

**P0039**

Reaction time in relation to the duration of heroin abuse

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**Background and Aims:** As a result of long-term heroin abuse we can see impairment of cerebral structures that leads to specific deficits in cognitive and conative area. Reaction time (RT) is an interval between reception of the certain stimulus and movement execution, as a response to received stimulus. It includes unharmed perceptive functions, attention, concentration and psychomotor coordination. The aim of this study was to evaluate the effect of heroin abuse on RT.

**Method:** 90 heroin addicts, divided in three groups, regarding to abuse duration, were included in study. Reaction time was estimated by specially designed computer program, based on the modified Donders's model of reaction time.

**Results:** Average RT increase in correlation to duration of heroin addiction

Results have shown that heroin abuse is connected with the prolongation of simple and choice reaction time, in both visual and auditory modality. Also, there is significant relation between prolongation of choice reaction time and duration of heroin abuse.

**Conclusion:** Heroin abuse duration is related to decrease of psychomotor speed and impairment of psychomotor coordination.

**P0040**

Effects of opiate prescription analgesic medication

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**Purpose:** To document if prescription opioid medications used for pain enhanced or worsened pain syndromes from medical conditions in patients who received a diagnosis of prescription opioid dependence as determined by a diagnosis by DSM-IV criteria. Further, whether detoxification improved or worsened pain perceptions and self reports in patients who chronically administered prescription opioid medications.

**Methods:** Our study consisted of a retrospective sample of patients taken from the Addiction Treatment Unit at St. Lawrence Hospital in Lansing, Michigan. Patients were selected from those who voluntarily sought detoxification from opioid medications in an inpatient setting. Selection criteria for the study consisted of a DSM-IV diagnosis of opioid prescription medication dependence, willingness to undergo medical detoxification, cooperation with self-report scales and abstinence from opioid medications. Study patients were randomly selected from discharges in patient census for the years 2001-2003.

**Results:** The significant findings were that self reported pain scores improved during the detoxification from admission to discharge, from a mean of 5.5 at admission to mean of 3.4 at discharge (0 is no pain, and 10 is the most pain). The detoxification period extended to an average of 5 days. While oxycodone CR (OxyContin) produced higher levels of self-reported pain at admission and discharge, these patients experienced significant levels of pain reduction as with other opioid medications.

**Conclusions:** Patients with a DSM-IV diagnosis of prescription opioid dependence reported (self) less pain with detoxification and abstinence from the opioid medications.

**Key words or phrases:** opioid medications, opioid dependence, prescription, medical conditions, diagnosis.

**P0041**

Effectiveness of Baclofen in treatment of opium dependency. A double-blind randomized controlled trial

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**Background and Aims:** Results of some studies suggest that Baclofen (a GABA receptor agonist) maybe effective in detoxification of opium dependency. Thus we have done this study in order to identify possible efficacy of Baclofen for detoxification of opium dependency.

**Methods:** This study is a double-blind randomized clinical trial. We selected 52 patients with opium dependency and with other criterias that we have designed on the basis of DSM-IV TR. Then we randomly assigned patients to two outpatient groups. The first group received Baclofen (40 mg/day) and second group received placebo for two weeks accompanied by similar drugs. The severity of the opium withdrawal symptoms was measured by SOWS (short opiate withdrawal scale) and two other questionnaires for measuring mental and physical symptoms of opium withdrawal in days of 0, 2, 4, 7 and 14.

**Results:** Baclofen group showed a superiority over placebo in the management of withdrawal symptoms of opium dependency, but there was not a significant statistical relationship.

**Conclusions:** Baclofen maybe considered as an effective adjuvant agent in the management of mental and physical symptoms of opium withdrawal. However further studies to confirm our results is warranted.

**P0042**

A case report of Benzylpiperazine induced new onset affective symptoms in a patient with schizophrenia

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**Background:** We have noticed in our clinical practice a few patients with psychoses whose mental health was affected by the use of Benzylpiperazine related compounds. Benzylpiperazine and related compounds were sold legally in the UK until March 2007 when they were declared illegal. They are still legal in New Zealand whilst it is classified as a Class one drug along with LSD, cocaine and cannabis in the USA, Sweden, Denmark and Greece.

**Aims:** To understand the effect of Benzylpiperazine based party pills on the mental health of a patient who already had a diagnosis of Schizophrenia.

**Methods:** We followed up the clinical psychopathology of the patient while he was in our acute Psychiatry ward in 2007 during an admission precipitated by the use of Benzylpiperazine based party pills. Also we went through his previous notes to find out the symptomatology during all his previous admissions and outpatient appointments.

**Results:** Use of Benzylpiperazine based party pills resulted in manic symptoms in this patient with Schizophrenia who did not have these symptoms until he started using the party pills.

**Comments:** Benzylpiperazine based party pills have mood elevating properties and also induce insomnia in users. From our anecdotal experience it is seen that in patients with mental illness this leads to

non compliance with medications and may also induce manic symptoms. Benzylpiperazine based drugs of abuse have been less well researched compared to other drugs of abuse.

