

groups in utilizing the PROMs-DHI, offering a deeper understanding of their interactions and outcomes.

**Results:** It is expected that patients will perceive a positive effect of the usage of the PROMs-DHI, gaining insights into their progress, reinforcing communication with clinicians, and enhancing self-management. Clinicians are expected to find the PROMs-DHI beneficial for managing patient care, profiting from the ability to monitor patient outcomes in real-time, receive notifications when values exceed critical thresholds, and access detailed reporting tools to inform their treatment decisions. This would enable them to provide more targeted and effective care, ultimately leading to improved patient outcomes.

**Conclusions:** Implementing the PROMs-DHI in addiction care could facilitate outcome comparisons, guide service improvement, and ultimately increase the effectiveness and quality of interventions, contributing to a stronger and more sustained recovery for patients undergoing treatment. Providing patients with regular feedback on their outcomes may also have a therapeutic effect in itself, promoting self-awareness, motivation and empowerment to manage their recovery. Furthermore, PROMs can support health-care professionals in making well-informed treatment decisions that are tailored to each patient's needs, thereby strengthening the impact and sustainability of addiction interventions.

**Disclosure of Interest:** None Declared

## EPV0087

### Affective Disorder in Addictology -Salus Hospital

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#### Introduction: AFFECTIVE DISORDERS IN ADDICTOLOGY

In recent years, the number of substance users has increased globally. Referring to a study conducted in Albania by the Youth Risky Behavioral Survey, it results that: 5.4% of young people aged 14-18 have an experience with cannabis, 4% with ecstasy, 1.4% with heroin and 1.6% with cocaine. From the data published by Our World (2019) it results that the number of deaths from drug and alcohol consumption has doubled, especially in the last three decades. From studies it results that 50 thousand individuals in Albania (1.8% of the population are drug users.

From a 3-year study carried out in the Addictology pavilion at Salus Hospital, where a sample of 133 patients with addiction to substances was examined. It turned out that 118 people were men (88.7%) and 15 women (11.3%). Over 50% of patients are in the 18-33 age group and 40% are in the 30-40 age group. Referring to the place of residence, most of the patients are from Tirana and this is influenced by the number of the population (32% of the population of Albania). Education is another important data of this study as it turns out that more than 50% of them have a secondary education and only 1/3 of them have a higher education. Referring to the married/single status, the ratio is respectively 46.97/48.48%. After analyzing the years of abuse, from 1-5 years addiction constitute 29 % of the total, 6-10 years constitute 37 % and from 10-20 years constitute 21 %. If we refer to substances, it turns out that cocaine occupies 74% of the championship, followed by Cannabis, 14% and Alcohol, 12%. If we consider the psychiatric pathologies from which this study is referred, it turns out that Affective

Disorders make up the largest part with 69% of followed by Psychotic Disorder with 28% of patients. Over 50% of patients manifested symptoms similar to Bipolar Disorder and over 30% of them symptoms of an Unspecified Affective Disorder.

**Objectives:** Place occupied by mood disorders in addictology

**Methods:** Quantitative research

**Results:** Referring to the married/single status, the ratio is respectively 46.97/48.48%. After analyzing the years of abuse, from 1-5 years addiction constitute 29 % of the total, 6-10 years constitute 37 % and from 10-20 years constitute 21 %. If we refer to substances, it turns out that cocaine occupies 74% of the championship, followed by Cannabis, 14% and Alcohol, 12%. If we consider the psychiatric pathologies from which this study is referred, it turns out that Affective Disorders make up the largest part with 69% of followed by Psychotic Disorder with 28% of patients. Over 50% of patients manifested symptoms similar to Bipolar Disorder and over 30% of them symptoms of an Unspecified Affective Disorder

**Conclusions:** Affective Disorders make up the largest part with 69% of followed by Psychotic Disorder with 28% of patients. Over 50% of patients manifested symptoms similar to Bipolar Disorder and over 30% of them symptoms of an Unspecified Affective Disorder.

**Disclosure of Interest:** None Declared

## EPV0089

### Adverse Childhood Experiences, Gender Identity and Substance Misuse: Challenges in Addiction Psychiatry – A Case Report

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**Introduction:** Adverse Childhood Experiences, referring to potentially traumatic events such as sexual abuse, rejection, and family dysfunction, are strongly associated with the development of psychiatric disorders, including anxiety, depression, and substance misuse. Peer victimization related to sexual orientation and gender identity or expression has been linked to higher rates of depressive symptoms, disrupted educational paths, trauma, and increased use of substances such as alcohol and drugs. Gender-diverse youth are particularly vulnerable to substance misuse, especially in environments with limited support and prevalent discrimination.

**Objectives:** To emphasize the complex interactions between substance use, early trauma, and gender identity struggles, while highlighting the importance of a multidisciplinary therapeutic approach.

**Methods:** This case report was developed through detailed psychiatric interviews and assessments conducted during the patient's follow-up in an outpatient addiction treatment unit. The case description is supported by a focused literature review on PubMed using the keywords "Adverse Childhood Experiences", "Substance Use Disorder" and "Gender Identity".

