alcohol abusers and alcohol-dependent patients, as defined in DSM-IV, and a control group. Asialotransferrin was assayed by capillary zone electrophoresis.

Results: Asialotransferrin demonstrated a sensitivity of 0.34 and a specificity of 1.00 for alcohol abuse. The sensitivity of asialotransferrin increased to 0.57 in alcohol-dependent patients.

P-01-04

Oxcarbazepine in the detoxification of chronic alcoholics

A. Gual, S. Mondon, J. Jou. *Hospital Clinic Institute of Nervous System, Barcelona, Spain*

Objective: Carbamazepine has shown effectiveness in the prevention of alcohol withdrawal. It's analogue oxcarbazepine hasn't been tested in clinical trials to prevent alcohol withdrawal and it could be of potential use in the weaning period.

Methods: Randomized open trial to test the efficacy of oxcarbazepine (tapering from 2400 mg/day) versus diacepam (tapering from 40mg/day) and placebo in the prevention of alcohol withdrawal during 7 days of inpatient detoxification treatment. 40 patients will be included in each arm of the study. Alcohol withdrawal is measured daily with the CIWA and the SAWS scales.

Results: 21 patients had entered the study in December 2004. CIWA at admission was 3,76 with no significant differences between groups. Patients reported to be drinking an average of 781 gr of alcohol per week. Blood samples at intake screened positive for alcohol in 16 patients, with a mean of 755,38 mg/l. All urine samples at admission screened negative for cannabis, amphetamines and opioids. One sample was positive for cocaine and 3 for benzodiacepines. Mean CIWA score at day 7 was 1,40, again without significant differences among groups. Mean SAWS score at day 0 was 6,459 and decreased to 0,370 at day 0. One patient in the oxcarbazepine group was retired because of an adverse event (nausea). No significant differences in the presence of side effects were found.

Conclusion: Preliminary data show that no serious adverse events have been reported following oxcarbazepine use during alcohol withdrawal. Oxcarbazepine appears to be a promising drug for the prevention of alcohol withdrawal, since the absence of risk of abuse can be useful in outpatient settings.

P-01-05

The effect of detoxification on sleep in a sample of alcohol dependent individuals

T. Paparrigopoulos, J. Liappas, P. Theodoropoulos, E. Tzavellas, C. Soldatos. *Athens University Medical Scho Psychiatry-Eginition Hospital, Athens, Greece*

Objective: Alcohol abusing/dependent individuals often present with a variety of sleep problems and disorders. In this study we investigated the type and the severity of such problems.

Methods: The sample of the study comprised 22 patients who fulfilled the DSM-IV diagnostic criteria for alcohol abuse/dependence who were treated on an inpatient basis at the specialized drug and alcohol addiction service of the Athens University Psychiatric Clinic at the Eginition Hospital. The subjects were assessed through the Sleep Disorders Questionnaire (SDQ). SDQ is a 'triage' instrument that contains four clinical-

diagnostic subscales, ie. for sleep apnea (SA), narcolepsy (NAR), psychiatric sleep disorder (PSY), and periodic limb movement disorder (PLMD), and another one assessing insomnia (INS) in particular. The questionnaires were administered at the beginning of the detoxification period and at discharge. Descriptive statistics are used for the presentation of the results.

Results: Mean age ± SD of the sample was 48,91 ± 11,58 years and mean daily alcohol consumption was 278,29 ± 163,88 gr/day. Based on the normative SDQ cut off scores before the initiation of treatment, 82% of the patients fulfilled the criteria for a sleep disturbance due to a psychiatric disorder, 41% for sleep apnea, 64% for periodic limb movement disorder, 14% for narcolepsy, and 50% for insomnia. After detoxification SDQ scores were drastically reduced and all subscales were within normal range.

Conclusion: Alcohol dependent individuals, during the period of alcohol abuse, have a higher incidence of sleep problems compared to the normal population. Following detoxification sleep disturbance appears to remit.

P-01-06

Fast-track referrals to an alcohol treatment unit over a 6 month period

K. Naidoo. *Merseycare NHS Trust General Adult Psychiatry, Aughton, United Kingdom*

Objective: Does a fast-tracking system of referral to an alcohol treatment unit increase the level of engagement of clients with primarily alcohol related problems that are assessed in the A&E department?

Methods: Clients presenting over a period of 6 months with psychiatric symptoms and comorbid alcohol use were chosen for the study. Exclusion criteria were prior contact with the alcohol clinic or ongoing contact with the mental health services. Referrals were accepted from doctors as well as nurses working in the crisis team. The assessment included demographic data as well as a detailed drinking history and details of psychiatric symptoms. Clients were also asked about their willingness to engage with further treatment.

