

FSL rats, a genetic animal model of human depression, and their control FRL rats. First, the reinforcing properties of cocaine were examined by using a self-administration paradigm. We found no difference between the two lines in the ability to acquire cocaine self-administration; stable responding was reached within seven days of training. Second, we examined locomotor behavior and *in vivo* mesolimbic dopamine transmission during novelty and after passive cocaine administration. The FSL rats had a reduced locomotor response to novelty and exhibited more cocaine-induced stereotyped behavior than their controls. Microdialysis sampling from the amygdala and nucleus accumbens shell revealed no significant difference in the dopamine overflow between the rat lines during any condition studied. These findings suggest that depression may not be an initial drive for cocaine seeking behavior and that depressed rats have impaired motor functions that are not correlated to mesolimbic dopamine overflow.

P55.12

Impaired dopamine-related motivation in nicotine addicts after overnight abstinence

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Nicotine is known to be essential for maintaining tobacco smoking behavior by interacting with the brain's dopamine system. However, the mechanisms how nicotine exerts its reinforcing effects in humans are not yet clear. Therefore, this investigation was performed to study the impact of tobacco smoking on cognition and motivation in nicotine addicts under normal and withdrawal conditions.

Eighteen healthy nonsmokers and 37 dependent smokers were included in the study. Smokers were studied during *ad libitum* smoking and after an overnight abstinence. All subjects were characterized regarding cognitive performance and motivation. Afterwards neuroendocrine assessments were performed in all subjects using apomorphine injections and measuring blood growth hormone concentration as an indicator of central dopamine function.

As results of the study it was shown that cognitive performance did not decrease in smokers after overnight abstinence; however, in contrast to nonsmokers reward responsiveness was not enhanced by incentive stimuli. As blunted growth hormone secretion was recorded in smokers, this finding points to an impaired dopamine function relevant for motivation mediating nicotine addiction.

P55.13

Treatment of drug addicts – drop out, completion and stages of change

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The study deals with the question, whether completers and drop outs of a residential treatment program for drug addicts represent distinctive subpopulations, and what criteria (socio-economic, clinical, stages of change) might be useful for differentiation.

151 drug addicts were investigated on admission (T1), at the end of treatment (T2) and at follow-up 15 months after discharge (T3), using standardized clinical rating scales.

Cross-sectional results showed that socio-economic variables did not significantly differentiate between the two groups. Completers

showed a slightly higher degree of comorbidity with a standard deviation of depression (BDI) being nearly twice as large as the one for drop outs. Abstinence rates at follow up were 28% (completers) resp. 17% (drop outs). Longitudinal analysis revealed that retention and drop out from treatment were linked to changes in time, with 34% of all drop outs re-entering residential treatment within the follow-up period (as compared to none in the completers). Thus, the concept of stages of change seems to be a much more appropriate framework for the differentiation of subpopulations of drug addicts than a mere cross-sectional analysis.

P55.14

Feasibility, efficacy and safety issues in pharmacotherapy of opioid addicts

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The presentation is concerned with safety in opioid assisted treatment.

In Switzerland, there are experiences with heroin assisted treatment (HAT) and methadone maintenance treatment (MMT). The Psychiatric University Clinic of Basel has data of patients (N=320) in both treatment settings. Therefore, the speakers will present results of a quantitative and qualitative comparison of both treatment settings (HAT, MMT) with respect to feasibility, efficacy and safety issues.

In addition we will present data of patients who left HAT and how they performed before, within, and after treatment regarding safety issues. Buprenorphine is becoming more and more used in opioid addiction treatment, too. Data will be presented to show that the safety and efficacy of buprenorphine depends upon the context of its administration.

P55.15

Non-alcohol substance misuse, outcome and intensive case management

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Objectives: We aimed to compare outcome in patients with severe psychosis who reported misusing more than one substance in the past year to patients who had not; and examine whether intensive case management had any beneficial effect on this subgroup.

Method: We utilised data from the UK700 multi-centre randomised trial (n=708) evaluating the efficacy of intensive case management, defined as a reduced caseload size (1:10–15). Several clinical and social assessments were administered at baseline and at 2-year follow-up.

Results: At baseline 48 (6.8%) of patients reported misusing more than one illicit drug. At 2-year follow-up there were no significant differences in clinical and social outcome between users and non-users of more than one drug of abuse, except for unmet needs (means 3.0 vs. 1.9 respectively, p=0.038). There was no beneficial effect of intensive case management on patients who had misused more than one substance compared to those who had not.

Conclusions: Patients abusing more than one substance had significantly more unmet needs at follow-up. Intensive case management, however, had no beneficial effect on any of the outcomes measured.