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Zolpidem abuse: About a case

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Objective Zolpidem is a non-benzodiazepine hypnotic drug for treatment of insomnia and is generally believed that is a safe medication. Therefore has been introduced as a lower potential agent for dependency and abusive effects however its safety and dependence potential are of great concern.
Case report A 63 years old male patient had consulted a general physician in January 2015 for his insomnia. He started on zolpidem 10 mg at bedtime. Over the next few months he had gradually increased the dose as he found the prescribed dose to be having no significant effect. After abrupt discontinuation of zolpidem, he presented to a center for drug users "AIDE ET ECOUTE" with severe anxiety, impatience, loss of energy, insomnia, irritability, headaches, and increased craving for higher dosage of zolpidem. There was no history of any other substance abuse and he was diagnosed simultaneously a case of zolpidem dependence and major depressive disorder.
Conclusions Zolpidem has a potency to be abused with high risk of dependency and withdrawal syndromes particularly among elderly patients with comorbid anxiety and depressive disorders.
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EV72

Nalmefene as an intermittent treatment for alcohol abuse triggering cocaine and sex consumption

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Nalmefene modulates the motivational system by blocking the opioids receptors. Nalmefene indication is the alcohol consumption reduction in alcoho dependent patients. We describe the case of a patient with weekend alcohol abuse that was followed by cocaine use and sex. After being treated with nalmefene, the patient decreased alcohol consumption and did not engage cocaine use and sex. The patient is a 36-year-old man with a previous history of cocaine, cannabis and alcohol abuse. After detoxification the patient became a weekend drinker. Two months later he started complaining that after drinking he needed to consume cocaine and this led him to having sex with prostitutes. These behaviours had a serious impact on his finances that lead him to asking for help. Nalmefene, 18 mg at dinner before going out, was prescribed. Taking one pill of nalmefene "allowed me to drink several shots without feeling a need to continue drinking and, most importantly, I didn't feel the need to consume cocaine and have sex". In an attempt to ascertain if what had happened the previous weekend was "psychological" the patient went out without taking nalmefene. The pattern of alcohol use, control loss, and consumption of cocaine and sex repeated itself. During the following two months, the patient took nalmefene during dinner before going out every weekend and the results were the same as when he first took the treatment.
Conclusion Nalmefene may be helpful in the treatment of several other addictions by blocking the positive reinforcements of the drugs.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV73

A case of share psychotic disorder induced by mephedrone

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Introduction Share psychotic disorder "folie à deux" is a rare condition characterized by the transmission of delusional aspects from a patient to another linked by a close relationship. We report the case of two Spanish men who have experienced a combined delusional episode induced by mephedrone.
Objectives Describe a case of share psychotic disorder induced by mephedrone. Make a review on scientific literature about the use of mephedrone (little is known about the psychiatric consequences of the use of these compounds). The patients had no psychiatric history.
Aims Show the danger of these novel drugs that are often bought as apparently safe and legal.
Conclusions Share psychotic disorder was first introduced by Lasegue and Falret who hypothesized that transmission of psychiatric disturbance from one person to another was possible under certain circumstances. The correlation of symptoms with the intake of these substances is supposed in the light of a negative psychiatric history and no other concomitant medical treatments. An important number of case reports documented deaths related to the ingestion of mephedrone. Another problem is that these substances are not detected by standard blood and urine test so that the diagnosis of intoxication is often delayed.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV74

The experience of using synthetic cannabinoids: A qualitative analysis of online user self-reports

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Introduction The number of novel psychoactive substances (NPS) available is increasing. Synthetic cannabinoids (SC) are one of many NPS sold. SC aim to emulate the effects of natural cannabis by acting on cannabinoid receptors. Despite much research into pharmacology, there is limited data on the user experience of SC.
Aim It is useful for psychiatrists, to understand what experiences people have whilst on illicit substances. The aim of this qualitative study is to gain an initial understanding of what characterizes the experiences of those who use SC.
Method Fourty anonymously written online reports were collected from the "Erowid experience vaults" and analysed using the Empirical Phenomenological Psychological Method.
Results The analysis yielded 488 meaning units (MU). These were grouped into 36 categories revealing 5 broad themes: (1) physical affects; (2) sensory distortions and distortions of perception; (3) emotional and psychological effects; (4) re-dosing, addiction and comedown effects; (5) similarities to other substances.
Conclusion Synthetic cannabinoids have a mixed effect on users with a myriad of experiences reported. Some experienced positive

results from their usage such as euphoria and relaxation, however these were counter balanced by those who experienced some serious negative emotional and physical side effects such as anxiety, paranoia, palpitations and convulsions. SC appear to often emulate that of their natural counterpart, yet there is an unpredictability to them which can end with serious consequences. Online forum content gives us a strong base understanding of users experiences of SC. Further research is required to elucidate a more nuanced understanding.

