the Psychiatric Unit of Cesena Hospital for a reduction of Lormetazepam (previously consuming 80-100 mg/day), he was found to be taking 200 mg of levomethadone daily. This dosage is typically administered for pain management rather than as maintenance therapy for heroin dependence. Although the man was consistently consuming high doses of psychoactive medications, exceeding the ranges commonly reported in the literature, he did not exhibit significant adverse effects or signs of sedation during his hospital stay. This observation led us to consider the possibility of a genetic alteration in cytochrome enzymes that could enable ultra-rapid drug metabolism.

Methods: During the hospital stay, it was possible to safely reduce the benzodiazepine therapy by switching from oral lormetazepam to intravenous diazepam and subsequently to oral diazepam.The patient also underwent a pharmacogenetic test that analyzes the polymorphisms of 60 different enzymes using cells obtained from saliva.

Results: In the reported case, the use of L-Methadone has allowed over the years a full control of withdrawal symptoms and cravings from opioid drugs, a greater compliance with treatment and a lower risk of general and cardiological side effects than racemic methadone administered in equivalent therapeutic doses in past years.

It has also been made possible, through in-patient treatment, to carry out a progressive withdrawal from Lormetazepam in total safety.

Pharmacogenetic testing targeting CYP3A4 and CYP2B6 enzymes did not reveal significant alterations, contradicting our initial hypothesis.

Conclusions: The originality of this case is basically due to the lack in the literature about clinical cases treated with such a high dose of Levomethadone (200 mg/day) as substitution therapy for opioid addiction and to the investigation of the salivary pharmacogenetic testing to eventually support the hypothesis that the patient could be a rapid or ultrarapid metabolizer.

Moreover, we have sought to clarify the correct use of levomethadone in individuals at high risk of death due to conditions that may increase the risk of Torsades de Pointes.

The pharmacogenetic analysis excluded rapid metabolism, suggesting a role for P-glycoprotein (PGP) in influencing the absorption of methadone and the variability of plasma concentration.

Disclosure of Interest: None Declared

EPV0109

Injectables and implants in consideration of opioid use disorder treatment: Patient perspectives from India

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Introduction: Implants and injectable medications have been utilized frequently in the treatment of opioid use disorder, along with other treatment approaches like orally consumed opioid agonist treatment or antagonist treatment, and psychotherapeutic interventions. The overall use of implants and injectable medications in the Indian healthcare landscape is low.

Objectives: The study aimed to assess the acceptability of implants and injectable among treatment options among patients with opioid use disorders.

Methods: A cross sectional survey was conducted among patients with opioid use disorders. They were shown a pre-recorded video explaining the various treatment options for opioid use disorder, and their acceptability of treatment was recorded.

Results: Among the 150 included patients, 26 (17.3%) were willing for naltrexone depots, 11 (7.3%) were willing for naltrexone implants, and 10 (6.7%) were willing for buprenorphine injection. Compared to this, patients were more willing for buprenorphine sublingual (n = 105, 70%), tramadol oral (n = 89, 59.3%), and naltrexone oral (n = 43, 28.7%) formulations. Willingness for counselling or psychotherapy was expressed by 34 patients (22.7%), and for engagement with narcotics anonymous by 20 patients (13.3%).

Conclusions: While implants and injectable may be a viable option for many patients with opioid use disorder, it may have limited acceptability among the range of therapeutic options available. Collaborative decision making may be useful considering patient's preferences for aligning goals of treatment team and the patient.

Disclosure of Interest: None Declared

EPV0110

Screening for smoking and chronic obstructive pulmonary disease among employees of an electricity and gas company

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Introduction: Chronic obstructive pulmonary disease (COPD) is a common and under-diagnosed disease. Screening for this disease and assessing smoking behaviour are essential to tobacco control measures.

Objectives: Our study aims to screen for smoking and COPD among employees of an electricity and gas company.

Methods: We conducted a descriptive, analytical, cross-sectional survey to screen for smoking and COPD among employees of an electricity and gas company. The survey was carried out during a COPD screening day, using a two-part questionnaire. Nicotine dependence was assessed using the Fagerström test. COPD screening was carried out using a COPD screening self-questionnaire from the French National Authority for Health.

