

addicts — in Bulgaria (Sofia) and in London. Three scales created by D.Simpson were used to obtain personal assessment of: Drug Use Problems, Desire for Help, and Treatment Readiness. Data was collected from a total of 60 patients newly attending to outpatient methadone maintenance treatment agencies (30 in Bulgaria and 30 in London). Considerable differences in patient's motivations for seeking methadone maintenance treatment, and their expectations from it were found between the two groups. Such differences could be interpreted as resulting from the lack of previous experience and reliable knowledge about methadone treatment among drug users in Bulgaria, where the first methadone maintenance programme started in the end of 1995, while this approach is well known to the drug users population in UK.

AN INTEGRATIVE RELAPSE PREVENTION PROGRAM FOR ALCOHOLICS

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Alongside of new results on pharmacological relapse prevention in alcoholism a number of relapse prevention programs are described in the literature, but only few are empirically tested. For physical fitness programs, a power motivation training, behavioural and cognitive interventions there are some hints for being effective [1,2]. This contribution reports an integrative inpatient relapse prevention program with behavioural, cognitive and meditative components. Two groups of inpatient treated alcoholics (N = 21; standard treatment plus relapse prevention program; standard treatment only) had been compared in an experimental pre-post design. The relapse prevention program group showed an increase of self-efficacy and a decrease of hopelessness. No differences had been found in treatment motivation and effectiveness of coping behaviour. Six month after discharge from inpatient treatment the relapse rate of the experimental group was lower compared to the standard treatment group. It is concluded that relapse prevention programs need several components for effective and protection of abstinence.

- [1] Körkel, J. & Lauer, G. (1995). Rückfälle Alkoholabhängiger: Ein Überblick über neuere Forschungsergebnisse und -trends. In J. Körkel, G. Lauer & R. Scheller (Hrsg.), *Sucht und Rückfall. Brennpunkte deutscher Rückfallforschung* (S. 158–185). Stuttgart: Enke.
- [2] Lauer, G. (1992). Interventionsstudien zur Rückfallprophylaxe: Ergebnisse und Probleme. In J. Körkel (Hrsg.), *Der Rückfall des Suchtkranken. Flucht in die Sucht?* (S. 217–137, 1. Nachdruck). Berlin: Springer.

ART-PSYCHOTHERAPY IN DRUG-ADDICTION

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Many drug-addicted patients exhibit hypersensitivity to visual impressions and *regressive Ego-functions*, sometimes associated with a capacity for profound *symbolic experiences* and their *abstract pictorial expression*.

Ideas, images and emotions are blended in a process which is experienced as a *new autognosis*, a *transformation of the Self*, through philosophical enlightenment, culminating in 'mystic union'.

A symbolic plane of experience enlarges the '*individual-personal*' into '*personal-individual*' by leading to more and more eminent connections and universal formations. In this way the liberated spirit is qualified to realize '*auto-therapeutic effect*'.

During Art-psychotherapy we distinguished the following stages:

- *Personality dissociation*: with realistic and grotesque graphic presentations of morbid and symbolic experiences.
- *Self-identification*: with abstract and symbolic graphic presentations of realistic experiences and conflicts.
- *Ego-reintegration*: with realistic graphic presentations of realis-

tic experiences, wishes and feelings, after the patient's amelioration.

Thus, *Art-psychotherapy* is considered as the combination and the correlation between *Art-therapy* (nonverbal psychotherapy) and *Psychoanalysis* (verbal psychotherapy).

METHADONE VERSUS INTRAVENOUS OPIATE ADDICTION: THE EVALUATION OF A SUBSTITUTION PROGRAMME

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The main reasons for establishing an oral methadone substitution programme are always based on the intention of improving physical and social conditions of drug addicts. Disregarding the problems due to HIV-infection, the somatic status of intravenous opiate addicts is primarily influenced by the drug itself and the high frequency of infectious diseases. Besides this, numerous additional behavior patterns influence the physical health of i.v. drug addicts: frequent intoxications, needle sharing, irregular food intake, promiscuitive behavior, lack of hygiene etc.

Social impairment of i.v. drug addicts is mostly reflected by a bad status of education, frequent unemployment, a poor situation of housing, frequent financial problems and a high frequency of imprisonment etc.

Evaluation of an oral methadone substitution programme was done by the comparison of patients included in this programme versus i.v. opiate addicts. 49 patients have been included into this study, 20 of which were intravenous heroine users and 29 received oral methadone substitution for at least 7 month. Physical status was determined by the following parameters: immuno-globulines, Beta 2-microglobuline, neopterin, soluble IL-2-receptor, T-lymphocytes including subsets, hepatitis serology, liver transaminases. Social status was evaluated by parameters such as level of education unemployment and frequency of delinquency etc. The inclusion criteria for all patients were a negative HIV test in the last two weeks before the immunological investigation and good physical health on the day they had blood drawn.

Surprisingly the three groups did not show any statistical differences when comparing the above mentioned somatic parameters. Referring to the social parameters, social integration was significantly worse in the heroine addicted group compared to the methadone substituted group. Most remarkable differences could be shown in the status of employment and frequency of delinquency ($p < 0.01$).

ALCOHOL USE AND ABUSE AMONG REFUGEES

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The aim of this study was to investigate the consumption of alcoholic beverages among refugees and to determine the causes of such behavior and of the disturbances connected with it.

To achieve this aim, we have examined the group of 46 male refugees, and compared their results to the control group. The results have shown that refugees have more frequently consumed the alcoholic beverages compared to the control group, what was determined at the level of statistical significance ($p < 0.01$), and that among them the alcohol dependency was diagnosed more often.

The most frequent reason for drinking among refugees were anxiety (41.4%) and fear (28.3%) as a consequence of previously more frequent exposure to the stressful situations compared to the control group ($p < 0.01$).

The results stress the problem of drinking the alcoholic beverages