² Hospital Los Montalvos. Unidad Regional de Patología Dual, Hospital Universitario de Salamanca, Psiquiatría, Salamanca, Spain
* Corresponding author.

Introduction Aripiprazole is the firstborn of the new dynasty of antipsychotic called third generation or neuromodulator of dopamine-serotonin system. It has proven to be an effective and well-tolerated antipsychotic. Dual Pathology represents the presence of comorbidity between mental illness and substance use disorders. It is an under-diagnosed problem and it is increasing frequency.

Objectives The aim of this study was to determine and describe the clinical profile of the patients admitted to the Dual Pathology Unit (UPD) at The Montalvos Hospital (Part of Salamanca University Teaching Hospital, Spain) treated with oral Aripiprazole.

Methods Descriptive, observational, retrospective study of a sample of patients admitted to the UPD to which oral aripiprazole was prescribed during hospitalization. A number of sociodemographic, clinical, and treatment-related variables are described.

Results From a sample of 25 patients and according to DSM-5 criteria (APA, 2013) main diagnoses were: 14 cases of substance-induced psychotic disorder, 3 cases of schizophrenia; 3 cases of schizophreniform disorder; 2 cases of bipolar disorder; 1 case of schizophreniform disorder; 1 case of borderline personality disorder; 1 case of personality syndrome. The most used drugs before the admittance were cocaine, cannabis and opioids. The average dose of aripiprazole was 9 mg and no side effects or drug interactions were reported.

Conclusions Apart from its well known efficacy in treament of psychosis, oral aripiprazole may be a first line treatment for Dual diagnosis patients, specially those with problems of noncompliance, due to high level prolactine side effects.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1045

EV61

Personality disorders: Which personality features lead to a comorbid substance use disorder?

A. Lombardi^{*}, A. Rossi, C. Gramaglia, L. Girardi, P. Zeppegno Università del Piemonte Orientale, Traslational Medicine, Novara, Italy

* Corresponding author.

Introduction Dual Diagnosis (DD) refers to coexistence of a psychiatric disorder, which is often a Personality Disorder (PD), and a Substance Use Disorder (SUD). Despite DD is a topic of interest in recent years, few studies have focused on the temperament and character traits of PD patients with or without a comorbid SUD. Anyhow, the assessment of personality traits may be helpful to understand the relation among psychiatric disorder, drug use and environment in patients with addictive behaviors.

Aims The aim of this study is to compare two subgroups of PD patients, with and without a comorbid SUD. Sociodemographic, clinical and personality profile, as assessed with the Temperament and Character Inventory, will be compared.

Methods We are recruiting patients with a PD diagnosis referring either the psychiatry ward or outpatient service of the AOU "Maggiore della Carità", Novara, Italy; secondly, we will group them according to the presence/absence of SUD. Cloninger's TCI-R will be administered together with a structured interview to gather sociodemographic and clinical information.

Results Data collection is ongoing; we expect to find a different personality profile in PD and DD Patients.

Conclusions Temperament, which is the biological part of the personality, seems to have an important role in addictive behavior; therefore assessing the personality traits of DD patients can help to improve the differential diagnosis and to establish strategies for treatment and prevention. In particular, sensation seeking and impulsivity are temperamental characteristics that may favor SUD in patients with psychiatric disorders.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1046

EV62

Video game addiction: Providing evidence for Internet gaming disorder through a systematic review of clinical studies

- O. Lopez-Fernandez^{1,*}, D. Kuss², H. Pontes², M. Griffiths²
- ¹ IPSŶ, PSP, Louvain-la-neuve, Belgium
- ² IGRU, Division of Psychology, Nottingham, United Kingdom
- * Corresponding author.

Introduction The American Psychiatric Association introduced in Internet Gaming Disorder (IGD) in the appendix as a tentative disorder in the last edition of the Diagnostic and Statistical Manual of Mental Disorders. However, currently no systematic review exists about excessive gaming viewed from a clinical perspective.

