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EPV0052

Psychiatric comorbidities among patients hospitalized in the addictology department of Ar Razi hospital in Morocco

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Introduction: Comorbidity between psychiatric disorders and disorders linked to psychoactive substance use is common and represent a real public health problem.

The association of a psychiatric disorder can, in certain cases, modify the treatment methods and also the evolution of the addictive behavior.

Objectives: Determining the prevalence of psychiatric comorbidities in patients with substance use disorder Identify the sociodemographic and clinical characteristics of patients hospitalized in the addictology department.

Methods: We conducted a cross-sectional study with descriptive and analytical aims, in order to study psychiatric comorbidities in 150 patients with substance use disorder hospitalized in the addictology department of Ar Razi hospital in Salé over a period from June 1, 2022 to August 30, 2023.

Data collection was done using a questionnaire including clinical and socio-demographic characteristics, the prevalence of problematic use of psychoactive substances and the comorbidity of psychiatric disorders (diagnoses assessed by DSM 5 criteria).

Results: A male predominance was noted (80%). The main substances consumed in the last 12 months were tobacco (98%), cannabis (74%), alcohol and benzodiazepines.

The majority of patients presented at least one psychiatric comorbidity (80%), with a predominance of depressive disorder and anxiety disorders.

Personal history of suicide attempts was found in 30% of the sample Substance dependency that prompted initially the consultation was higher in patients with psychiatric comorbidity (p < 0.05)

Post-traumatic stress disorder was significantly associated with the presence of problematic cocaine and alcohol use. Social phobia is associated with the absence of a criminal record.

Conclusions: Addictive behaviors are often associated with psychiatric disorders. The most common psychiatric comorbidities are depression, anxiety and personality disorders, hence the need for simultaneous treatment of psychiatric pathologies and addictive behavior

Disclosure of Interest: None Declared

EPV0053

Sociodemographic and clinical characteristics of patients on Methadone followed at Ar Razi hospital in Morocco

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Introduction: Opioid substitution treatments, notably methadone, now represent the standard treatment in the management of opioid

dependence, making it possible to reduce illicit opioid consumption, crime, infections linked to administration practices and improve socio-professional integration

Objectives: Determine the socio-demographic and clinical characteristics of the patients Evaluate the quality of life of these patients **Methods:** A cross-sectional, descriptive and analytical study was conducted with 60 patients receiving methadone followed at Ar-Razi Hospital in Salé between 01 june 2023 and 30 august 2023. A questionnaire was used to assess the socio-demographic and clinical characteristics of the patients. Quality of life was assessed using the 36-item Short Form Health Survey SF-36 scale

Results: The average age of our patients was 34 years with a male predominance

Most of our patients were single and unemployed Somatic disorders were found in 15% of the sample

The majority of them had an associated depressive disorder

The main types of new psychoactive substances consumed were benzodiazepines (62.3%) and cannabis.

Quality of life was impaired in 60% of patients treated with methadone

Conclusions: The population using methadone is precarious and presents somatic and psychiatric vulnerability. Forms of misuse and associated consumption of other psychoactive substances and illicit drugs are recorded, hence the need for early detection in order to improve care

Disclosure of Interest: None Declared

EPV0054

Socio-demographic and clinical profile of opoid users

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Introduction: Opioid use disorder is a pattern of problematic opioid use, leading to impaired functioning or clinically significant suffering. Morocco, a pioneer in the Arab world in the field of opiate substitution, is no exception to this rule, and has found itself confronted with a situation where opiate use is much more widespread in the north of the country. Morocco's geographical proximity to Europe and the multiple interactions fostered by migratory population flows undoubtedly contribute not only to the spread of hard drug use, particularly heroin, but also to the diversification of consumption methods (injection drugs)

Objectives: The main objective of our work was to study sociodemographic and clinical profile of opoid users in morocco, but also their quality of life after treatment in Morocco, before concluding with recommendations for improving the overall management of the patient.

Methods: We conducted a cross-sectional, analytical study in the Addictology Department at Ar-razi Hospital in Salé, which provides oral methadone substitution therapy for around 80 patients. **Results:** The total number of patients responding to the questionnaire was 60 participants.

The population of methadone-treated patients in our study was 83.33% (n = 50) male and 16.67% female (n = 10).

The most common age group in our study was between 31 and 45 (71.67%). 36.67% were married (n=22), 80% (n=48) lived with their family, 83.34% (n=50) had a secondary school education or higher, while the vast majority 63.33% (n=38) had no fixed occupation.

