P54.12

Endogenous ethanol and microbe associations at patients with alcoholic dependence

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Systematic usage of alcohol results in predominance of lipid metabolism in comparison with carbohydrate metabolism. Synthesis of endogenous ethanol is decreased. This is not the only cause of decreasing of endogenous ethanol synthesis. We found that patients suffering from alcoholism have essentially disturbed microbe ensembles in bowels. This dysbacteriosis not only disturbs their immune reactivity, results in deficiency in vitamins, aminoacids and other biologically active compounds, but also deprives organism of endogenous ethanol synthesized by some symbiotic microorganisms. Alcoholic dysbacteriosis indirectly causes appearance of fermentative pathology - decreasing of cycle Crebs enzymes activity that aggravates suppression of carbohydrate metabolism. Treatment of patients suffering from alcoholic dependence with probiotics such as bifidumbacterine and lactobacterine is insufficiently effective. We obtained combined bacterial preparation containing immobilized on the activated charcoal microbe association. These microorganisms consecutively enter into vital functions resulting in marked positive changes. Patients noted decreasing of need for alcohol. The level of endogenous ethanol in the blood increased. content of glucose and lipids, activities of lactate dehydrogenase, pyruvate kinase, aldehyde dehydrogenase, oxydoreductases normalized, activity of transferases decreased.

P54.13

Efficacy of oxcarbazepin in alcohol relapse prevention – a pilot study

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Introduction: The anticonvulsant carbamazepine is used in alcohol withdrawal. It also reduced the relapse risk in a double-blind pilot study with 29 patients (Autor et al 19zz). However, its use in alcoholics is often limited because of its metabolism in the liver and hepatic impairment in alcoholism. This problem could be addressed by the use of the carbamazepine-derivative oxcarbazepin, because unlike carbamazepine it is only metabolized by specific isoenzymes of the cytochrome P-450 3A group. No epoxide emerges in the metabolism, which explaines the better tolerability of oxcarbazepine.

Methods: We evaluated oxcarbazepine for relapse prevention in ten high risk patients, who had repeatedly (mean 5 times in about 10 years of dependence) relapsed after detoxification and who had also failed to respond to acamprosate. Patients were seen weekly in our out-patient clinic after detoxification and received about 900mg oxcarbazepine per day. All Patients fulfilled ICD-10 criteria for alcoholism and suffered from no other psychiatric disorder.

Results: Ten patients were treated, the overall tolerability was good. Four patients remained abstinent for at least 15 weeks (mean 20 weeks) under treatment, while treatment had to be terminated in four patients due to side effects, mainly an allergic skin reaction in three patients. Two more patients relapsed under oxcarbazepin medication.

Conclusion: Altogether, oxcarbazepin might warrant further investigation and may be useful in preventing alcohol relapse in some previously treatment-resistant alcoholics.

P55. Substance related disorders - other

P55.01

Addiction, stigma and the movies

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Social cognitions and attitudes about alcohol and drug use develop through direct experience and from the experience of others, and some conveyed through exposure to indirect socialising agents: books, magazines, advertisements and not least... movies. Some writers take this further by saying that movies, due to their enormous power of engagement, make history and dictate societal norms and values. I wish to explore some of the stereotypes of addiction using excerpts from mainstream movies and arrive at a framework for understanding their impact on the audience's world view. Since the 1920's cinema has, for better or worse, shaped society's view about drug and alcohol use and misuse. I have attempted to typify the alcohol and drug using movie character(s) according to stereotypes. I further assert that stigmatisation of the alcohol or drug user is influenced enormously through this form of communication. 20 film clips.

P55.02

Population survey of drug abusers attending a Swiss detoxification unit

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The main characteristics of patients admitted for inpatient detoxification in an University based substance abuse unit were assessed.

Methods: A short questionnaire was applied, investigating sociodemographic data, patterns of drug/alcohol consumption, previous treatments, outcome and therapeutics projects.

Results: The mean age of the 550 patients admitted during the 3-year observation period was 29.5 ± 6.5 years. 36,5% were referred by GP's and 62.2% by professionals of the regional addiction network. 86,4% were polysubstance abusers, the main substance class being opiates. The mean drug abuse history was 9.1 years and 92.2% of the patients had previous withdrawal experiences, 19,1% of them in our unit. Whereas 56,5% planned to enter a therapeutic community after detoxification, only 29,3% actually maintained their initial project. No secular trends were identified over the 3 year observation period. Methadone therapy or previous withdrawal experience had no impact on outcome.

Conclusions: High level of care drug abuse programs not only reaches a wide range of patients, but may show good treatment outcome independent of patients profile.

