

The sample were 60 males, >1 year heroin addiction, currently receiving stable substitute medication (no opiate use for 2 weeks minimum).

Preliminary results are presented.

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What predicts illicit drug use and drug offending? The Finnish 'from a boy to a man' follow-up study

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Background and aims: Involvement with illicit drugs among young people has been explained by a risk-factor matrix. This study aims to compare childhood psychopathology as a predictor between self-reported illicit drug use without registered drug offending and police informed drug offending among males in a prospective birth cohort study.

Methods: A general population sample of 2946 8-year-old Finnish boys was followed up from age 8 to 18. In 1989, childhood psychopathology was assessed using the Rutter scale and Child Depression inventory. Information about self-reported drug use at age 18 or police-registered drug offending during years 16 to 20 years was collected from 79.3% (n=2336) of the subjects.

Results: Childhood psychopathology predicted exclusively police registered drug offending. After adjusting for family background, both severe and moderate conduct problems and ADHD symptoms were associated with subsequent police-registered drug offence. Self-reported illicit drug use was predicted only by non-intact family structure.

Conclusions: Our results demonstrate a clear difference, occurring already in childhood, between young men with self reported illicit drug use and those with police registered drug offending. More severe illicit drug involvement, such as police-registered drug offending, is a continuum of a childhood externalizing problem behaviour, while self-reported occasional illicit drug use does not inevitably associate with psychopathological problems in childhood. Accordingly, the preventive needs and the age period for intervention may be dissimilar for young people with divergent involvement with illicit drugs.

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Verbal working memory and executive dysfunctions in patients with alcohol addiction

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Cognitive dysfunctions connected with prefrontal cortex activity occurred as an significant factors in clinical picture of alcohol dependence. The aim of this study was to assess verbal working memory and executive dysfunctions in patients with alcohol addiction.

102 patients (77 male and 25 female) aged 21-58 (mean 43±9) years participated in this study. Neuropsychological assessment included: Stroop Color Word Interference Test (RCNb - reading color

names in black, NCWd -naming color of word-different) and Wisconsin Card Sorting Test. In 51 subjects assessment was performed one week after discontinuation of alcohol drinking and in next 51 subjects after at least one-year of abstinence. The control group consisted with 30 healthy persons matched with age, gender and education for experimental group.

Investigated patients showed significant impairments on performance on Stroop Test and WCST compared to healthy persons. Difference were observed between patients with short-term and long-term abstinence on the performance on WCST N-P which is mostly connected with attention and Stroop - NCWd connected with conflict monitoring functions.

The results on Stroop Test correlated with the number on correct completed category (related to efficiency of thinking) on WCST in patients with short-term abstinence and with % of conceptual responses (ability to utilize new information and previous experiences) in healthy controls.

These results may indicate significant role on conflict monitoring functions measured by Stroop Test, connected with posterior cingulate cortex activity in executive functions assessed by WCST in patients with alcohol dependence and healthy controls.

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Addiction and depression diseases in primary families of young women dependents of several psychoactive substances

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Background and aims: The investigation of the dependence of young women on psychoactive substances has revealed that it originates from dysfunctional families where parents are inclined to alcoholism, depression and other psychiatric diseases. The aim of our investigation is to determine the frequency of these disorders and diseases in parents, as well as in siblings.

Method: The data used in the analysis derives from medical documentation. Twelve families from the rehabilitation group that were treated from January 2003 until June 2006 were investigated.

Results: Seven patients live in an entire primary family. The mothers of patients are 45 - 58 years of age. The mothers of 2 patients were treated from depression with psychotic symptoms, and the mother of 1 patient was treated against depression without psychotic symptoms. Fathers are between 45 and 65 years of age. From 9 alcohol addicted fathers (75%), 2 (16,6%) are still drinking, 3 (25%) are in amateur abstinence, 2 (16,6%) have died from cirrhosis of the liver, 1 (8,3%) disappeared in Sarajevo, and only one as been hospitalized and is abstaining. Only a brother of one female patient is alcohol dependent. One female patient as a brother who was treated for stuttering in childhood, while another brother is being treated for agoraphobia. A younger sister of one female patient has an asocial behavior disorder.

Conclusion: Alcoholism in primary families represents a risk factor for the development of polytoximania and various other disorders and diseases.

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Minorities in a detoxification unit in Greece: I. Socio-demographic characteristics

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Background and Aims: Drug use, in isolated "primitive" communities, has been considered as a mechanism of social integration; in ethnocultural subgroups in contact with mainstream society, drug use has been considered as a marker, or sometimes as a cause of social disorganization.

Methods: This is a retrospective archives study. Admissions in Detox Unit of Thessaloniki (residential facility, part of Addictions Department at the Psychiatric Hospital and the only Detoxification Unit in Greece) for the decade 1996-2005 were studied. Socio-demographic and clinical characteristics of patients were recorded.

