

at the addiction unit of “Red de Salud, Pontificia Universidad Católica de Chile”, between November 2013 and October 2015. Data included: demographics, medical and psychiatric history, laboratory and imaging tests.

Results Of all the patients, 57% were men, 25 to 67 years of age, 43% between 35–40 years; 57% were married; 57% had completed studies at university. 43% had also alcohol use disorder, 28% marijuana, 28% cocaine and 28% benzodiazepines than in most cases began before OUD. In addition; 57% had medical comorbidity among which stand out obesity (17%), osteoarthritis (17%) and chronic low back pain (17%). Eighty-three percent require hospitalization. Twenty-eight percent had abnormal liver tests and one patient had positive hepatitis B core antibody. Opioids used were: morphine (14%), codeine (43%), tramadol (42%).

Conclusion These results emphasize on the misuse of prescription opioids analgesics, the complexity of patients with OUD and the prevalence of other substance use disorder that precedes and accompany OUD.

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EV41

Predictors of quality of life in opiate-dependent individuals undergoing methadone maintenance treatment

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Introduction Quality of Life (QoL) is an important outcome variable in Methadone Maintenance Treatment (MMT) for opiate dependence. Previous research has focused on demographic variables, treatment features, drug use and physical and mental health as possible predictors of QoL in this condition but interest in genuinely psychological variables (skills and personal repertoires) has been lacking. Experiential Avoidance (EA), the tendency to behave in order to decrease some kind of internal distress, has a strong relationship to psychological disorders and holds promise as a potential predictor of QoL.

Objectives To identify predictors of QoL in clients undergoing MMT, taking into account psychological variables.

Aims To see if EA is related to QoL in clients undergoing MMT.

Methods Using a cross-sectional design, information was gathered from 48 opiate-dependent individuals undergoing MMT. Variables included were QoL (IDUQOL), severity of drug use, social adjustment and physical and mental health (ASI-6), emotional distress (HAD) and EA (AAQ and its version for substance-abusing individuals, AAQ-SA). Mean-comparison tests and correlation tests were carried out, and several variables were entered into a stepwise multiple regression analysis.

Results Anxiety and EA were the only variables which made it into the regression model, accounting for 41.9% of variance of QoL.

Conclusions Contrary to previous research, the predictors of QoL were psychological. It is the first time that EA is related to QoL in this population. Interventions should explicitly target EA and anxiety. Additional research should make use of longitudinal designs and take into account further psychological variables (emotion regulation, coping).

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EV42

The relationship between previous trauma and alcohol and substance misuse in women

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Introduction The association between previous trauma and the development of alcohol and substance misuse is well established, however, much of the research is focused on the association of PTSD with alcohol and substance misuse. This research will be focussing on trauma in general and its influence on the development of alcohol and substance misuse in women.

Objectives The main objective of this study was to investigate the relationship between previous traumatic events and the development of alcohol and substance misuse in women.

Methods This was a retrospective case note study of 146 female patients from a UK based detoxification and rehabilitation centre. Trauma history from patient files were audited, with the trauma experienced being assigned a category.

Results Out of 146 women with alcohol and/or substance misuse, 132 (90%) had experienced a previous trauma. The types of trauma experienced include; domestic (53%), traumatic grief (36%), sexual abuse (35%), physical (15%), bullying (4%) and neglect (4%). These results show that women who suffer from alcohol/substance misuse are highly likely to have suffered a previous trauma.

Conclusions The results from this study suggest that women who have suffered previous trauma are high risk for alcohol and substance misuse problems, therefore early intervention and a robust psychological support system should be provided to women who have a history of trauma. Furthermore in addition to addiction treatment and behaviour focused therapy already in place trauma focussed therapy may prove beneficial.

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EV44

Torsades-de-Pointes Predisposing Risk Factors (TdPPRFs) in a cohort of patients maintained on high dose methadone – a clinical safety caseload analysis

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Introduction Methadone, a long-acting opioid agonist commonly used in the treatment of opiate dependence, has been reported to cause QTc interval prolongation, increasing the risk of a fatal cardiac arrhythmia – Torsades-de-Pointes (TdP). This effect seems to be attributable to methadone's inhibitory effect on the cardiac “hERG”-K⁺ ion channel and is dose-dependent. There is a lack of consensus regarding when to perform an ECG for patients on methadone.

Objectives Identifying other TdPPRFs in a cohort of patients receiving ≥ 85 mg (high dose) methadone daily to inform local clinical safety guidelines.