

EPV0684

Risk and protective factors for opioid overdose during the COVID-19 pandemic

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Introduction: People who use drugs (PWUD) are now at the intersection of two public health emergencies – the Covid-19 pandemic and the overdose crisis. They may be at heightened risk of overdose due to increased isolation, worsened mental health, and changes to the illicit drug supply. The province of British Columbia (BC) in Canada is anticipated to experience a record-breaking year of overdose deaths as over 1,500 people (32.9 deaths per 100,000) have died from overdose in 2020. In response, BC released new clinical guidelines in March to allow the prescribing of pharmaceutical alternatives aiming to reduce PWUD's risk of overdose and contracting Covid-19.

Objectives: We examined the risk and protective factors for overdose during these dual crises. We explored how the Covid-19 pandemic has impacted the mental health and substance use of PWUD and their access to treatment and harm reduction services.

Methods: We are conducting a survey among patients with opioid use disorder at a major hospital in Vancouver, BC. It includes the following domains: sociodemographic characteristics; mental and physical health; substance use patterns; opioid overdose history; access to treatment, harm reduction services; impacts of Covid-19.

Results: We anticipate collecting data from 200 participants. Descriptive statistics and regression analysis will be conducted to describe the sample and determine the risk, protective factors for overdose.

Conclusions: We will gain a better understanding of overdose risk in PWUD who are now navigating the complex challenges created by the dual crises. This will in turn inform the establishment of evidence-based strategies to reduce their overdose risk.

Disclosure: No significant relationships.

Keywords: opioid overdose; COVID-19; safe supply; opioid overdose crisis

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Systematic review about the screening of cannabis use during pregnancy and neonates

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Introduction: Cannabis use in pregnancy is related to developmental and mental disorders. The acknowledgement of prenatal

exposure frequently depends on the mother's report, which can often be omitted. There exists little bibliography of the different methods to detect the use of cannabis during pregnancy, with no standardized screening available.

Objectives: The objective of this study is to review the available bibliography about screening of cannabis use during pregnancy and neonates and to analyze the different methods of prenatal screening being used in clinical practice.

Methods: A systematic review of the methods of screening of cannabis use during pregnancy and neonates was carried out in PubMed (July 2020) in English, French and Spanish (10 years) with the keywords: screening, test, detection, analysis, urine, blood, hair, meconium. 107 studies were analyzed: 52 included and 55 excluded (Figure 1.).

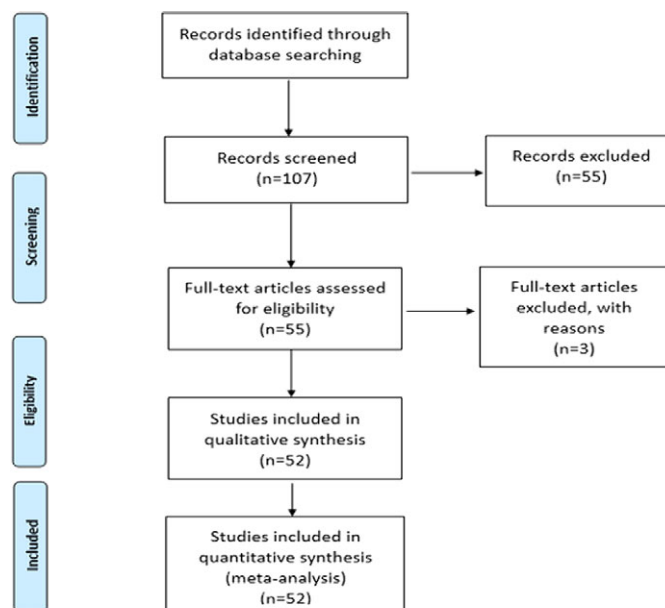


Figure 1. Flow Diagram

Results: The studies analyzed stand out for its large heterogeneity. Self-report of pregnant women, meconium and maternal urine analysis are used the most. The type of analysis technique is not reported or chromatography mass spectrometry (GC/MS) and enzyme-linked immunoabsorbent assay (ELISA) is used (Figure 2.). Urine seems to be the most accurate method for maternal testing. Neonatal meconium and umbilical cord tissue indicates fetal exposure during second and third trimester, neonatal hair third trimester exposure and maternal serum and hair can also be used (Figure 3.).