Objectives and aims To review clinical studies on gaming addiction in order to ascertain characteristics of both clinical and research studies to provide retrospective evidence in relation with the proposed IGD classification (including criteria, measures and therapies).

Methods A systematic literature review of studies published from 1980 to 2015 has been conducted using three major psychology databases: Academic Search Complete, PsycInfo, and PsycArticles. A total of 5033 results from peer-reviewed journals were obtained, where 32 were identified as empirical clinical papers focused on gaming addiction.

Results The clinical research studies on gaming identified were published between 1998 and 2015, most of which included patient samples. Categorizations identified in the research papers included: (i) patients' characteristics (e.g., socio-demographics), (ii) criteria and measures used (e.g., scales to diagnose), (iii) types of gaming problems (e.g., game genre), (iv) and treatments (e.g., type of therapy).

Conclusions Findings will be discussed against the background of the controversial IGD diagnostic criteria proposed in the DSM-5 in order to assess the extent to which previously published clinical knowledge matched the current proposal for including gaming addiction as behavioral addiction in the next diagnostic manual.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1047

EV63

Cannabinoid hyperemesis syndrome

S. López-Romeo*, G. Ledesma-Iparraguirre

Parc Sanitari Sant Joan de Déu, Psychiatry, Barcelona, Spain * Corresponding author.

Case report A 25-year-old man was attended in multiple times at Emergency Department by referring abdominal pain and vomiting. No organic disease was found and he was referred to Psychiatric Emergency to assess him. He had history of cannabis use (4–5 times/day) during last 5 years. He referred recurrent episodes of abdominal pain and vomiting since 4 years ago, he had found that having hot showers alleviate his symptoms. Urine screening was positive for THC and negative for other drugs. In results of blood tests, abdominal X-ray, abdominal ultrasonography, abdominal tomography and fibrogastroscopy didn't find any abnormality. He was diagnosed from suffering a somatoform disorder. Treatment with Setraline 50 mg/day was prescribed and cannabis abstinence was recommended. He was referred to Mental Health outpatient service. He maintained cannabis abstinence for 1 month and some symptoms disappeared. However, 2 months later, he relapsed in cannabis use and all symptoms reappeared. Later he achieved cannabis abstinence again and he got full recovery, then he was diagnosed from cannabinoid hyperemesis syndrome.

Conclusion Cannabinoid hyperemesis syndrome is characterized by recurrent nausea, vomiting and colicky abdominal pain in patients with long-term cannabis use. These symptoms have been reported to be alleviated temporarily by taking a hot shower or more permanently by abstaining from the use of cannabis. The phenomenon of cannabinoid hyperemesis and clinical diagnosis remained obscure until recently. For this reason, it is necessary to take it into account in order to recognize it and help provide these patients early and better approach.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1048

EV64

The role of personality traits in initiating and maintaining addictive behavior

M. Manea^{1,*}, B. Savu²

¹ UMF CLUJ NAPOCA IULIU HATIEGANU, Medical Education, Cluj-Napoca, Romania

² UMF CLUJ NAPOCA IULIU HATIEGANU, Psychiatry, Cluj-Napoca, Romania

* Corresponding author.

Introduction It is well known that certain personality traits are more linked to drug abuse than others. Psychiatrists are more likely to emphasize the importance of impulsivity in the connection with substance disorders but in the following study we found an important percentage of patients that have a substance abuse were linked to anxiety through impulsiveness as a personality trait.

Objectives Most youths admitted for a substance abuse are highly impulsive. Our quest was to differentiate what component of impulsivity was more frequently linked to a substance use disorder. *Methods* In the study were included 50 patients admitted in the 3rd Psychiatric Clinic, Substance Dependences Department, Cluj-Napoca. For the identification of the drug abused we used the multitest screening kit in correlation with the results from the Forensic Medicine Institute of Cluj-Napoca. Each patient completed the Barratt Impulsivity Scale and the Swedish Universities Scales of Personality.