**Results:** The patient is a young adult with a history of polysubstance use, starting in adolescence. His substance use was closely associated to early trauma, including childhood sexual abuse and rejection by family and peers after disclosing his sexual orientation.

These events led to dropping out of school, running away from home, and experiencing homelessness. As a result, he developed long-standing anxiety, depressive symptoms, and emotional instability. Internal struggles with gender identity, alongside ongoing familial conflict and unstable romantic relationships, further worsened his psychopathology. After a multidisciplinary intervention involving psychiatry, psychology, and social services, he showed significant improvements in emotional regulation, anxiety management and has remained abstinent since starting treatment. **Conclusions:** Personal experiences, especially during childhood and adolescence, profoundly influence mental health and behaviors in adulthood. This case underscores the interaction between adverse childhood experiences, substance misuse, and discrimination related to sexual orientation, illustrating how these factors collectively impact psychiatric health. The patient's journey through addiction, identity struggles, and mental health challenges reflects the deep influence of both personal trauma and systemic issues. This case highlights the need for multifaceted therapeutic approaches that address the psychological, social, and familial factors underlying the patient's condition.

**Disclosure of Interest:** None Declared

## EPV0090

### Needs and Barriers of Mental Health Professionals in Promoting Smoking Cessation

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**Introduction:** Various studies have shown that individuals with mental health disorders are significantly more likely to smoke compared to the general population. Additionally, they tend to exhibit more severe tobacco dependence. For these populations, smoking is associated with increased morbidity, mortality, and healthcare costs. Despite the significance of this issue and its impact on health, quality of life, and financial well-being, smoking cessation interventions are rarely implemented in mental health services.

**Objectives:** The STEN project (alleviate Stigma, Train, Enhance smoking cessation interventions, rely on a specialized Network), funded by the Tobacco Prevention Fund in Switzerland, aims to promote smoking cessation among individuals with mental health disorders. The project seeks to strengthen the competencies of mental health professionals, encourage the utilization of available resources, and shift healthcare professionals' beliefs about smoking in individuals with mental disorders.

**Methods:** The first phase of the STEN project focuses on identifying the needs and perceptions of mental health professionals regarding smoking cessation. This phase involves a qualitative opinion survey exploring the perceived barriers and needs related to treating tobacco dependence in people with mental health disorders. The survey was conducted through focus groups held between December 2023 and April 2024, involving about 80 professionals from various linguistic regions of Switzerland, representing different professional bodies and both private and public addiction and psychiatry services. Data collection was facilitated and standardized using a structured response document.

**Results:** The analysis of the focus group discussions revealed:

**Barriers:** The main barriers to implementing tobacco dependence treatment among mental health professionals included a lack of knowledge, the misconception that addressing tobacco use is not part of their mission, and false beliefs about patients' willingness to quit.

**Needs:** There is a strong interest among mental health professionals in digital training, accompanied by opportunities for practice-sharing.

**Conclusions:** This phase will culminate in the development of a training and digital support concept tailored to the needs and perceptions of mental health professionals in Switzerland.

**Disclosure of Interest:** None Declared

## EPV0091

### Evaluation of addiction interventions: follow up after discharge

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**Introduction:** Addiction treatments are complex, and their goals have changed over time. In the past, abstinence was the main objective. Nowadays, treatments focus on people and their recovery. They are developed to act in many areas of life, therefore appropriate measures are needed that really show the results achieved. One of the variables that has been shown to be appropriate for measuring the results of interventions is quality of life.

**Objectives:** Our main objective was to evaluate the results of the intervention carried out on people who have been discharged, with an instrument that includes data on quality of life. Another objective was to standardize the measurement of results, establishing reliable criteria that include the diversity of people in treatment for addictions.

**Methods:** A computer-assisted telephone survey was conducted, with 575 people, between May 2023 and June 2024. They had been for 3 or 6 months on therapeutic or voluntary discharge.

Criteria for therapeutic discharge, voluntary discharge, and abandonment were established. They included results in different areas: substance use, health and self-care, mental health, social/family integration and educational/work.

The World Health Organization Quality of Life BREF (WHOQOL BREF) questionnaire was used. Psychosocial and drug use questions were added to the evaluation.

**Results:** At discharge, around 75% of people considered that they were in better health than before starting treatment, 60% believed that their quality of life was good or very good, 72% considered that their life had a lot or some meaning and 75% maintained abstinence from the substance for which they were in treatment.

Regarding quality of life (WHOQOL BREF) in people with discharge from treatment, the domain with the lowest score was the one of personal relationships.

Opiate patients were the ones with the lowest scores, with physical health values being highlighted. In terms of gender, women scored worse than men, especially in psychological health.

**Conclusions:** The results obtained indicate that the biopsychosocial and interdisciplinary treatment of addictions at the Addictions Institute of Madrid City Council improves the overall quality of life