Results: A total of 20 referrals were received during the period with 75% (15/20) male and 25% (5/20) female clients. The non-attendance rate was 25% (4/20). 45% (9/20) fulfilled ICD-10 criteria for depression and 50% (10/20) had a history of psychiatric disorder. All attendees were offered further intervention in the form of day groups, evening groups or in-patient treatment. The average waiting time for referral was 10 days.

Conclusion: The system of fast-tracking proved extremely effective in this client group. Previous rates of non-attendance with routine appointments were as high as 50% as opposed to 25% in this study. A limitation was the small sample size but repeating the study over a longer period would help confirm if such a system of referral would prove cost effective to the service.

P-01-07

Depressive disorders among the patients hospitalized because of alcohol withdrawal syndrome in the course of alcoholic dependence

M. Dosiak, E. Wojtyna. *Public Hospital Psychiatric Ward, Ruda Slaska, Poland*

Objective: Examination covered group of 65 persons hospitalized on the account of intensity of alcohol withdrawal

syndrome in the course of alcoholic dependence set, recognized according with ICD-10 classification.

Methods: In psychological examination of patients one used questionnaires: BDI, GSES, MHLC, STAI, MAST. In evaluations of BDI scores was included division of symptoms on cognitive, motivate, fear and somatic sphere. In analysis it was used also data of general diagnosis examination, laboratory researches and detailed anamnesis of disease process.

Results: One observed the decrement of amount of points in Beck scale in examination repeated in the day of end of hospitalization, with an average of 12 pts. Particularly essential share in decrement of intensification of depression had improvement at the range of cognitive and somatic symptoms. Among most hospitalized slightly incremented intensity of depression symptoms connected with fear.

Conclusion: Improvement in the range of motivation element only observed among the patients with strong feeling of self-efficiency, internal placement of health control and having the consciousness of harmful influence of drinking of an alcohol for own health. Patients with high scores in Beck's depression scale characterized better insight in problem of own alcoholic disease. The lowest scores in Beck's scale in the moment of the excerption were received by patients with strong feeling of own efficiency, strong external control– type „influence of everybody else" and having consciousness of harmful influence of an alcohol for their own health.

P-01-08

Excessive drinking situations in abstinent German alcoholics: A one-factor model

H. Nakovics, T. Lemenager, A. Diehl, A. Georgi, O. Klein, J. Nikitopoulos, S. Löber, A. Heinz, M. Smolka, K. Mann. *ZI Mannheim Kl. f. abh. Verh. u. Suchtmed, Mannheim, Germany*

Objective: The "Inventory of Drinking Situations" (IDS; Annis, 1982), a self rating questionnaire to assess different mood states before excessive alcohol intake during the last year of drinking, may be important for understanding the maintenance of drinking and relapse in abstinent individuals. Cannon et al. (1990) analysed the factor structure of this 100 Item questionnaire in North American alcoholics and developed a three factor model: negative states, positive states and testing of personal control. The same results were found with the German form of the IDS (DITS, Victorio-Estrada, 1997). Our present study deduces a general factor model from the replicated three factors on the base of the eight IDS-subscales.

Methods: N=98 detoxified alcoholics (79 female, 19 male) with an average age of 46.4±8.2 (range 29.9 to 65.0 years) who fulfilled diagnostic criteria for alcohol dependence according to DSM IV (American Psychiatric Association, 1994) were included in the study. We examined factoranalytically the general-factor model based on the replication of the three factor structure and evaluated the validity of the g-factor by comparing the coefficients between the three factors and the g-factor.

Results: The distribution of the general factor scores is normal and ranges from excessive drinking in negative states to excessive drinking in positive states. The g-factor explains about 70% of the variance. We found comparable validity coefficients of the g-factor and the three factor solution.

Conclusion: We could confirm a general factor model of the IDS (German version) on the basis of the eight categories of situations excessively drinking. The 3 factors load high and justly equal on the g-factor. The validity of the g-factor is comparable with the three factor solution. Contrary to Victorio-Estrada (1997) we found a significant negative correlation with age but our sample is about 15 years older in the average.

