Introduction Under contemporary social circumstances, there is a tendency to increasing of amount of persons disposed to addictive behavior (AB) as a mean to remove psychoemotional tension and to solve their significant problems. This tendency raises in patients with neurotic disorders (ND) that influences on clinical manifestations of the pathology and impedes diagnosis and timely care for this category of patients.

Aim To investigate AB in the structure of neurotic disorders (F44.7, F40.8, F48.0).

Methods Assessment of personal addictive status with AUDITlike tests to detect disorders related to substance and nonsubstance abuse; 109 patients with ND (main group) and 52 persons without ND (control group) were examined.

Results It was revealed that patients with ND had significantly higher risk of AB formation (59.73% compared with 21.15% in healthy persons; P < 0.0001). According to the group comparison, in patients with ND levels of AB expression on parameters of "Job" (12.06 points), "Food" (11.98 points), "Internet" (11.10 points), "TV" (8.82 points), "Shopping" (6.59 points) were significantly higher than in healthy persons (9.73; 9.23; 9.00; 7.38; 4.25 points, respectively; P < 0.05). However, levels of keenness on computer were significantly higher in healthy persons (3.48 points) than in patients with ND (2.34 points; P < 0.05). AB connected with substance abuse was not registered in the groups.

Conclusions The results suggest that the patients use AB in forms of food, Internet, job, TV, shopping dependencies as a subconscious mechanism substituting unsatisfied needs and decreasing motivation-emotional tension under conditions of a frustration conflict.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV384

Is social attachment an addictive disorder? Role of the latest findings in the opioid system

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Introduction The endogenous opiate system (EOS) has been linked to social attachment in classical animal experiments, to addictive disorders (AD) and, more recently, to specific traits of personality through research in genetic polymorphisms and neuroimaging techniques.

Objectives To expose the relation between social bonding and AD, via the latest neurobiological findings in the EOS. To propose a theoretical framework which may allow a clinical approach based upon respect and no stigmatization.

Methods Literature review in MEDLINE database with the keywords "opioid", "polymorphism", "object attachment", "addictive behavior", "personality".

Results Polymorphisms in the mu-opioid receptor gene lead to different attachment behaviors in primates. The EOS in humans has been related to pain and placebo effect and recently, to social rejection and acceptance. Thus, some authors talk about "social pain". Interestingly, the EOS has a role in harm avoidance and in the reward system. These traits of personality (harm avoidance and reward dependence) predispose to AD, and likely, pathological models of social bonding may drive to a need of palliating excessive discomfort originated by an altered opioid function through addictive behaviors. The origin of AD must be focused on the individual vulnerability rather than in the addictive substance/behavior.

Conclusions The latest findings in the EOS yield concrete evidences that support the classical hypothesis of an opioid nexus between social attachment and AD, and shift the spotlight from the addictive object to the vulnerable subject. This theoretical framework may ease a clinical approach based upon respect and no stigmatization.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV385

Mental disturbances in patients with acute medical condition

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Contemporary remains understudied health issue - the psychological aspect of the acute therapeutic diseases problem. Among the most common diseases - coronary heart disease (CHD), myocardial infarction (MI), crisis states in patients with arterial hypertension (AH), transient ischemic attack (TIA) and acute stroke (AS), gastric ulcer and duodenal ulcer (GU&DU). Clinical features of the structure, dynamics, current and immediate link with the medical conditions is not fully understood. The basis of our research, the purpose of which, was to identify mental disturbances in patients with acute therapeutic diseases. One hundred and eightyseven patients were examined, 34 CHD patients, 37-MI, 38 - TIA, 39-AH, 39 - GU&DU, 65% male and 35% female aged 20 to 60 years. The main research method was clinical and psychopathological. A high-level affective and neurotic disorders in these patients was observed. Structured analysis allowed identifying four main options disturbances: nosogenic neurotic reaction-68 patients; somatogenic asthenic syndrome-46 patients; reaction psychological maladjustment-34 patients; acute stress reactions-39 patients. Stratification of structure psychopathological syndroms allowed systematizing them in 4 different groups: asthenic-24%; anxiety - 46%; subdepressive - 11%; somatoform - 19%. That was the basis for the determination early psychotherapeutic correction program, formed by integrative model. The high efficacy was shown in 74% patients, middle range-in 15%, low-in 11% patients. Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV386

Prevalence and clinical correlates of comorbid drug use and ADH

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The prevalence of drug use in patients suffering ADH is very high. The main purpose of this paper is to make a review of the recnet literatura in this field.

We make a review in PUB Med using "ADH" and "drug abuse", selecting papers not older than 5 years.

The conclusions are that adult patients suffering ADH presents higher prevalence of drug use and/or dependence, showing that ADH is a risk factor for this comorbidity. This conclusion implies the neccesity of strat the treatment in young people, treating to avoid drug use and/or dangerous behaviors in this group of patients.