Study	Sample	Analysis technique	Cannabis type
<ul style="list-style-type: none"> • 2 Cross-sectional study • 30 Cohort study • 8 Case series • 2 Randomized controlled trial • 9 Not specified 	<ul style="list-style-type: none"> • 15 Self Report • 30 Maternal Urine • 5 Maternal Serum • 8 Maternal hair • 7 Cord tissue • 18 Meconium • 5 Neonatal hair • 5 Other 	<ul style="list-style-type: none"> • 2 Cleanup pretreatment • 13 GC/MS • 10 ELISA • 7 LC-MS/MS • 3 Other • 27 Not specified 	<ul style="list-style-type: none"> • 6 of 11 nor-Δ9-THC-9-carboxylic acid • 3 of 11 hydroxy-9-THC • 11THC • 2 Cannabinol • 2 Cannabidiol • 35 Not specified

Figure 2. Number of studies which collect the available data

*Provisional results

METHOD	POSITIVE RESULT	LIMITATIONS	ADVANTAGES
SELF REPORT		<ul style="list-style-type: none"> Lack of agreement between answers and urine test results 	
MATERNAL URINE	Chronic use= weeks Occasional use= 2-3 days	<ul style="list-style-type: none"> Chronicity of use determines duration of positive result 	<ul style="list-style-type: none"> Low cost No invasive method
MATERNAL SERUM	Chronic use= weeks Occasional use= 2-3 days	<ul style="list-style-type: none"> Chronicity of use determines duration of positive result Invasive method 	<ul style="list-style-type: none"> Easily collected No invasive method
MATERNAL HAIR	Several weeks	<ul style="list-style-type: none"> Expensive method Less accurate for marijuana than other drugs 	<ul style="list-style-type: none"> Easily collected No invasive method
CORD TISSUE	From 20 week of gestation exposure	<ul style="list-style-type: none"> Less studies than other methods 	<ul style="list-style-type: none"> More rapidly available than meconium
MECONIUM	Second-third trimester exposure	<ul style="list-style-type: none"> 43% of false positives Expensive method Delay in results 	<ul style="list-style-type: none"> 100% concordance with results of urine test Gold standard
NEONATAL HAIR	Third trimester	<ul style="list-style-type: none"> Expensive method Less sensitive than meconium 	<ul style="list-style-type: none"> Easily collected No invasive method

Figure 3. Types of samples

Conclusions: Nowadays, the available bibliography is heterogeneous and lacks information. Consequentially, further investigation needs to be carried out in order as to establish standardized prenatal screening of cannabis during pregnancy to draw more comparable and precise conclusions.

Disclosure: No significant relationships.

Keywords: neonates; Screening; Cannabis; pregnancy

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Food addiction in a large non-clinical sample of Canadians

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Introduction: The concept of food addiction emerged recently due to the similarities between food overconsumption patterns and addictive drugs. This concept is not yet included into ICD or DSM as it still needs to be further investigated. Relationship between obesity and food consumption as well as the psychological indicators of food addiction are of particular interest.

Objectives: To examine the prevalence of food addiction and its relationship to obesity, quality of life and multiple indicators of impulsivity.

Methods: Cross-sectional in-person assessment of 1432 community adults (age 38.93+/-13.7; 58% female). Measurements: Yale Food Addiction Scale 2.0, anthropometrics, body composition, World Health Organization Quality of Life scale, and impulsivity measures including impulsive personality traits, delay discounting, and behavioral inhibition.

Results: The prevalence of food addiction was 9.3% and substantially below that of obesity (32.7%). Food addiction was more prevalent among obese individuals and also was associated with higher BMI among non-obese participants. It was associated with significantly lower quality of life in all domains, and significantly higher impulsive personality traits, particularly negative and positive urgency.

Conclusions: In this general community sample, food addiction was present in slightly fewer than 1 in 10 individuals, approximately one-third the prevalence of obesity, but notably the food addiction has been mostly represented within the subsample of obese individuals. Food addiction was robustly associated with substantively lower quality of life and elevations in impulsivity, particularly in deficits in emotional regulation. These data suggest food addiction may be thought of as a subtype of obesity and, in non-obese individuals, possibly a prodrome.

Disclosure: No significant relationships.

Keywords: quality of life; Impulsivity; food addiction; obesity

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Description of the consumption of toxics in patients with assertive community treatment and prolonged release treatment

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Introduction: The Assertive Community Treatment (ACT) was developed by Leonard Stein and Mary Ann. The objective is the treatment of serious Mental Disorders in an integral way and in the community.

Objectives: The Assertive Community Treatment (ACT) was developed by Leonard Stein and Mary Ann. The objective is the treatment of serious Mental Disorders in an integral way and in the community.

Methods: This is a retrospective study with a total of 69 patients whose main diagnosis is Schizophrenia undergoing CT follow-up in 2018-2019. The data obtained have been analyzed by the SPSS statistical program.

Results: Our sample is mainly composed of men (60.9%) with an average age of 48 years (+ - 11.56). The main diagnosis is schizophrenia (62.3%) and the most commonly used long-term injectable treatment is paliperidone palmitate with a dose range of 150mg. Of the total number of patients, 29% of the cases did not maintain active use of any toxic, and the most commonly used toxic is tobacco (49.3% of cases).

Conclusions: The inclusion of patients in a ACT program requires a diagnosis of severe Mental Disorder and poor therapeutic adherence. After analyzing our data, we observed that most of them also have active toxic consumption and high doses of psychotropic drugs.

Disclosure: No significant relationships.

Keywords: severe mental disorder; ACT; drugs; schizophrenia

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Substance use disorders in adolescence - a review

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