

were collected from 82 polysubstance dependent patients (53–64.6% — males and 29–35.4% females) admitted to the Drug Abuse Treatment Unit of the Hospital Clínico Universitario, in Valencia, Spain. Sociodemographic and substance use history data were obtained with a 53-item structured questionnaire that we designed and have used in previous studies. SCID-II interviews were performed by a trained researcher and findings were subsequently reviewed with two other psychiatrists. The results showed that 50 (61.0%) of the 82 patients met diagnostic criteria for at least one PD. Antisocial PD (ASPD) was most prevalent ($n = 35$, 42.7%), followed by borderline PD ($n = 16$, 19.5%), dependent PD ($n = 9$, 11.0%), paranoid PD ($n = 9$, 11.0%) and narcissistic PD ($n = 7$, 8.5%), although all diagnoses except for sadic PD were represented. Specifically, among those patients who met diagnostic criteria for ASPD current alcohol abuse or dependence ($p < 0.005$) and current benzodiazepine abuse or dependence ($p < 0.003$) was more prevalent than among those patients without ASPD. In addition, patients with ASPD referred a lower mean age of first alcohol ($p < 0.04\%$), heroin ($p < 0.001\%$) and cocaine ($p < 0.002\%$) use. These data suggest that among our patients, prevalence of PD was high and ASPD was associated with overall worse clinical characteristics.

PATTERNS OF ATTACHMENT IN IRANIAN INFANTS

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Following a pilot study with a group of Iranian infant-mother pairs living in London, and as a part of bigger study on Iranian families the Strange Situation procedure was used to assess the attachment style of Iranian infants ($n = 53$, boys = 26, girls = 27, age range = 11–22, mean age = 16.1 months) to their mothers (mean age = 28.71 years). The sample was selected from Isfahan the second biggest city in Iran.

In line with our pilot study, the results suggest that there are important cultural differences in the distribution of infants within the attachment classification system. In this study there were no avoidant (A-type) infants. There were also some important differences between our sample and the original American study (Ainsworth et al. 1978). For example the Iranian sample were much more distressed during the separation episodes and searching behaviours were stronger than in their American counterparts. Presence of stranger helped the American infants to be comforted substantially more than Iranian infants. Although Iranian babies showed nearly the same amount of avoidant behaviour toward the stranger, but they showed much less avoidant behaviour toward their mothers in the reunion episodes than American babies.

We also have found strong correlations between Interactive behaviours (Proximity and contact seeking, Contact maintaining, Resistance, Avoidant, and Distance behaviours) in the reunion episodes and the infants temperament as measured by the Infants Characteristic Questionnaire (ICQ) particularly with Fussy-difficult and Unadaptable subgroups and the total score of ICQ items.

All of the infants had a sibling in the age range 4–6 years. Comparisons will be reported for the sibling pairs on measures of security and behaviours.

CHARACTERISTIC FEATURES OF DRUG ADDICTION IN ADOLESCENTS WITH BEHAVIOURAL DISORDERS (FOLLOW-UP STUDY)

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During 15 years we studied the development and course of drug

addiction in teenagers, who manifested different kinds of deviant behaviour (before the beginning of drug abuse) — 97 patients and a group of patients with drug addiction (130) who didn't have behavioural disorders before they began to abuse drugs. We used clinical and psychological investigation.

As the result of the research we established that the clinical manifestations of drug addiction in teenagers with previously existing behavioural disorders began 2.5 years earlier (average), physical and mental dependence developed faster, tolerance grew more intensively and the personality disorders were more serious. Combined abuse of different substances, most often — opiates with tranquilisers and alcohol, was twice more frequent in the patients of this group. Criminal activity, that indicates the level of social maladaptation, was much higher in the observed group. The clinical analysis of the behavioural deviations at the time of the beginning of drug abuse revealed that in 83.5% of cases they had pathologic nature (behavioural or conduct disorders).

The existing disorders and unfavourable microsocial environment caused more malignant course of drug addiction in the individuals with deviant behaviour in the premorbid period. The described characteristic features must be taken into account in the working out of the treatment and rehabilitation programs for this contingent of patients.

DETOXIFICATION IN MONOSUBSTANCE AND POLYSUBSTANCE DRUG-USERS

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In the last years the number of monosubstance heroin-users who entered a detoxification-program in our clinic continuously decreased. In 1995 only 29.8% of our patients used heroin exclusively. All other patients who enrolled the program showed a polysubstance drug-use-pattern including heroin, cocaine and/or benzodiazepines and/or alcohol. 77 patients (56 male: 21 female) entered since June 1995 a detoxification-program which involved a flexible reduction schedule of methadone. 23 (13:10) patients had used exclusively heroin (H), 27 (22:5) heroin and cocaine (H + C), 21 (15:6) heroin, cocaine and benzodiazepines (H + C + B) and 6 (6:0) heroin plus alcohol (H + A). 10 of 21 female patients who entered the program had used exclusively heroin compared to 13 out of 65 male patients. With increasing age the number of patients who used exclusively heroin decreases where as polysubstance drug abuse increases. Only 7% of the (H + C + B)-group were younger than 26 years, compared to 34% in the (H)-group. In contrary only 8% of the patients older than 35 years belong to the H-group compared to 24% who consumed H + C + B.

Polysubstance drug-users needed longer treatment for detoxification. Whereas only 17% of the (H)-users stayed longer than our 21-day-standard-detoxification program required, 27% of the polysubstance drug-users did not complete detoxification on time. Whereas monosubstance heroin users complained mainly about vegetative symptoms during detoxification in polysubstance drug-users (H + C + B) craving and general weakness were recorded as the most predominant symptoms. The patients of the (H + A)-group were older compared to the other groups. None of them completed the program. This may implicate the need for a special program for this patients.

Our data show that polysubstance drug-abuse patterns increase the risk of unfavorable outcome of withdrawal treatment and emphasizes the need for substance-specific treatment in detoxification.