Results: Our population comprised 28 male participants. Active smoking was reported by 87.7% of participants. Nicotine dependence assessed by the Fagerström test was moderate to high in 54.7% of smokers. We found that 11 participants (39.2%), were identified as being "at risk" of developing COPD. Bivariate analysis showed that the COPD self-screening questionnaire score was associated with smoking and nicotine dependence.

Conclusions: COPD and smoking among workers are prevalent in the electricity and gas company. Through this awareness-raising day, an action plan had prioritized anti-smoking programs directed

at smoking employees to ensure their comprehensive care and prevent the onset of COPD.

Disclosure of Interest: None Declared

EPV0111

The effect of chronic obstructive pulmonary disease on quality of life in smoking electrical technicians

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Introduction: Chronic obstructive pulmonary disease (COPD) is an under-diagnosed disease. Screening for this disease, assessing quality of life and combating smoking are key factors in the overall management of this pathology.
Objectives: Our study aims to assess the effect of COPD on quality of life in smoking electrical technicians and their motivation to quit smoking.
Methods: We conducted a descriptive, analytical, cross-sectional survey to assess the impact of COPD on quality of life among smoking electrical technicians and their motivation to quit smoking. A questionnaire was administered during a COPD screening day. Smoking cessation motivation was assessed using the Richmond questionnaire. COPD screening was carried out using COPD screening self-questionnaire from the French National Authority for Health. The COPD Assessment Test (CAT) was used to determine the presence and severity of respiratory symptoms.
Results: Our population comprised 24 male smokers. Motivation to quit smoking was low in half of the participants. Eleven participants (45.8%) were identified as being "at risk" of developing COPD. Cough, sputum and chest tightness were more frequent in participants at risk of developing COPD than in those not at risk, with a significant difference. The mean CAT score in participants at risk of developing COPD was 12.2 ± 9.7. The impact on quality of life in participants at risk of developing COPD was low and moderate to high in 45.5% and 54.6% of participants respectively. Bivariate analysis showed that motivation to quit smoking was not correlated with either the COPD self-screening score or participants' quality of life.
Conclusions: COPD impairs the quality of life of workers at the electricity and gas company. Training sessions on breathing and anti-smoking actions in the electricity and gas company must be directed towards smoking employees by ensuring comprehensive management will serve to prevent the onset of COPD.

Disclosure of Interest: None Declared

EPV0112

Smoking and job satisfaction among electrical technicians

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Introduction: To ensure the health of employees, maintaining a smoke-free workplace is essential. Understanding the relationship between smoking and work is crucial for implementing effective smoking cessation interventions.
Objectives: Our study aims to determine the prevalence of smoking and its relationship with job satisfaction among electrical technicians.
Methods: We conducted a descriptive, analytical and cross-sectional survey among electrical technicians. Data collection was carried out using a self-completed questionnaire. We collected socio-professional data. Nicotine dependence was assessed using the Fagerström test, while job satisfaction was evaluated using the single-item measure of job satisfaction.
Results: Our study population was exclusively male, including 70 electrical technicians. The mean age of participants was 38.1 ±10.2 years. The mean of the tenure of job was 14.5±11.1 years. Active smoking was reported by 45.1% of participants. Using the Fagerström test, nicotine dependence was low and moderate to high respectively in 13.4% and 28.9% of smokers. Median job satisfaction was 4, with extreme values ranging from 1 to 5. We found that nicotine dependence was negatively correlated with job satisfaction ($p = 0.02$, $r = -0.3$).
Conclusions: Smoking is a prevalent issue among electrical technicians. Our findings highlight the urgent need for smoking cessation interventions among these workers. The association of smoking with low job satisfaction underscores the importance of preventive measures to reduce work-related stress in order to promote greater job satisfaction and smoking cessation.

Disclosure of Interest: None Declared

EPV0114

Pathological Gambling: A Neurobiological Approach Through a Literature Review

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Introduction: Gambling is an increasingly widespread practice worldwide. Currently, gambling disorder (also known as pathological gambling) is recognized as a behavioral addiction in the DSM-5 due to its numerous similarities with substance addiction. Consequently, several neurobiological hypotheses have been tested in recent years.
Objectives: To illustrate, through a literature review, the neurobiological basis of pathological gambling.
Methods: We conducted a systematic review of the literature in the "PubMed" database, following PRISMA guidelines, using the following keywords: "Neurobiology," "Gambling Disorder," "Pathological Gambling," and "Gambling."