P55.03

Topiramate in multidrug withdrawal - comparison with clonidine

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The pharmacological profile of topiramate suggests it could be rather valuable for opiate withdrawal. In fact, there is some evidence that topiramate acts, among others, through inhibition of a-amino-3-hydroxy-5-methyl-4-isoxazole propionic acid (AMPA) receptors, which play an important role in the withdrawal-induced activation of the locus coeruleus (LC) by glutamate. Methods: Ten multidrug detoxification inpatients treated with a topiramate-protocol were compared to 10 patients treated with a clonidine-scheme and 10 patients treated with a carbamazepinemianserine protocol. Comedication, protocol deviations (dose augmentation or reduction) and retention in treatment were compared between groups.

Results: There were significantly less protocol deviations in the topiramate group compared to the other two groups. Topiramate treated patients were less often given antiemetics and sedative antipsychotic drugs. The retention in treatment was comparable between the 3 groups.

Conclusions: Topiramate is a well tolerated and seemingly efficient alternative to standard withdrawal treatments for multidrug users.

P55.04

Longitudinal study of psychiatric comorbidity in MDMA users

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Introduction: Prevalence and relationship between psychiatric comorbidity and MDMA use is not clearly established.

Objectives: To study, in a longitudinal case-control design, the prevalence of psychiatric disorders in a sample of MDMA users non-seeking treatment.

Subjects: Forty MDMA users non-seeking treatment and 48 matched controls.

Methods: All subjects were diagnosed (DSM-IV) in a blind manner with the validated Spanish version of a semi-structured interview specifically designed for substance abuse patients (PRISM, 1996)

Results at baseline evaluation:

- 1. Twenty-eight percent of cases had the diagnosis of MDMA abuse disorder and 13 % had MDMA dependence disorder. Most cases showed other substance use disorder (65% cannabis, 28% alcohol, 25% cocaine). Only 2% of alcohol abuse was found in controls.
- Thirty-two percent of cases had other psychiatric disorder non-related to substance use (affective 5%, anxiety 8%, eating 3%). Only 6% of controls had non-related to substance use psychiatric disorder (affective 2%, anxiety 2%, eating 2%).

Conclusions: MDMA users non-seeking treatment has a higher prevalence of psychiatric comorbidity than controls.

P55.05

Affective disorders and craving to drugs in heroin addiction

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Objectives: the affective disorders are the frequent psychopathology caused by drug abuse. Being a clinical manifestation an affective disturbances are frequently included into pathological pattern of craving to drugs.

Methods: 129 heroin addicts (99 men and 30 women) aged from 17 to 36 years old have been examined. Duration of drug misuse varied from 6 months to 6 years.

Results: in the first stage of withdrawal syndrome (5-7 days after the last heroin intake) affective disorders were accompanied by somato-vegetative and algesic symptoms. These disturbances become most prominent after cessation of acute withdrawal symptoms. There were predominant astheno-depressive, anxious and

dysphoric symptoms with behavioral difficulties in the structure of these disturbances. The aggravation of depression with the typical dysphoric features normally indicated to the actualization of pathological craving to the narcotics and needs the treatment. Considering the structure of affective disorders we preferred to administrate medications both with thymoleptic and sedative activity. Antidepressants were combined with mild neuroleptics.

Conclusions: clear association between severity of depressive disorders and intensity of craving to drugs was found. Administration of antidepressants is obligatory in the treatment of heroin addiction.

P55.06

Gambling co-morbidity in heroin addicts in MMT

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Goals: to evaluate co-morbidity for gambling in a group of heroin addicted patients (according to DSM IV criteria) in Methadone maintenance treatment (MMT) for more than 3 months.

Methods: we included all the patients in MMT in a defined week and we sent to all a letter in order to clarify the goals of the research and to collect their informed consent. We used SOGS – Gambling History Test (South Oaks Clinical Team by Lesieur & Blume – 1987) submitted by a trained professional.

Results:

-	roup roup > 3	715 594				
months Tested group		244	M 204		F 40	
<u> </u>	Score					
Group	Score 0–2	%	3-4		≥5	%

Conclusions: our study shows an interesting result about pathological gambling in this specific group of patients: 25% of these has a significant score (>2) at the SOGS-test. At the present it is quite difficult to compare our results because we do not know if exist any international data about co-morbidity for gambling in addicts.

These results however confirm that it is necessary to better understand the common patterns of different addictive behaviours and to investigate the several aspects of the addictions in every patient to manage them in the best way The mission of our Department clearly defines that every kind of addiction are to study and to treat; for the next future we are defining more focused studies on this problem and we are developing a specific clinical unit to treat pathological gambling.

P55.07

Gender differences among heroin users

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Background: Wide spread of heroin abuse in Russia in recent years makes it necessary to study and understand gender differences among heroin users.