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EV75

The "Endless Trip": Psychopathology and psychopharmacology in the Hallucinogen Persisting Perception Disorder (HPPD)

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Introduction Hallucinogen Persisting Perception Disorder (HPPD) is a syndrome characterized by prolonged or reoccurring perceptual symptoms, reminiscent of acute hallucinogen effects. HPPD was associated with a broader range of LSD (lysergic acid diethylamide)-like substances, including cannabis, MDMA (methylenedioxymethamphetamine), psilocybin, mescaline and other psychostimulants. Symptomatology mainly comprises visual disorders (i.e., geometric pseudo-hallucinations, halos, flashes of colours/lights, motion-perception deficits, afterimages, micropsy, more acute awareness of floaters, etc.), even though depressive symptoms and thought disorders may be comorbidly present.

Objective Although HPPD was firstly described in 1954, it was definitely established as a syndrome in 2000 with the revised forth version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR). However, neuronal substrate, risk factors, aetiology and pathogenesis of HPPD remains still unknown and under investigation. Furthermore, there are still open questions about its pharmacological targets.

Aims A critical review on psychopathological bases, etiological hypothesis and psychopharmacological approaches towards HPPD was here provided.

Methods A systematic literature search on PubMed/Medline, GoogleScholar and Scopus databases without time restrictions, by using a specific set of keywords was here carried out. In addition, a case report was here described.

Results and conclusions Pharmacological and clinical issues are here considered and practical psychopharmacological recommendations and clinical guidelines here suggested.

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EV76

Psychosis and polydrug abuse in a patient with Dandy-Walker variant

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Background and purpose Dandy Walker "syndrome" (DWS) was firstly defined by Dandy and Blackfan, and then described by Hart et al. [1] as a series of neurodevelopmental anomalies in the posterior fossa, including Dandy-Walker (DW) malformation, DW variant (cerebellar hypoplasia/aplasia of the cerebellar vermis and cystic dilatation of the fourth ventricle), mega-cisterna magna and posterior fossa arachnoid cyst. Mental symptoms have been associated with DWS in previous reports, but the spectrum of mental symptomatology widely varies between clinical cases, ranging from psychotic/schizophrenia-like to mood/cognitive symptoms [2].

Methods Here we describe a case of psychosis and polydrug abuse in a 27-year-old man with DW variant a 4-year history of polydrug abuse, sporadic alcohol abuse, epilepsy and psychotic symptoms including delusions of reference/persecution, suspiciousness, associated with obsessive thoughts, mood lability and persistent anxiety.

Results He was recovered for a 28-day program of detoxification from drug addiction/stabilization of psychiatric symptoms. Family history of Bipolar Disorder, gambling disorder (father) and depression (mother). The mental status examination at baseline revealed slowness of thought, psychomotor retardation, aboulia/anhedonia/apathy/hypomimic facies/asthenia/social withdrawal/deflected mood/poor thought content/blunted affect/self-neglect/poor insight, cognitive impairment and oppositive and partially collaborative attitude and behaviour. Borderline intelligence activity was found on WAIS-R (IQ = 79). At the baseline, he was taking carbamazepine 400 mg BID (baseline serum level: 6.720 μg/ml), gabapentin (400 mg BID), paroxetine (20 mg/d), olanzapine (10 mg/d) and methadone (70 ml/d), with a poor response/control both on psychotic and seeking drug symptomatology.

References not available.

Conclusions Further DWS clinical cases should be evaluated in order to better investigate the role of this variant to addictive and psychotic symptoms.

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

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EV77

Improved drug-use patterns at six months post discharge from inpatient substance use disorder treatment; results from compulsory and voluntary admitted patients

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