

Conclusion: We recognized two separated groups: Heavily cue responder and non responder. They are different in subjective response to the drug cues and in their brain activation (the regions that are responsible for reward and punishment). We also found that the FMRI findings are highly correlated to the subjective responses. This means that the Visual Craving Task is a reliable device for estimating the degree of craving in the heroin addicts.

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Comorbidity and therapy of affective disturbances in associated forms of alcoholism

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Comorbid pathology of brain in formation of associated forms with the second stage of alcoholism (A): with exogenous-organic brain impairment of traumatic (group I); hypertensive (II), cervicogenic (III) genesis and without comorbidity.

Group I: A is formed early in persons with premorbidly problematic social adaptation (62,2% - excitable traits of character). Dysphoria in intoxication and withdrawal syndrome (AWS) results in psychopath-like degradation with total social desadaptation. Asthenic-explosive modality of dysphoria - quick exhaustibility of affective oscillations. Outside AWS - reactive lability, asthenic-subdepressive states with dysphoric, hysteric-excitability components, more seldom hypochondriac manifestations.

Group II: Later formation of A (26,7% - anxious personality). Psychosomatization of anxiety - neurocirculatory dystonia (NCD). Alcohol decreased level of anxiety and severity of NCD with subsequent fixing the ataractic motivation of ethanol intake. In structure of AWS anxious-phobic modality of dominating depressive disorders with cerebral-asthenic and cardiovascular manifestations of toxicogenic effects of ethanol modified development of torpid asthenic-depressive states (with cardiophobic and hypochondriac components) - formation of hypochondriac variant of remission. Clinical efficacy of antidepressant Paxil in comorbid anxious-depressive syndromes has been revealed.

Group III: Intermediate tempo of alcoholism progression acceleration with obligation of diencephalic psychovegetative, psychosensory and severe psychoorganic cognitive disorders with asthenic, more seldom dysphoric variants of alteration of personality.

Comorbidly-conditioned variants of pathologically altered biological ground in associated forms of alcoholism broadens approaches to systemization of clinical polymorphism of affective disturbances with therapeutic strategies individuation.

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Impulsivity, personality disorders and the engagement in addiction treatment

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Aims: The objective of this 12-week prospective study of 183 alcohol use disorder patients was to identify patient characteristics that predict engagement and the course in addiction treatment.

Methods: At intake, patients' addiction severity, social functioning, psychiatric symptoms and diagnoses were assessed using semi-structured interviews (Addiction Severity Index, SCID-I, and SCID-II), and self-report questionnaires (Barratt's Impulsiveness Scale, Beck Depression Inventory, Beck Anxiety Inventory, and

Symptom Checklist 90-R). Patients were reassessed biweekly for 12 weeks to determine alcohol use.

Results: In the first 28 days following intake, 100 patients had slipped or relapsed on alcohol, 75 were abstinent, and 8 were lost to follow-up. Among those patients who had consumed alcohol, the mean time to first slip was 7.3 days, and the mean time to first relapse was 12.1 days. The rate of early drop-out (<28 days) was 15% among relapsing patients vs. 3% for abstinent patients ($p=0.003$).

There were no differences between relapsing and abstinent patients in terms of their alcohol severity at intake, or their rates of depression or anxiety disorders. However, relapsing patients had more secondary drug use ($p<0.001$), lower social functioning ($p=0.011$), higher levels of impulsivity ($p=0.005$), and greater rates of Cluster B personality disorders ($p=0.004$) than abstinent patients. The hierarchical regression model accounted for 38% of the variance in abstinence status at 28 days.

Conclusions: Alcoholic patients who presented with more chaotic lives (impulsivity, secondary drug use, lack of social support) and concurrent Cluster B personality disorders were more difficult to engage in addiction treatment.

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Pathological internet use among Romanian children and teenagers

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Background: Over the last few years, there has been increased interest in the addictive potential of the internet. The current study was an attempt to replicate common findings in the literature and provide more evidence for the existence of internet addiction among school students - a population considered to be especially vulnerable.

Studies of general internet users suggest that some children's may experience psychological problems such as social isolation, depression, loneliness, and time mismanagement related to their internet use and failure at school.

Methods: All of the students ($N = 650$) came from 7 gymnasium schools and 6 high schools of Iasi, Romania. The students answered to a questionnaire comprising 34 questions related to computer activities. These were aimed at highlighting: 1. The frequency of internet use by the students; 2. The identification of a psychological problems; 3. Identification of a possible internet addiction.

Results show that the school students prefer to spend a considerable amount of time with their computers, over 5 hours/day. The purpose of this article is to describe how internet use affect socialization, academic performance, personality and to discuss how identity are constructed in cyberspace.

Conclusion: Excessive amounts of time at a computer can contribute to undeveloped social skills and a form of addictive behaviour, and failure at school. Internet addiction is marked by symptoms of increasing tolerance, withdrawal, mood changes, and interruption of social relationships. The results show that the parents don't recognize internet addiction.

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Specific rehabilitative and psychotherapeutic groups for cocaine addicted patients: A new model of treatment