

The following abstracts were presented as posters at the 2018 NEI Congress

The 2018 NEI Congress would like to congratulate the following scientific poster winners:

1st Place:

20 - The Need for Speed: Adjunctive Triple Chronotherapy. An Accelerated Intervention in the Treatment of Acute Depression in the Adolescent Population

Diane Hurd, PMHNP; Mariela Herrera, MD; Nicholas Coombs, MS; Jeannine M. Brant, PhD, APRN, AOCN, FAAN; Eric Arzubi, MD

2nd Place:

93 - Practical Outpatient Pharmacotherapy for Alcohol Use Disorder

Youngjung Kim, MD, PhD; Laura Hack, MD, PhD; Elizabeth Ahn, MD; Jungjin Kim, MD

3rd Place:

95 - Differential Aspects Between Schizophrenia Treatment Approaches: Oral Antipsychotics vs. Aripiprazole Long-Acting Injectable

S Arques Egea; E Ros Cucurull; C Iranzo Tatay; C Parro-Torres; RF Palma-Álvarez; E Castrillo; MA Cantillo; P Aznar

2 What's Bugging You? Alliaceous Therapy for Ekbom Syndrome

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ABSTRACT: Study Objective: Delusional parasitosis, or Ekbom syndrome, is a fixed false belief of being infested by parasites [Bellanger 2009]. With easy accessibility of the internet, serving as a vital tool in acquiring myriad information, these delusions typically arise and can be fueled by external sources as self-research [Bell 2005]. For instance, garlic (*allium sativum*) has been reported to exhibit anthelmintic activity against cestodes (tapeworms), proving to be a natural treatment option [Abdel-Ghaffar 2010]. Without proper instructions, guidelines, or control of such information, psychopathological manifestations may be derived.

METHODS: A young adult male presented with severe psychosis. He reports responding to an internal stimuli, non-command auditory hallucinations, and paranoid ideations specifically in regards to his body and health

for several weeks. Prior to presentation, he experienced abdominal pain and constipation for five days, but attributed it to the belief of having tapeworms. He stated that he researched cures for several days using the internet and found garlic as a treatment option. He attempted to alleviate his symptoms by ingested 197 pills of 1,000 milligram (mg) garlic supplements, two 100 mg bisacodyl laxatives, and five 100 mg docusate stool softeners in one day. He denies any suicidal/homicidal ideations, illicit substance abuse, *deja-vu*, and *jamais-vu*.

RESULTS: Psychiatric examination is as follows: Mental Status Examination: awake, alert, and oriented x3. General Appearance: disheveled. Speech: soft, mumbling, and minimally non-responsive. Psychomotor Activity: moderately sedated. Eye Contact: poor. Mood: dysphoric. Affect: flat. Thought Process: flight of ideas. Thought Content: preoccupied. Judgement/Insight: poor. Immediate/Recent Recall: poor. Remote Memory: poor.

CONCLUSION: Delusional parasitosis and somatic parasitic infestation has dire consequences in which one's health can become compromised. For those suffering from parasitosis, addition of garlic in food as well as garlic supplements of 50 mg/kg body weight has been reported as a possible naturopathic treatment option in *Cryptosporidiosis* and *Schistosoma mansoni* [Gaafar 2012; Nahed 2009]. In addition, it was found that a dose of 1.2 mg for three days was efficient, safe, and shortens the duration of treatment for parasites [Soffar 1991]. However, this patient ingested 197,000 mg of garlic

supplements without experiencing symptoms of overdose. This may include burning sensation of the mouth or stomach, flatulence, nausea/vomiting, diarrhea, thrombocytopenia, and anaphylaxis [Bayan 2014]. The efficacy of garlic for treatment of true parasitosis is unknown, but can be found in common practice especially those who practice naturopathic medicine. In this case, it is unlikely to have a positive effect, especially when delusional in nature. The use of homeopathic medication in those with true parasitosis and delusional parasitosis should be queried.

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Clinical Evaluation of the Abuse Potential of Buprenorphine/Samidorphan Combination

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ABSTRACT: Introduction: Buprenorphine (BUP)/samidorphan (SAM) combination is an opioid system modulator being investigated as an adjunctive treatment for major depressive disorder (MDD). BUP/SAM is a fixed-dose combination of BUP, a partial μ -opioid receptor agonist and κ -opioid receptor antagonist, and SAM, a μ -opioid receptor antagonist added to address the abuse and dependence potential of BUP.^{1,2}

STUDY OBJECTIVE: We assessed the effects of SAM on the abuse potential of BUP in the BUP/SAM combination in two ways: (1) a human abuse potential (HAP) study in volunteers; and (2) an evaluation of the clinical experience across studies of patients with MDD.

METHODS: Study 212 (ClinicalTrials.gov ID: NCT02413281) was a HAP study in nondependent, recreational, adult opioid users. Following a qualification

period, participants were randomized to 6 treatments in a blinded, crossover design: placebo (PBO), BUP/SAM at the target therapeutic dose (BUP/SAM 2 mg/2 mg), at 8 mg/8 mg and 16 mg/16 mg, and BUP alone (8 mg and 16 mg). The primary endpoint was maximum effect (Emax) for "At The Moment" Drug Liking Visual Analog Scale (VAS).

The clinical program for BUP/SAM included 4 PBO-controlled studies of patients with MDD (n=961). Pooled safety data were evaluated for adverse events (AEs) that may be associated with abuse, dependence, or withdrawal, as well as for objective signs of withdrawal with the Clinical Opioid Withdrawal Scale (COWS).

RESULTS: In Study 212 (n=38), Emax Drug Liking VAS scores for the BUP/SAM 2 mg/2 mg dose were similar to those for PBO (median within-subject difference [90% CI]: 2.5 [0.0–9.0]). Emax Drug Liking VAS scores for all BUP/SAM dose groups, including suprathreshold doses, were significantly lower than those observed for either of the BUP doses. The suprathreshold doses of BUP/SAM (8 mg/8 mg and 16 mg/16 mg) had higher Emax Drug Liking VAS scores than PBO, but the differences were small.

In the MDD controlled studies, the incidence of euphoria-related AEs was low for BUP/SAM 2 mg/2 mg and PBO (1.6% vs 0.2%, respectively) and there was no evidence of abuse or dependence behavior. Euphoria-related events typically occurred with treatment initiation and resolved with continued treatment. There was minimal evidence of withdrawal by reported AEs or COWS assessment.

CONCLUSIONS: These findings indicate that SAM mitigates the abuse potential of BUP in the BUP/SAM combination. Funding Acknowledgements: Alkermes, Inc.

REFERENCES:

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2. Fava M, Memisoglu A, Thase ME, *et al.* Opioid modulation with buprenorphine/samidorphan as adjunctive treatment for inadequate response to antidepressants: A randomized double-blind placebo-controlled trial. *Am J Psychiatry*. 2016;**173**:499–508.

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Presence and Impact of Possible Tardive Dyskinesia in Patients Prescribed Antipsychotics: Results from the RE-KINET Study

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