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EV16

The structure of mental disorders in HIV-infected patients with syphilis

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Introduction There are no data in literature on mental disorders in HIV-infected patients with syphilis.

The objective of the study was to determine the structure of mental disorders in HIV-infected patients with syphilis.

Method Sixty-five HIV-infected patients with syphilis were examined by a clinical method.

Results The sample included 45 men (average age 32.09 ± 9.83) and 20 women (average age 31.7 ± 5.97). We divided the sample into three comparison groups (according to the importance of risk factors): women, men who have sex with men (MSM), and men who have sex with women (MSW).

Mental disorders were identified in most patients (83%). Opiate dependence (F11, ICD-10) was established in 55% of women (7.7% for MSW, 0% in MSM; $P < 0.001$). The dependence on multiple drug use (F19) was revealed with nearly the same frequency in women (25.0%) and in MSW (23.1%); but far less frequently in MSM (3.2%; $P = 0.047$). The dependence on stimulants (F15) was found in women (5.0%) and MSM (6.3%). The dependence on alcohol (F10) was more common among MSW (61.5%) and women (50.0%) (9.4% in MSM; $P < 0.001$). 20% of women had Depressive episode (F32). Adjustment disorders (F43) were found much more often in men (43.8% for MSM; 38.5% for MSW; 10% for women; $P = 0.035$). Personality disorders (F60) were found in all the groups.

Conclusions We revealed a high incidence of addictions among women and MSW. Affective disorders were represented by depressive episode in women and adjustment disorders in men.

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EV18

Assessing Comorbidities and service use among patients with benzodiazepine abuse

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Prior studies have identified that individuals with comorbid substance use disorder and mental health disorder are at a greater risk of benzodiazepine abuse compared to individuals that present with mental health disorder without an accompanying substance use disorder. These studies were conducted in predominantly white populations, and little is known if the same associations are seen in safety net health care networks. Also, the literature is mixed as

to whether or not psychiatrists' prescription of benzodiazepines places individuals at undue risk of benzodiazepine abuse.

We use 2013–2015 electronic health record data from a Boston healthcare system. Patients with benzodiazepine abuse were identified if they had received treatment under the ICD-9 code 304.1. Benzodiazepine abuse was compared between patients with only mental illness and patients with existing comorbid substance and mental health disorder, in unadjusted comparisons and adjusted regression models. Covariates in regression models were used to identify subgroups at higher risk of benzodiazepine abuse.

Individuals with benzodiazepine abuse had higher rates of emergency room and inpatient use than patients with other mental health and/or substance use disorders. Those with comorbid substance and mental disorder were significantly more likely than individuals with mental or substance use disorder alone to abuse benzodiazepines ($P < .01$). Among those with benzodiazepine abuse, 93.3% were diagnosed with a mental illness, 75.6% were diagnosed with a substance use disorder (other than benzodiazepine), and 64.4% had comorbid anxiety disorder and substance use disorder. These analyses suggest that patients with benzodiazepine abuse have complex presentations and intensive service use.

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EV20

The incidence of hepatitis C virus infection among opiate drug users in Mamoura hospital patient in Alexandria, Egypt

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0 0 1 276 1575 recovery 13 3 1848 14.0 96 800x600 Normal 0 false false EN-US JA X-NONE.

Introduction Egypt is one of the most famous endemic areas for hepatitis C virus. Drug use in Egypt is rising exponentially. Drug use is always considered one of the main risk factors for HCV.

Objectives To assess the effect the route of drug use on the incidence of HCV in the Egyptian population.

Aim To study the effects of opiates (tramadol and heroin) use and the route of intake on the incidence of HCV infection among addicts treated in Mamoura mental state hospital, Alexandria, Egypt.

Methods This is a cross-sectional study on drug dependence patients visiting the out patient clinic for addiction in Elmamora Hospital.

Subjects were divided into two groups.

Group I: Control group.

Twenty non-addict volunteers.

Group II: Cases groups (comprising 60 subjects)

This group will be divided into three sub-groups each contains 20 cases.

Group IIa: consuming tramadol.

Group IIb: consuming tramadol and heroin by injection.

Group IIc: consuming tramadol and heroin by inhalation.

All studied groups were subjected to:

1. detailed history taking, urine screening tests for drugs of abuse, liver functions tests and HCV screening.

Results The study showed deterioration in liver function tests in the heroin and tramadol use groups compared to the tramadol only use.