### P0043

Variations in alcohol-metabolizing enzymes in people of East Indian and African descent from Trinidad and Tobago

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**Background and Aim:** Differences in alcoholism rates exist between Indo- and Afro-Trinidadians. We investigated whether these differences are explained by variations in the genes encoding the alcohol-metabolizing enzymes alcohol dehydrogenase and aldehyde dehydrogenase.

**Methods:** ADH1B, ADH1C, ALDH1 and ALDH2 polymorphisms were determined as well as serum alanine aspartate aminotransferase, alkaline phosphatase, lactate dehydrogenase and gamma-glutamyl transpeptidase levels.

**Results:** Forty-four percent of Indo-Trinidadians had one ADH1C\*2 and one ADH1C\*1 allele and 5 percent were homozygous. Twenty-three percent of Afro-Trinidadians had one ADH1C\*2 allele and 1 percent were homozygous. The allele was associated with alcohol dependence. Alcoholics with at least one ADH1C\*2 allele had elevated levels of alkaline phosphatase and gamma-glutamyltransferase. Forty-one percent of the Afro-Trinidadians had at least one ADH1B\*3 allele, and three were homozygous. One Indo-Trinidadian had at least one ADH1B\*3 allele. Subjects with at least one ADH1B\*3 allele were less likely to be alcohol dependent and had lower alcohol consumption levels. Among alcohol dependent subjects, ADH1B\*3 was associated with significantly higher levels of aspartate aminotransferase. None of the subjects carried the ALDH2\*2 allele. About 10 percent of the people studied carried one copy of the ALDH1A1\*2 allele. Indo-Trinidadians with at least one ALDH1A1\*2 allele were more likely to be alcohol dependent.

**Conclusions:** The presence of ADH1C\*1 in Indo-Trinidadians and ADH1B\*3 in Afro-Trinidadians is associated with reduced risk for alcoholism. The presence of at least one copy of the ALDH1A1\*2 allele was found to be associated with an increase in alcohol dependence in Indo-Trinidadians.

### P0044

Role of social and individual factors of opiate dependants to relapse (with 6 moth follow up)

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**Background:** Severity of disappointment to treatment of opiate dependency and high-level percent to relapse, most of investigator believes that drug dependency is a chronic and recurrent disorder. Therefore pay attention to first prevention increase. There are a lot of factors that influences to relapse, but psychiatry disorder concurrent. Individual and social factor are considerable.

**Method:** This is a descriptive & analytic study with prospective approach with random sampling about 920 patients that their selves

voluntary have come to poly clinical addiction in Rafsanjan University.

**Result:** This study included that all factors such as age, employment, married, specific home, type of drug, method of use, amounts of use, age of beginning to abuse, use of multi drugs, injection, and previous treatment influences to outcome of treatment.

**Discussion:** however outcome of treatment depend on several factors that individual and social factor are one of them.

**Keywords:** opiate dependency, relapses, social and individual factors:

### P0045

Anticonvulsive properties of M-chlorbenzhydriurea and prospect of its clinical application

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**Objective:** To study original galogen derivative ureas which are a perspective class pharmacological active substances.

**Methods:** Connection of M-chlorbenzhydriurea, (Galodif), has been studied in a number of 780 linear and cyclic derivatives of urea.

**Results:** Galodif, possesses high anticonvulsive activity at all models - the maximal electroshock (11,8 + 1,7) mg/kg, corasol (218,0+18,1) mg/kg, strichnin (252,0+32,1) mg/kg and camphor (37,2 + 4,2) the mg/kg spasmes, possesses the expressed central M-cholinolitic and weak H-cholinolitic action, blocks convulsive action tiosemicarbaside. The effective dose under the test of the maximal electroshock for mice is equal 11,8 mg/kg. On breadth anticonvulsive actions (LD50/ED50) preparation Galodif (218,0) surpasses phenobarbital (9,1), benzonal (6,9) and phenuron (36,5). Galodif in therapeutic doses does not change impellent activity and rough reactions at mice, prolonges the time of a drug sleeping (chlorhydrat (on 170 %), barbamil (on 175 %), hexobarbital on 131 %), does not show antireserpin action under the test reserpin hypotermia, does not influence on aphomorphin stereotypy and does not oppress developed conditioned reflex-defensive electroencephalographic the analysis has revealed deprime action Galodif on impellent area of a bark of greater hemispheres, n. intralaminary talamusa, n. caudatus and reticular formation of an average brain. In the mechanism anticonvulsive actions.

**Conclusion:** Thus, linear derivative ureas - preparation Galodif - possesses a wide spectrum anticonvulsive activity and is safe at long application including in conditions of a pathology of a liver. Besides the preparation corresponds pharmacoeconomy to the criteria shown to modern antiepileptical treatmeants.

### P0046

Descriptive study of patients admitted in the dual pathology unit of Centres Assistencials Emili Mira I Lopez

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**Background and Aims:** High comorbidity between severe mental disorders and substance dependence has been observed in our area. Dual pathology oriented programs are crucial in developing treatment strategies for these patients. This study describes the profile of the patients admitted in our dual pathology unit so as to evaluate and plan more efficient and effective treatments.

**Methodology:** Correlative admitted patients have been included in the period between January 2005 and July 2005(N=50).