P-01-09

A pragmatic follow-up in primary care to identify predictors of withdrawal in alcohol dependence

L. Malet, P.-M. Llorca, O. Blanc, M. Reynaud, B. Falissard. *CHU Clermont Ferrand Psychiatry B, Clemont Ferrand, France*

Objective: Main predictors of relapse in alcohol dependence are: age gender marital status, and "motivationnal factors". Our objective was to identify (and to compare) predictors of withdrawal.

Methods: The study is naturalistic and prospective during 18 months. 135 DSM-IV alcohol dependent patients were followed-up by their usual general practitionners. Clinical and social. data were collected each consultation with standardized questionnaires. Analysis was conducted with Cox's model considering censured data.

Results: 80 withdrawals and 40 relapses occured during 12 months. Results concerned 875 consultations. Positive predictors of occuring withdrawal were frequency of consultations and alcohol consumption advice (even in an non-structured way). Negative predictors were severity of alcohol dependence (according to DSM IV criteria) and life events (according to axis 4 of DSM IV). Age, gender, marital status, occupational status, earlier withdrawal, duration of alcohol misuse and prescriptions were not linked to withdrawal.

Conclusion: Quantitative management by general practitionners seems to be important in evolution of alcohol dependence. Simple warning and advice about alcohol consumption, frequently repeated, appear to increase maturation and can lead to abstinence. It might be a part of motivational factors. The importance of life events confirm also the need of a medico-psycho-social management in alcohol dependence.

P-01-10

Cue-reactivity of alcohol dependent patients as a predictor of relapse: Are there changes after cue-exposure treatment?

S. Löber, B. Croissant, A. Heinz, H. Flor, K. Mann. *Dept. of Addictive Behaviour, Mannheim, Germany*

Objective: Cue exposure treatment for alcohol dependent patients is discussed as a potentially effective treatment of addiction as it is hypothesized to change cue-reactivity. In the present study, we examined the impact of cue-exposure therapy on subjective as well as psychophysiological measures of cue-reactivity.

Methods: All patients fulfilled the criteria of alcohol dependence (DSM-IV) and took part in a qualified alcohol detoxification program. 28 patients received cue-exposure treatment, whereas 32 patients received a cognitive-behavior treatment as a comparison treatment. At pre-treatment assessment, we collected data on affective startle modulation and assessed changes of electrodermal activity and selfreported craving when we presented alcohol and affective slides. After three weeks of treatment, we repeated these measurements.

Results: Electrodermal activity and craving were at pre-treatment assessment significantly increased for alcohol pictures in contrast to neutral slides ($F(1,45) = 4.720$; $p < 0.05$ and $F(1,55) = 7.121$; $p < 0.01$). At post-treatment assessment we found for the patients of both treatment groups no more significant increases in electrodermal activity and craving. Regarding the startle reflex, we detected at pre-treatment assessment as well as at post-treatment assessment for both treatment groups no differences between the startle modulation when patients viewed alcohol and positive pictures whereas the startle magnitude for alcohol slides was significantly reduced in contrast to negative and neutral pictures (all $p < 0.017$ (αadj)).

Conclusion: Cue-exposure therapy had no greater influence on cue-reactivity than a cognitive-behavioral treatment approach. Both treatment groups showed no more cue-dependent increases of autonomous arousal and craving after three weeks of intensive treatment. However, we could not detect any changes in the affective modulation of the startle reflex. This suggests that the startle reflex refers to permanent processes of incentive-sensitization.

P-01-11

Predictors and Correlates of Suicide Attempts in Alcohol-Dependent Men and Women

U. Preuss. *Johanna-Odebrecht-Stiftung Psychiatry, Greifswald, Germany*

Objective: Suicidal behaviors are often seen in alcohol-dependent individuals. The aim of this study is to identify and confirm risk factors for suicide attempts in a large, family-based sample of alcoholics cross-sectionally and during a 5-year follow-up period. Finally, familial transmission of alcoholism and suicide attempts are analysed too.

Methods: As part of the Collaborative Study on the Genetics of Alcoholism (COGA), semistructured, detailed interviews were administered to 3190 alcohol-dependent individuals for the cross-sectional analysis and to 1237 alcoholics for the 5-year follow-up study. At baseline, for both analysis, information about suicidal behavior, socioeconomic characteristics, psychiatric comorbidity, substance use disorders, and characteristics of alcohol dependence were obtained from alcohol-dependent probands, controls, and their relatives.