Results: Patients belonging to ethnocultural subgroups represent 4.8% of the total number of patients admitted (109/2265) and 7.2% of the total admissions number (191/2655). 86.73% are men and 13.27% are women. The mean age is 29.68 years old. The vast majority (77%) is Greek repatriated from European Community Countries and the Former Soviet-Union Republics, and some are from Albania. The median length of stay in Greece is 8.9 years. The rest (17%) belong to ethnocultural Greek subgroups (Roma, Greek Muslim minority). Most of the patients admitted are singles and have a secondary education level. The vast majority (84.6%) are unemployed.

Conclusions: The very low percentage of these admissions, 7.2%, doesn't necessarily represent the actual ratio of users in ethnocultural subgroups in Greece. Specific programs would undoubtedly lift some of the obstacles that hinder minority users from seeking help.

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Minorities in a detoxification unit in Greece: II. Clinical characteristics

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Background and aims: Drug use, in ethnocultural subgroups, has been considered either as a mechanism of social integration or as a marker/cause of social disorganization. The health status and health outcomes of many minorities have remained poor, or have deteriorated, despite massive health promotion campaigns.

Methods: This is a retrospective archives study. Admissions in Detox Unit of Thessaloniki (residential facility, part of Addictions Department at the Psychiatric Hospital and the only Detoxification Unit in Greece) for the decade 1996-2005 were studied. Socio-demographic and clinical characteristics of patients were recorded.

Results: Patients belonging to ethnocultural subgroups represent 4.8% of the total number of patients admitted (109/2265) and 7.2% of the total admissions number (191/2655). 44% of the total admissions completed the 21 days of stay and 46% left prematurely (median length of stay 5 days). 62% were admitted only once and 43% completed the program. 38% were admitted more than once and 45% of these admissions were successfully completed. The initiation drug is cannabis (82%) and the mean age of beginning drug use is 17 years old. The main substance is heroin, the median period of drug use is 7.5 years and the main way route of administration is intravenous (85%). 48% of them tested positive for Hepatitis C, 1% for Hepatitis B, and 9.1 for both HBV&HCV. 70% have problems with the law.

Conclusions: The percentage of completed admissions of the minorities in Detox is comparable to the Greek patients, but more campaigns about hepatitis seem to be necessary.

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Nonspecific treatment response in alcoholics

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Background: Nonspecific treatment response is common in pharmacotherapy trials for alcohol dependence, and results in a marked decrease in alcohol consumption even before subjects' enrollment in a treatment study. We propose that nonspecific effects are associated with trait and state factors operating prior to treatment to influence participants' expectation/perception of future treatment outcome and their drinking behavior. Trait factors include personality, and state factors include readiness to change and severity of drinking at screening. Our study goal was to determine how these nonspecific effects contribute to pre-double-blind clinical outcome.

Methods: We examined the association of trait factors (gregariousness or conformity on MacAndrew Alcoholism Scale (MAS)) and state factors (stages-of-change scale, level of drinking at screening) with pre-double-blind clinical outcome among 321 alcoholics in a pharmacotherapy trial.

Results: Nonspecific effects were associated with significant reduction in alcohol consumption among heavy drinkers (10.3 ± 5.9 drinks/day at baseline vs 5.3 ± 5.1 drinks/day during the last week of single-blind treatment; $p < 0.001$) but not non-heavy drinkers (3.07 ± 0.65 vs 2.98 ± 2.6 ; $p > 0.05$). Partial correlations indicate that significant predictors of pre-double-blind drinking reductions were: level of drinking (-0.215) and the stages-of-change subscales of pre-contemplation (-0.152), contemplation (0.144), and the struggle to maintain (-0.284). The MAS did not predict pre-double-blind drinking reductions.

Conclusions: Participants with higher motivation levels and greater drinking severity were most likely to experience nonspecific treatment effects before double-blind treatment. Gregariousness and conformity were not associated with nonspecific treatment effects.

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Multimodal treatment of alcoholic patients in a day hospital setting: A preliminary study of retention

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Background and aims: Outpatient treatment may be as effective as inpatient treatment if clients are retained, especially in the early phase. On the contrary, dropping out from treatment predicts relapse in alcohol dependence. We investigate early predictors of retention in a cohort of alcoholics undergoing a day-hospital rehabilitation programme.

Methods: A consecutive sample of 85 patients entered this prospective study by completing an intensive start-up phase. The main characteristics of the sample were: mean age 43.1 ± 10.7 ; 65% male; 68% employed; 27% polyabuser; 76% ongoing psychopharmacological therapy. Clients were assessed (AWRS, VAS for alcohol craving, ODDS, SCL-90-R) at baseline, T30, T60, T120 and T180. The statistical significance of comparisons was tested by Chi square and Mann-Whitney.

Results: The overall retention rate was: 60 pts (70%) at T30, 54 pts (63%) at T60, 42 pts (49%) at T120, 35 pts (41%) at T180.