

population in Norway. In addition, the relationship between eating disorders and physical activity has been studied.

Results: The mean age in the sample was 44.8 (SD=12.9), 56.7% were married, 18.1% were single, 39.5% had a University degree, 83.3% were working, and 7.8% were on sick leave. The mean weight was 86.4kg (SD=23.01), the mean height was 180.7cm (SD=7.99), and the mean BMI was 26.6 (SD=7.85).

More men than expected with symptoms of ED. Prevalence numbers for the different eating disorders according to DSM-IV will be presented in March. In addition, data on the relationship between eating disorders, physical activity, and exercise dependence will be presented.

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The association between eating disorders and level of physical activity among norwegian women

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Several studies have shown high prevalence of eating disorders among elite athletes. In particular, weight-related sports focusing on body and body shape have indicated high numbers. Studies including lower-level athletes have failed to find strong a relationship between amount of training (hours per week) and prevalence of eating disorders.

The aim of the present study was to study the relationship between eating disorders and physical activity among 1500 Norwegian women aged 18-65 years.

In addition, we wanted see whether the prevalence of eating disorders is higher among competitive athletes than among recreational athletes.

The Survey for eating disorders (SEDS, 37 questions), which assesses full DSM-IV diagnoses for anorexia nervosa (AN), bulimia nervosa (BN), binge eating disorder (BED), and eating disorders not otherwise specified (EDNOS) based on self-report, was used. In addition, the respondents answered specific questions related to different aspects of exercise and physical activity, such as hours of exercise, type of sport and competency level. As far as we know, no earlier studies on eating disorders and physical activity in general population have presented data to differentiate between competitive athletes and recreational athletes.

Preliminary analyzez indicate that women with AN exercised more than all the other ED groups, and the BN group also showed a high number of weekly physical activity. More results will be presented in March. The analyses are expected to shed some light over the discussion concerning sport as a risk group for eating disorders in relation to competition and level of performance.

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Eating disorders and psychopathological comorbidity in obesity patients

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The treatment of overweight and obesity has recently been given priority by the Norwegian Government. A research project has been started in the Central Norway Regional Health Authority which includes surgical treatment (gastric bypass), and non-surgical treatment.

The focus on eating disorders and comorbid psychiatric diagnoses has to some extent been ignored in this patient group. Important questions are: How will an eating disorder and/or other psychopathology affect treatment outcome? How should the follow up procedures be tailored in regard to psychopathological status?

The main aim of this study was to describe the prevalence of eating disorders in obese patients. In addition, data on depression, anxiety, quality of life, and personality will be presented in groups with and without and eating disorder.

Methods: Cross-sectional study of patients on a waiting list for obesity treatment, n=160, 117 women and 43 men.

Postal questionnaires were used. Instruments: Eating disorders in obesity (EDO), HADS, SF-12, and EPQ.

Results: Mean age for the sample was 41.2 years, and the mean height and weight was 171 cm and 138 kg. A total of 20% showed symptoms of eating disorders, 24.7% of the men, and 17.1% of the women, respectively. Preliminary analyses indicate that the groups with an eating disorder had more psychopathology, and lower quality of life compared to other groups.

More results will be prepared in March.

Discussion: The results gave higher numbers than a similar Swedish study. Results from this study should be used in the future treatment of this neglected patient group.

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The influence of the study profile on early anorexia symptoms expression in women

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The purpose of this preliminary study was to examine the share of women with incorrect eating behavior in the group of young women studying courses join with food technology. The 120 women studying food technology, human nutrition, and dietetics ("food" group) and 118 women from the humanistic study (philosophy and pedagogic courses) ("humanistic" group) aged 20-24 years were examined by the Eating Attitude Test, designed according to DSM-IV and adapted to the Polish conditions. It was obtained statistically significant differences between different profiles of the study. However in the "humanistic" group 12% had early anorexia symptoms, in the "food" group it was approximately 29%. It could be in accordance with literature data concern interest in food, cooking, dietetic etc. in anorectics. The purpose of this study was also to compare the some elements of quality of life women with and without incorrect eating attitude in "food" group. There were significant differences in the assessment of own body shape (incorrect), imaging of perfect body shape (too thin), physical activity (high), reaction on stress situations (withdraws and escapes usually), frequency of physical symptoms (headache and stomachache, irregular menstruation) as well as home conflicts especially with old sisters or mothers. The social position of respondents were not influenced on expression of early symptoms of anorexia. This study suggests that profile of university education could depend on incorrect eating attitudes and should be common to focus on the

candidates to recognize early anorexia symptoms and prevent to express them.