Results: As determined in both cross-sectional and prospective analysis, alcohol-dependent individuals with a history of suicide attempts were found to have a significantly more severe course of alcohol dependence, reported more impulsivity and a higher prevalence of both independent and substance-induced psychiatric disorders and other substance dependence. An additional factor related to suicide attempts during the follow-up period wasdhistory of suicide attempts with both baseline and interval data together explaining 35.0% of the variance. Probands with histories of suicide attempts did not differ significantly from those with no prior suicidal history regarding the proportion with a close relative with major psychiatric disorders and substance use disorders. However, subjects with a history of suicide attempts were significantly more likely to have a first-degree relative with a suicide attempt.

Conclusion: These results support the hypothesis that alcohol-dependent individuals with a history of suicide attempts are more

severely impaired. Screening and subsequent treatment of alcohol use disorder, psychiatric comorbidity, and substance use disorders among alcoholics may be crucial in preventing suicide attempts and completions. Regarding familial transmission of suicide attempts and alcoholism, our results support the hypothesis of an independent transmission of alcoholism and suicidal behavior in these families.

P-01-12

Dimensions of psychopathology and personality in Dutch alcohol dependent patient

J. I. Egger, H. De Mey, S. Tuinier, W. Verhoeven. *Vincent van Gogh Institute for Psychiatry, Venray, Netherlands*

Objective: Alcohol dependence is more prevalent in patients with a personality disorder. Research in this field has concentrated on identifying certain personality characteristics (i.e., typologies) to study associations with alcohol dependence. An important goal of this approach is to refine assessment-strategies for this group and to facilitate appropriate treatment design for the individual patient.

Methods: The current research is aimed to identify such typologies and studies the relation of Cloninger's Temperament Character Inventory (TCI), and the Minnesota Multiphasic Personality Inventory (MMPI-2). In order to find MMPI-2 scales associated with maximisation of group differences between alcohol dependent inpatients and a control group of normal subjects, discriminant analysis was used. In addition, the resulting scales were cluster-analysed and the clusters were examined for their TCI-correlates.

Results: Results showed several MMPI-2 scales that could clearly distinguish between alcohol dependent patients and controls. Cluster analyses of these scales resulted in semantically different profiles, implying qualitatively different groups of patients.

Conclusion: Results provided evidence for the validity of MMPI-2 and TCI constructs in the dimensional assessment of alcohol dependent patients.

P-01-13

Psychiatric characteristics of the wives of alcoholic patients with a high suicidal risk

M. Kubo, S. Shigeru, K. Takeshi. *Hamamatsu, Japan*

Objective: We have been reporting psychiatric problems of the wives of alcoholic patients with a high suicidal risk. The present study deals with psychiatric characteristics of those wives.

Methods: Out of 49 couples in which all the husbands had alcoholism (MAST $\geq$ 7), alexithymia (TAS $\geq$ 74), and a suicidal risk (SSI $\geq$ 2), the wives of 29 couples (29/49, 59.1%) had psychiatric problems (GHQ $\geq$ 4, ASTWA $\geq$ 38, TAS $\geq$ 74). The psychiatric characteristics of those couples were compared with those of the other group of couples (20/49, 40.9%).

Results: There were no statistically significant differences in MAST, SSI, and TAS of the husband between the two groups of couples, but the husband whose wife had psychiatric problems showed greater suicidal ideation (11.4 ± 6.4 vs 9.6 ± 5.6).

Conclusion: Many of the wives of alcoholic patients with a high suicidal risk have psychiatric problems. How we can normalize these problems would be one of the future targets of alcoholism treatment.

P-01-14

Childhood predictors of frequent drunkenness in late adolescence: A 10-year population-based follow-up study

S. Niemelä, A. Sourander, K. Poikolainen, H. Helenius. *Turku University Child Psychiatry, Turku, Finland*

Objective: To study childhood precursors of drunkenness frequency among 18-year-old boys in a representative nationwide 10-year follow-up study.

Methods: Predictors at age 8 years and drunkenness frequency at age 18 were studied in a general population sample of 2 306 Finnish boys born in 1981 using logistic regression analysis. At age 8 years, three different informant sources were used: parents (Rutter A2 scale), teacher (Rutter B2 scale) and boys themselves (Child Depression Inventory). Ten years later, when the boys had their obligatory conscription at age 18, information about drunkenness frequency was obtained from 78.3% of the original sample.

Results: Of the subjects, 15.0% reported never being drunk from alcohol, 74.7% informed being occasionally drunk and 10.4% were drunk at least once a week during the past six months. After adjusting for other variables, family structure and teachers' estimate on child's conduct problems and hyperactivity at age 8 years predicted frequent drunkenness in late adolescence.