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96.7% (n=58) of participants were of Moroccan nationality, against only 3.3% who were foreigners (n=2).

The main indication for methadone withdrawal in our patients was heroin use (66.67%), followed by Codeine, then Tramadol. The daily doses of methadone delivered ranged from 04 to 200 mg/ patient, with an average of 75 mg.

The main adverse effects reported by our patients were libido disturbance, constipation, fatigue and sleep disturbance.

63.33% (n=38) of patients continued to use other psychoactive substances on a regular basis, mainly tobacco, followed by cannabis. 13.33% (n=8) reported persistent craving, and the vast majority claimed to be supported by a family member (70%, n=40).

Conclusions: For several years, quality of life has been a major preoccupation of healthcare professionals in a bio-psycho-social approach. In this vision of care, quality of life should now be part of the clinical criteria for monitoring patients on methadone.

Disclosure of Interest: None Declared

EPV0055

Ekbom síndrome (Parasitosis delirium): Cocaine Use vs. Psychotic Depression. A case report

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Introduction: Parasitosis delirium represents a rare mono-symptomatic psychosis characterized by the delirious firm belief of the patient, against all evidence, of being infested by cutaneous parasites. The syndrome affects in particular middle-aged women, and can be the single manifestation of psychological uneasiness or represent one of the aspects of a more complex psychiatric case, compromising almost totally any normal daily work and/or social activity. It is often accompanied by a refusal to seek psychiatric care. This condition can be associated with various underlying causes, including substance use disorders and psychotic depression. Understanding the differences and similarities between delirium of infestation in the context of cocaine use and psychotic depression is crucial for accurate diagnosis and effective treatment.

Objectives: This study aims to compare and contrast the clinical features, etiology, and treatment approaches of delirium of infestation in individuals with cocaine use and those with psychotic depression. By examining these two distinct populations, we can gain insights into the unique challenges and considerations associated with each condition.

Methods: A case report of a 44-year-old woman with delirium of parasitosis, depressive symptoms and cocaine use in the last three days. Also a comprehensive literature review using the PubMed database to identify relevant clinical articles on delirium of infestation, cocaine use, and psychotic depression.

Results: Cocaine use and psychotic depression can both cause delirium of infestation. Cocaine-induced delirium is characterized by agitation, paranoia, and delusions of infestation. Psychotic depression is characterized by a depressed mood, delusions, and hallucinations. Delusions of infestation are a common feature of bothconditions. However, the underlying mechanisms and treatment approaches differ. Cocaine-induced delirium is primarily associated with the acute effects of cocaine on the central nervous system, while psychotic depression involves a complex interplay of biological,

psychological, and environmental factors. Treatment for cocaine-induced delirium involves addressing the underlying cocaine use, while treatment for psychotic depression involves antidepressant and antipsychotic medications. Otherwise, Anti-Parkinson drugs were most frequently associated with delusional infestation

Conclusions: Delirium of infestation can occur in individuals with cocaine use and those with psychotic depression, albeit with different etiologies. Clinicians should consider the underlying cause when diagnosing and treating patients with this condition. Further research is needed to explore the specific neurobiological mechanisms and optimal treatment strategies for delirium of infestation in these distinct populations.

Disclosure of Interest: None Declared

EPV0056

Drug-induced psychosis and intravenous drug use in chemsex context

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Introduction: Several studies have called atention to the mental health disorders associated with chemsex -the intentional use of drugs before or during sexual intercourse GBMSM (gay, bisexual and men who have sex with men) population-. Sexualized intravenous drug use is also known as slam or slamsex. There are few studies that analyze the mental health differences between intravenous drug users compared to non-intravenous drug users in chemsex context.

Objectives: We aim to analyze the relationship between the practice of slamsex and the development of drug-induced psychosis.

Methods: A cross-sectional descriptive analysis of a sample of users attended by the non-governmental organization Apoyo Positivo in the program "Sex, Drugs and You" between 2016-2019 was performed.

Results: We included 217 participants. Drug-induced psychosis was found in 80 participants. Drug-induced psychosis was significantly higher in the intravenous drug use group compared to the non-intravenous drug use group (p<0.05).

Conclusions: Previous studies have reported that MSM who practiced chemsex were more likely to experience from different mental health disorders, being psychosis one of the most frequent psychiatric diagnoses. In our study, drug-induced psychosis was higher in participants who engaged in intravenous drug use. Further studies analyzing the relationship between slamsex and drug-induced psychosis are needed.

Disclosure of Interest: None Declared

EPV0057

Group therapy for problematic chemsex in Ngos community treatment settings in Spain

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