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The assessment of hair trace elements level in the early onset of anorexia

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Anorexia behaviours, without complete typical symptoms of anorexia nervosa, are becoming more often and often common reaction to stress in young women. Some authors are in the opinion that even in early onset of anorexia may diagnose micronutrient deficiency. Hair are simple diagnostic material to assess trace elements status. The occurrence of anorexia behaviours was assessed by Eating Disorders Questionnaire based on DSM-IV and adapted to the Polish conditions. The questionnaire was fulfilled by 73 women aged 22–24 years. About 30% of subjects showed anorexia behaviours (AN Group). Rest of the women created control group (CON Group). In the both of groups calcium, magnesium, zinc, copper and iron were measured by FAAS method. However, there were no significant differences between analysed groups in the hair calcium, magnesium and iron (respectively mean: 1900, 66, 30 µg/g); the level of hair zinc ($p < 0.001$) and hair copper ($p < 0.05$) was significantly higher in the CON Group than in the AN Group (respectively mean: Zn – 251 vs. 194 µg/g and Cu: 15 vs. 12 µg/g). These results confirm opinion about fast decreasing of some micronutrient during fasting. Zinc is very important trace elements have a great importance in the protein synthesis such as neurohormones, and the low level of this element could fortify appetite deficiency.

Poster Session 1: ALCOHOLISM AND OTHER ADDICTIONS

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Effectiveness of daily outpatient alcohol detoxification by an Irish public psychiatric hospital

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Background and aim: The Irish are amongst the highest consumers of alcohol in Europe. This study aimed to assess the effectiveness of daily outpatient alcohol detoxification in an Irish Public Psychiatric Hospital.

Method: The outpatient records of patients presenting to St Brendan's Hospital in one year with symptoms of Alcohol Dependency Syndrome (ADS) and commencing daily outpatient detoxification were examined retrospectively for parameters relevant to the aim of the study.

Results: Forty patients underwent outpatient alcohol detoxification in one year and complete records were available for 32 patients. 20 patients had fixed addresses in the hospital catchments areas, 8 patients had no fixed addresses and the remaining 4 patients had addresses outside the catchments areas. 7 patients, all known to sector services, presented with a co-morbid psychiatric condition. For the detoxification, 28 patients attended on the second day whilst 22

patients attended their third day's appointment. Only 17 patients completed the outpatient detoxification. 13 patients received at least two outpatient detoxifications during the year; of whom 7 patients received their second detoxification within two months of the first one. The record of 20 patients showed that they had received advice regarding self-referral to counselling services.

Conclusion: A high proportion of patients (47%) presenting with symptoms of ADS did not complete daily outpatient detoxifications. A high proportion of all patients (40.6%) also underwent multiple outpatient detoxifications during the year. It is possible that the separation between alcohol detoxification and alcohol counselling services in Ireland contributed to these disappointing results.

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A baseline audit of opiate substitution therapy and 12-week retention in treatment

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Background: The National Treatment Agency has set 12-week retention as an outcome measure for the treatment of opiate addiction. Both methadone and buprenorphine show research evidence of efficacy in this condition. To ensure that these medications are being used optimally, we performed a baseline audit in two drug treatment services in North East London with a view to identifying potential improvements in service delivery.

Method: Prescriptions for patients being treated for opiate addiction have been generated from a computerised system since April 2004. We obtained a list of all prescriptions generated between April 2004 and August 2005. As well as demographic data, we noted what medication had been prescribed, the daily dose at stabilisation, and whether the patient was still in treatment at 12 weeks.

Results: 214 patients received 226 episodes of treatment. 114 episodes involved treatment with methadone, 112 with buprenorphine. 69% of episodes in which a patient was treated with methadone (mean daily dose 51mg) were associated with still being in treatment at 12 weeks; the figure for buprenorphine was 43%, with a mean daily dose of 11mg.

Conclusion: Methadone currently seems to be associated with better retention than buprenorphine, though some guidelines suggest that the dose of buprenorphine is too low. Other guidelines suggest that increasing the dose of methadone has potential for a small additional improvement in retention. We aim to get daily doses of methadone to a mean of 60mg, buprenorphine to 16mg, and will re-audit.

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Pathological gambling - Case series

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We are presenting a retrospective study of case series of patients with a DSM IV diagnosis of pathological gambling, treated during 2006 in our institute (n=10; male=9, female=1; mean age=35 years).

The youngest patient (20 years) was addicted to video games, two were addicted to poker machines, three to betting (football) and the rest had variations of a combined addiction (card games, lotto, roulette, poker machines, betting); all subjects were addicted to nicotine. The mean duration of pathological gambling was 11.5 years, with mean onset at 23.4 years of age.