



Available online at
ScienceDirect
www.sciencedirect.com

Elsevier Masson France
EM|consulte
www.em-consulte.com/en



24th European Congress of Psychiatry e-Poster viewing

Addictive behaviours

EV01

Efficacy of nalmefene in a sample of patients with alcohol dependence

J.A. Aguado Mañas^{1,*}, O. Segurado²

¹ Centro Hospitalario Benito Menni, Psychiatry, Valladolid, Spain

² Hospital Universitario Rio Hortega, Psychiatry, Valladolid, Spain

* Corresponding author.

Introduction It is well known the high rate of alcohol abuse and dependence in Spain. Specifically, in Castilla and León as a wine region, the risk of developing alcoholism is 1 of 10 men and 1 of 15 women [1].

Objective The aim of the study is to assess the efficacy of nalmefene in reducing alcohol consumption and its complications, in a sample of patients with alcoholism.

Materials and methods It is an open, naturalistic, observational and descriptive study in a sample of 18 patients with alcohol dependence diagnosis.

We collected standard demographic variables, but also living alone, social support and work.

In addition, clinical variables as SD (standard drinks) per day, time of illness, concomitant diseases, number of admissions, periods of abstinence, abstinence longer duration, nalmefene doses and other treatments were collected. These variables were reassessed at first, 3th and 6th month.

Results In our sample the average profile is a man (75%) with an age of 46, who lives alone (68%), in urban area and with poor social support.

Average SD consumed at the beginning was 53, one month later was 26, after three months was 14 and 6 months later was 5, with a total abstinence rate of 65% at the end of the period. Logically there was also a dramatic reduction in somatic and social complications.

Conclusions Nalmefene is demonstrated as a useful drug in reducing alcohol consumption and its complications.

Nalmefene also proves to be effective for achieving complete alcohol abstinence starting with a reduction plan.

Reference not available.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.986>

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.987>

EV02

Prevalence rate, demographic and clinical predictors of substance use disorders in emergency room psychiatric patients of a tertiary hospital in Canada

V. Agyapong^{1,*}, M. Juhas²

¹ Department of Psychiatry, Fort McMurray, University of Alberta, Canada

² Department of Psychiatry, Edmonton, University of Alberta, Canada

* Corresponding author.

Background There is only a limited body of literature which has examined the factors which can predict the presence of substance use disorders (SUD) in psychiatric patients seeking emergency room (ER) treatment.

Objective To examine the factors that can predict the likelihood that a patient presenting to the emergency room and referred to the liaison psychiatric team will suffer from a SUD.

Methods Nineteen independent demographic and clinical factors from data assessment tools for 477 patients assessed by the liaison psychiatric team in the ER over 12 months were compiled and analysed using univariate analyses and logistic regression in SPSS (version 20).

Results The 12-month prevalence rate of all SUDs in our clinical sample was 24.7%. Patients who presented to the ER with a chief alcohol and/or drug related complaint (withdrawal or intoxication) were 142 times more likely to fulfill the diagnostic criteria for SUD compared to those who presented with non-SUD related complaints. Male patients or patients with forensic history were both three times more likely to suffer from SUD than female patients or patients with no forensic history, respectively.

Conclusion There is a high prevalence of SUDs among psychiatric patients assessed in the ER. In addition to targeting patients who present to the ER with an alcohol or drug withdrawal/intoxication for brief psycho-educational interventions and referrals to addiction treatment services, patients with forensic history and male patients should be targeted for SUD screening.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2016.01.987>