Conclusion: Frequent drunkenness in late adolescence can be predicted as early as at age 8 years by teachers' observations. Schools have a significant role in detecting boys at risk for later frequent drunkenness. Early interventions on children with conduct problems and hyperactivity are called for.

Monday, April 4, 2005

P-07. Poster session: Substance-related disorders II

Chairperson(s): Valery Krasnov (Moscow, Russia), Johanna Koskinen (Oulu, Finland)
11.15 - 12.15, Gasteig - Foyers

P-07-01

A french study on alcohol and tobacco use in pregnant women

I. de Chazeron, D. Boussiron, D. Lemery, P.-M. Llorca. *CHU Clermont Ferrand Psychiatry B, Clermont-Ferrand, France*

Objective: Harmful effects of alcohol and tobacco during pregnancy recover a large panel of fetal damage sometimes identified only after school integration. The aims of this work were (i) to evaluate the prevalence of alcohol and tobacco parturient consumption using self-questionnaires, and (ii) to estimate impact of consumption on newborn weight.

Methods: Seventeen maternity hospitals located in Center of France were enquired during one month. Each delivered woman filled out AUDIT; Fagerström questionnaires and alimentary habit's questions.

Results: 1050 mother-infant dyads were included. After pregnancy diagnosis, 47.4% continued alcohol use, 11.3% declared consumption 2-4 times/month, 2.5% 2 or more times/week. 0.3% AUDIT scores indicate hazardous or harmful alcohol use. 7% reported binge drinking. The prevalence of FAS (Fetal alcohol syndrome) is 1.8‰. Mothers concerned have two kinds of consumption patterns. 21.8% smoke vs 37.9% prior to pregnancy.

68.6% of cessations are during first trimester. Fagerström results reveal that 7.1% have at least an high degree of dependence. At the time of evaluation, among smokers, 39.6% would like to stop and 42.5% to reduce. 67.9% wish to stop with medical support. A mean reduction in birth weight of 208g was found in infants of active smokers, without dose correlation.

Conclusion: Despite WHO's recommendations, alcohol use during pregnancy is more extensive than supposed. Observed FAS prevalence is consistent with others findings, but we identify two specific patterns of consumption. Tobacco prevalence is stable among parturients but their smoking behavior seems to be complex. Their expression for help to stop smoking suggests the need of specific prevention and commitments.

P-07-02

Codependence of drug, alcohol and tobacco abuse in adolescent risk behavior

M. Spremo, L. Ifeta, M. Burgic, S. Spremo. *Psyhiatry Clinic Child and adolescent, Banja Luka, Bosnia and Herzegovina*

Objective: Adolescence characterize frequent psychical crisis which are result of biological development, looking for own identity, changes in family relation and many socio-cultural influences. Many of social, economic and other environmental factors make some changes in adolescent population. The main objective was finding how many adolescents had risk behavior and subsequences oftener sexual intercourse and aggressive behavior.

Methods: Research has done in Banjaluka's high schools, involved 202 adolescents age 18 (51 male, 151 female). In research used risk behavior questionnaire Q-2000 (K.B. Kelly, 2000).

Results: Out of total number of individuals in the study, 35,6% was cigarette smokers, 56,9% consumed alcohol, 20,2% consumed marijuana, and sexual intercourse 21,7% (75% used contraceptive methods). Adolescents which used alcohol oftener had sexual intercourse(27,8%) than adolescents who don't drink (13,8%), and 29,5% was aggressive in last year. Similar results was found in groups with marijuana and tobacco. Group which used marijuana 34,1% had sexual intercourse than group who don't smoke cannabis (18,6%) and they were aggressive 41,8% .Group which used tobacco had sexual intercourse 34,7% than group nonsmokers (14,6%), and aggressive behavior 30,5%.

Conclusion: Adolescents are prone to abuse of psychoactive substances in developing countries. The consequence is higher risk behavior such as violence and promiscuity. Research will be conducted to develop and formulate preventive and educational programs in schools.

P-07-03

Alcohol use and alcoholism in schizophrenia subjects – A population based study

J. Koskinen, J. Miettunen, E. Lauronen, P. Laine, H. Koponen, M. Isohanni. *University of Oulu Department of Psychiatry, Oulu, Finland*

Objective: To study alcohol consumption and alcoholism in schizophrenia subjects in comparison with general population.

Methods: Within the Northern Finland 1966 Birth Cohort we collected information in alcohol use using questionaires between ages 31 and 34. The diagnoses of schizophrenia and alcoholism were obtained from Finnish Hospital Discharge Register. The consumption