Results High scores on BIS-11 strongly correlated with attentional impulsiveness (Pearson's *r* correlation = .838) which means high inattention and cognitive instability this being linked with anxiety disorders. Cognitive Instability was correlated with Psychic Trait Anxiety (r = 0.29) and Motor Impulsiveness with Somatic Trait Anxiety (r = 0.3). Normal 0 false false false EN-US X-NONE X-NONE. *Conclusions* The underrecognized anxiety disorders in young adults whom are admitted for an addictive disorder prefrontal cortex is known to be the source of both impulsivity and could be linked to anxiety as well (valence asymmetry hypothesis). Normal 0 false false

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1049

EV65

Behavioral disorders and new psychoactive substances abuse, a French case series

M. Marillier*, A. Batisse, C. Chevallier, S. Djezzar

GH Lariboisière-Fernand Widal, CEIP-Addictovigilance, Paris, France * Corresponding author.

Introduction Range of drugs has largely increased the past few years, especially with the emergence of the New Psychoactive Substances (NPS) sold online. In front of serious risks they cause on human health, they are more and more regulated by the law.

Objectives To describe cases of extreme behavioral disorders and highlight risks of potential forensic complications linked to these consumptions.

Methods We present a case series of serious auto or heteroaggressive behavioral disorders related to NPS abuse and notified to the Parisian addictovigilance center.

Results Twenty cases were identified between 2010 and 2015. Users were exclusively men, with mean age of 35.5 years (min: 20, max: 51). Synthetic cathinones are the predominant class of reported NPS (65%). An association between NPS and sexuality is found in 60% of cases (12); among them cathinones are used by 11 men. We observed 6 deaths among which, 5 were associated to sexual practice. Two cases of consumptions of cathinones induced torture and barbarian acts. Concerning aggressive behavioral disorders, we quote 3 cases of hetero-aggressivity (one by stab wound and 2 others developed an hypersexuality \pm exhibitionism) and 9 cases of auto-aggressivity characterized by genital mutilations (1), defenestration (3), suicidal attempt (3), and acute psychiatric disorder with endangering life (2). Only four cases have been confirmed by toxicological analysis.

Conclusion Behavioral disorders inducing forensics complications exist with NPS and particularly with cathinones. The problematic is certainly undervalued. A collaboration between addictovigilance and forensic services has to be improved.

Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1050

EV66

Early alcohol use as prognostic factor for severity in dually diagnosed patients

R. Martinez-Riera, G. Mateu-Codina, A. Farre-Martinez^{*}, J.L. Perez de Heredia, J. Marti-Bonany, M.G. Hurtado-Ruiz, M.T. Campillo-Saenz, R. Sanchez-Gonzalez, N. Ribas-Muñoz, C. Castillo-Buenaventura, M. Torrens-Melich INAD, Psychiatry and Drug Abuse, Barcelona, Spain * Corresponding author.

Objectives Describe the distinguishing characteristics between patients with early onset of alcohol use (EARLY, age < 15) and late onset of alcohol use (LATE, age > 16), both affected of acute non-substance use psychiatric disorders (non-SUD) and any substance use disorder admitted in a dual diagnosis unit.

Material and methods Data on demographic, family, and clinical factors were gathered among subjects admitted to our dual diagnosis unit along three years, all of them meeting DSM-IV criteria of any non-substance related Axis I or II disorder and comorbid substance use disorder (SUD). Statistical analysis was performed by using SPSS program.

Results We show results of 748 patients (437 of EARLY group and 311 of LATE group). Predominantly male (73,53%) with a mean age of $39,60 \pm 9,7$ years. Most prevalent non-SUD psychiatric disorders were psychotic disorder (39,97%) and personality disorder (39,30%). In our sample, most common substances of abuse were Alcohol (45,05%) and Cocaine (30,35%). EARLY patients had an