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EV387

The influence of psychopharmacological treatment in the long-term outcome in patients suffering ADH with comorbid drug use

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ADH is one of mental disease with a higher prevalence of alcohol and drug abuse. ADH is a risk factor for drug use, and that's true in the reverse sense. The mutual influence in both disorders is clear and the presence of both disorders together could be a real challenge for a clincial professional.

The main objective of the study is to evaluate the influence of the psychopharmacological treatment in the longterm outcome of this sample, using a measurement drug use, adherence to the treatment and impulsivity.

We make a study that includes a group of patients with both disorders. We select a sample from the Centro de Día Zuría. The patients complete a battery of scales (SCL-90, BArratt, SF-36) before and after the beginning of psychopharmacological treatment.

Our results shows a better prognosis in the patients with a good adherence to treatment, with a decrease in frequency and levels of drug use and a decrease in impulsivity, with a low level of behavioral disorders and violence.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV389

Between Scylla and Charybdis: Where does the treatment of Addison's disease in late-life depression go first?

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Introduction Older adults with adrenocortical insufficiency, including Addison's disease (AD), are at an increased risk for developing late-life depression. Treatment of AD with glucocorticoid replacement therapy may exacerbate depressive symptoms and may complicate treatment of late-life depression.

Objectives To present a case with algorithm of decision-making in a particular case of glucocorticoid induced depression in patient with syndrome of Addison.

To report a case-study, describing treatment of Addison's Aims disease in LLD.

Methods A case report is presented and discussed, followed by a literature review.

Results A 77-year-old female, diagnosed with Addison's disease, was referred with persistent fatigue, weakness, weight loss, sleep disturbances, and depressive symptoms over the previous 6 months. She was taken losartan 100 mg/day, zolpidem 10 mg/day, fludrocortisone 100 µg/day, and hydrocortisone 35 mg/day. There was no personal or family history of psychiatric problems. Clinical examination was normal aside from skin hyperpigmentation. After initial minimal dose reduction of glucocorticoids, Addison's disease remained under control. One week later, her depressive symptoms disappeared without administration of antidepressants.

The association between glucocorticoid replacement Conclusion therapy and late-life depression is not well understood. The current case shows that treatment of glucocorticoid-induced depression in subjects with Addison's disease is achievable by minimal adjustments in glucocorticoid regiment. However, collaboration with endocrinology is of vital importance to prevent an Addison's crisis. Pharmacokinetic dose-finding studies are required to find optimal glucocorticoid adjustment strategy.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV390

ADHD "Symptomatic contamination" in dual pathology (I): general analysis of the "Sym_Con" sample

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Introduction The links between ADHD and SUD are demonstrated in the scientific literature. The existence of dual diagnosis affects both prognosis and clinical-therapeutic assessment.

Objective and aims Describe the general characteristics of a sample of patients with SUD (n = 162) who seek treatment for their addiction, based on the presence of symptomatic contamination by ADHD, compared to a sample of adults (n = 246) without addictive pathology (parents of children with different risk for ADHD).

Methods We assessed using different scales the properties of the sample (visual analogical [general state of health, sadness, anxiety, irritability, suspiciousness], WURS, BDI and Exploratory List of ADHD symptoms).

Results The average age in the group of parents was 40.59 versus 35.88 on the SUD group, with 42% and 87% males respectively. SUD group presented worse general state, with higher average of sadness, anxiety, irritability and suspicioness, as well as WURS and exploratory symptoms of ADHD, as shown in Tables 1 and 2.

Conclusions The SUD group had higher ADHD symptomatic contamination respect to Parents group. These results are preliminary and are pending more thorough analysis as part of a more extensive and complex study, requiring further confirmation in future studies.

Table 1 Informe.

SUD HITS	us Parents	WKS-Estado General	WRS-Tristeza	VRS-Ansiedad	VRS- Initabilidad	VRS- Suspicacia	WURS Total	WURS- Conduc_Anim Gy Relaciones	WURS- Problemas médicos	WURS- Escolary académico	WUR9-25	Lista Exploratoria Sintomas_Act ual	ListaExpSint_	BDi 21 items
Parents	Weda	5,32	4/12	5,14	5,18	4,87	65,07	48,00	4,07	13,05	21,71	10,68	6,34	9,31
	N	230	234	234	235	232	238	238	238	233	238	243	245	225
	Desv tip.	1,137	1,753	1,736	1,629	1,481	26,515	21,445	3,772	7,757	16,251	8,188	5,029	8,163
SUC	Media	4,74	5,57	5,90	6,05	5,63	93,12	71,69	4,07	17,43	45,90	21,89	12,45	17,75
	N	155	158	158	158	155	155	156	158	155	157	161	161	162
	Desk tip.	2,224	2,589	2,790	2,758	2,634	28,302	23,334	3,715	6,903	17,588	10,420	5,917	10,257
Total	Weda	5,09	5,11	5,45	5,55	5,17	76,13	57,38	4,07	14,93	31,54	15,15	8,79	12,84
	N	385	392	392	333	387	253	394	335	394	395	404	402	387
	Desk fp.	1,683	2,160	2,250	2,187	2,054	30,519	25,033	3,744	7,733	18,920	10,656	6,172	9,997