

Introduction: Substance abuse has traditionally been considered as a disease of men. Women were believed to have some kind of immunity in terms of “social inoculation”. However, due to change in societal norms and beliefs, substance use is currently increasing among women also.

Objectives: To focus on female substance use in India

Methods: In India, traditional use of various substances by women during religious festivals is not unknown. Chewing tobacco is a common practice among many women across the country. Cultural use of alcohol has been known in some tribal populations but gradually the use is increasing. There is major difference in pattern of male and female substance use including initiation, progression, recovery and relapse. Women experience greater medical, physiological and psychological impairment and experience loss of control sooner than males. Treatment needs of female substance users is different and requires a gender specific comprehensive strategy which will require medical services, mental health services, services for family and child and employment opportunities.

Results: Currently, there is no Indian policy for women substance use. However, Government of India has started a convergence program which includes National AIDS Control program (NACP), National rural health mission (NRHM) and reproductive or sexually transmitted infection (RTI/STI) to combat some aspects.

Conclusions: India is in great need of a policy or at least a standard operative protocol for management of female substance use disorder which may include screening for substance use disorder for all females accessing health sector, counselling, referral to addiction services, formation of a treating team and after –care.

Disclosure: No significant relationships.

Keywords: women; Substance use; india; need

EPV0665

Telephone interviews among a cohort of gambling patients at the time of COVID-19

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Introduction: Background: Little is known about the modifications in gambling patterns during the Covid-19 pandemic, which has shown signs of increase, particularly for individuals with preexisting gambling problems.

Objectives: Our aim was to assess the behaviour of a cohort of patients in the Trentino Region.

Methods: A semi structured questionnaire containing Hamilton Depression Rating Scale as well as open-ended questions on gambling activities, specifically online gambling, was administered over the telephone. The survey was administered for two months over the lockdown period (april-june 2020) and took approximately 20 minutes to complete.

Results: About 50 responses were collected. Data are currently been analyzed and will be available at the time of the Congress.

Conclusions: Will be shown at the time of the Congress.

Disclosure: No significant relationships.

Keywords: Gambling; lockdown; Survey; COVID-19

EPV0667

Analysis of risk factors in patients with alcohol delirium who have been treated at the riga psychiatry and narcology center in 2018

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Introduction: Alcohol abuse can be the cause for psychotic disorders. In the International Classification of Diseases (ICD10) they are coded F10.4-F10.9. One of the potentially life-threatening complications is the development of alcohol delirium. Mortality rates in patients with untreated alcohol delirium reach 15%. It is extremely important to identify the risk factors that contribute to the development of delirium in time to ensure the most effective treatment and to ensure the patient's potential survival in the hospitalization and post-hospitalization phase.

Objectives: To analyze and evaluate the risk factors that have caused alcohol withdrawal with the development of delirium in patients admitted at the department of Narcology of the Riga Psychiatry and Narcology Center in 2018.

Methods: This study is a retrospectively conducted cohort study based on data from inpatient medical records for patients diagnosed with alcohol-induced delirium at the Department of Narcology of the Riga Psychiatry and Narcology Center in Year 2018.

Results: In the Riga Psychiatry and Narcology Center 113 patients were diagnosed alcohol caused delirium. That makes up to 8% of all inpatients in year 2018. Summary of the prevalence of the most significant risk factors in 2018 inpatients with alcohol delirium.

High levels of aspartate aminotransferase	95%
Tachycardia	76%
High levels of alanine aminotransferase	54%
Low platelet count	51%
High systolic blood pressure	50%
High diastolic blood pressure	46%
Other somatic diseases	45%
Previous history of detoxification	37%
History of alcohol-induced seizures	13%

Conclusions: The study indicated that some easily determined parameters are potential clinical predictors for the development of delirium tremens.

Disclosure: No significant relationships.

Keywords: delirium tremens; Predictors; alcoholism; alcohol withdrawal

EPV0669

Stigmatization as a barrier in opioid substitution therapy patients

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Introduction: Goffman defined stigma as an “attribute that is deeply discrediting” and in the last two decades research on this subject grew substantially. Opioids were ranked as the second most common form of illicit drug used worldwide and there is consensus in the literature that opioid substitution therapy (OST), methadone or buprenorphine, are the most effective treatments, although remain underutilized. People with an history of substance use disorders (SUD) are widely stigmatized, a significant barrier to detection and treatment efforts. Care workers were cited as the second most common source of stigma.

Objectives: The aim is to do a review of the literature of stigma as a significant barrier to OST and present several potential strategies to reduce stigma.

Methods: Non-systematic review of the literature with selection of scientific articles published in the last 5 years; by searching the Pubmed and Medscape databases using the combination of MeSH descriptors. The following MeSH terms were used: Opioid Use Disorder; Stigma; Opioid Substitution Therapy

Results: OST providers should actively bring up the topic of stigma in clinic appointments to determine whether the patient is experiencing stigma, and if so, whether it is adversely affecting their ability to continue in the treatment. More active measures need to be taken to help reducing the stigma through public awareness campaigns at local levels, continuing education of health care providers regarding substance OST, and greater incorporation of family members into the program.

Conclusions: In conclusion, further research is required to understand and address this issue.

Disclosure: No significant relationships.

Keywords: methadone; opioid use disorder; Stigma; opioid substitution therapy

EPV0671

Oneiroid catatonia due to the usage of spice: The case study

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Introduction: Designer drugs, as a term, first came about in the 1980s. Most of these “designer drugs” have synthetic cannabinoids and other psychoactive formulas difficulty to detect.

Objectives: A 28 year man was referred to the hospital.

Methods: CT brain and EEG were also normal.

Results: Among 7 days before attending the hospital the patient had a strange behaviour. He was staying like in changed reality. The day before admission he got irritable in the evening was reporting that he could hear animal’s imperative voices “we together with squirrel, dolphin visited giraffe, that someone told to jump from the window”. That symptoms were temporary after that he was shocked when realized that he was in a room. The patient has the history of marihuana use in the past 5 years, periodically. There is no evidence data about the usage of other narcotic substances. On examination he was alert, sitting on a same place looking at one point, sometimes trying to find something or suddenly standing and trying to go somewhere. He has a change of catatonic stupor and excitement. The psychomotor activity was changeable. While observing the patient during few days several times he disrobed all his clothes, staying or laying on a bed or suddenly freezing in one pose.

Conclusions: Taking into account clinical symptoms, the patient developed, the conclusion was made about connection of patients’ oneiroid catatonia with the usage of “Spice” or “Designer drug”. Thus, designer drugs may sound like a safer alternative, but often can lead to serious mental disturbances.

Disclosure: No significant relationships.

Keywords: Designer drugs; oneiroid catatonia; synthetic cannabinoids

EPV0672

Emotional disorder dynamics for patients depending on psychoactive substances at the stages of psychosocial rehabilitation

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Introduction: Objective laws of emotional disorder formation, their frequency along with clinic and psychopathological structure have been poorly studied until now. 3 groups of patients have been observed: 200 people with alcohol addiction, 180 people with opioid addiction, and 90 people with psychostimulant addiction.

Objectives: All these have influenced our research which goal is to study patients’ emotional state at the stages of psychosocial rehabilitation.

Methods: Signs of psychological and physical addiction, specific personality disorders and decrease in social functioning level have been found for all of the observed patients. Psychodiagnostic research (performed according to Hamilton, Spielberger and Hanin, Buss-Durkee methods) has shown significant increase of depression and anxiety parameters, as well as aggression level for all the patients.