There was a statistical significant difference in the incidence of HCV infection in the heroin injection group (85%) compared to 35% in the heroin non injector users and only 5% in tramadol users had HCV positive.

Conclusion Heroin injection showed the highest risk for both liver function deterioration and HCV infection.

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EV21

Association between patient's personality traits and outcome of hospital treatment of opioid addiction

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Introduction Despite different treatment approaches many drug addicted patients continue to use drugs during and after treatment.

Objectives Personality traits are considered risk factors for drug use, and, in turn, the psychoactive substances impact individuals' traits.

Aims To describe the sample of 186 opioid addicted patients entered hospital treatment and assessing the differences in personality traits between abstinent and non-abstinent after one year.

Methods A cohort of 186 patients consecutively admitted to the detoxification unit was investigated. The research interview, the Big Five Inventory (BFI), the Treatment Outcomes Profile (TOP) were administered during the first week of admission to the detoxification unit. Urine test was administered on the day of admission and at each follow-up point in combination with the TOP (after three, six and twelve months). Illicit drugs abstinence during one year after intake was selected as a treatment outcome measure.

Results Twelve months after admission 82 (44.9%) patients abstained completely. Agreeable patients remain in treatment longer ($r=0.20, P=0.07$). Extraversion and openness are negatively correlated with abstinence after six and twelve months ($r=-0.15, P=0.041$; $r=-0.15, P=0.044$). Neuroticism is in negative correlation with duration of treatment ($r=-0.20, P=0.006$). Patients who are less open to new experiences are more likely to abstain from drugs 6 months after admission ($r=-0.17, P=0.021$).

Conclusion Personality measured with BFI correlates with treatment outcome poorly. At the same time personality could have an important role in responding to treatment, but personality traits could be at the same time protective as well as risk factors.

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EV23

Gender difference in trauma exposure among a sample of egyptian patients with substance use disorder

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Background Studies have shown high association between trauma exposure in childhood and adulthood, post-traumatic stress disorder (PTSD) and substance use disorder (SUD). Women seeking treatment for SUD are more likely to have histories of sexual and physical abuse.

Aim To study the effect of gender difference on the history of traumatic experiences and the mental health problems of the SUD patients.

Method Cross-sectional comparative study was conducted at the Addiction Treatment Center at El Maamoura psychiatric hospital. Two hundred adult inpatients were recruited and assessed using a structured interview questionnaire to collect sociodemographic data, substance-use history, and medical and psychiatric history. The semi structured psychiatric interview was applied, and psychometric assessment was performed using Arabic version of Trauma History Screen (THS) for assessment of trauma exposure, and the Arabic version of the Post-traumatic Stress Disorder Checklist, civilian version (PCL-C) for assessment of current PTSD. **Results** One hundred and fifty-six were males (78.0%), 44 were females (22.0%). Females were significantly more likely to be exposed to sexual abuse at childhood ($P=0.002$) and adulthood ($P=0.050$), score higher on PCL-C ($P=0.002$), to have major depressive disorder (MDD) ($P=0.028$), and have suicidal plans and attempts ($P=0.001$).

Conclusions Females with substance use disorder are more likely to be victims of sexual trauma, to develop Post-traumatic stress disorder and to have more complicated psychiatric comorbidities than their male counterparts.

Keywords Substance use disorder; Post-traumatic Stress Disorder; Trauma exposure; Gender difference

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EV25

Psychometric properties of the Turkish version of the UPPS Impulsive Behavior Scale Sensation Seeking Subscale in a sample of inpatients with alcohol use disorder

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Objective Turkish version of the UPPS Impulsive Behavior Scale was previously validated in a sample of psychiatric inpatients. The aim of the present study was to evaluate psychometric properties of the sensation seeking subscale of this scale in a sample of inpatients with alcohol use disorder.

Method Participants ($n=190$) were evaluated with the sensation seeking subscale of UPPS Impulsive Behavior Scale.

Results Sensation seeking subscale had two factors, which together accounted for 63.80% of total variance. As similar with original subscale internal consistency for the sensation seeking (coefficient $\alpha=0.859$), factor 1 ($\alpha=0.862$) and factor 2 ($\alpha=0.755$) examined by Cronbach's alpha, were high. Factor 1 ($r=0.894$) and factor 2 ($r=0.863$) were highly correlated with total score, whereas moderately correlated ($r=0.544$) with each other. Test-retest correlation for sensation seeking ($n=120$) was mild ($r=0.460$). Test-retest correlation for factor 1 was moderate ($r=0.518$) and for factor 2 was mild ($r=0.431$).