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PSYCHIATRIC SYMPTOMS' TREATMENT TO PATIENTS ADDICTED TO ALCOHOL, COCAINE AND CRACK

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Introduction: Extrapyramidal side-effects (EPS) related to the use of neuroleptics are an limiting factor to patients' compliance during the treatment with this group of drugs. Objective: The aim of this study was to identify which drugs are mostly prescribed for cocaine, crack and alcohol addicts' psychotic symptoms.

Methods: This study selected 31 patients with mean age of 33.61 ± 1.90 enrolled with psychotic disorders related to use of illicit drugs in an public mental health service. Results: Patients under this study were addict to alcohol (61,29%), cocaine or crack, associated (38,71%).

The percentage of patients addicted to alcohol treated with typical neuroleptic-(typicalneurol) was 42,11%, with atypical neuroleptic-(atypical-neurol) was 26,32%, with association of typical and atypical neuroleptics-(typical/atypical-neurol) (21,60%), and with benzodiazepines associated with serotonin-reuptake-inhibitors (BZD-SSRI) (10,00)%.

The cocaine or crack associated with serotonin-reuptake-inhibitors (BZD-SSRI) (10,00)%. (41,67%), atypical-neurol (41,67%), typical/atypical-neurolol (8,33%) and BZD-SSRI (8,33%).

The EPS related to the use of neuroleptics in patients addicted to alcohol were given biperiden (52,65%), promethazine or anticolvulsant (Prometh/Anticonv) (42,11%) and notreatment (5,26%). For those patients, addicted to cocaine, crack and alcohol altogether were given biperiden (58,34%), Prometh/Anticonv (25,00%) and no-treatment (16,67%). Conclusions: In the case of using neuroleptics, the EPS should be reversed with biperiden in an dose combined with the neuroleptic prescribed to each individual, in an effort to minimized hallucination. Also, if sedation was indicated using Prometh/Anticonv to patients that are taking neuroleptics, then the health care professional team in charge must be aware of consciousness level-reduction.