

of disorders and their important negative consequences still remains a problem for many physicians. This phenomenon is associated with delayed diagnosis and treatment initiation, lack of valid epidemiological data about these pathologies, and overall lower quality of life in these patients.

Objectives: The main objective of this study was to explore the awareness of GPs on the general diagnosis criteria of BAs.

Methods: An online questionnaire addressed to general practitioners (GPs) investigated the level of their knowledge regarding the main criteria for diagnosis in five more commonly reported BAs, i.e., gambling disorder, problematic Internet use, cell phone addiction, food addiction, and shopping addiction. The questionnaire included 50 items and required 20-25 minutes to complete. The answers were anonymized.

Results: Answers from 12 GPs were analyzed, with an 80% completion rate. Gambling disorder was the only diagnosis recognized by all the respondents, followed by shopping addiction (50%) and abusive Internet use (33.3%). Lack of time to screen for these disorders was the most frequently invoked reason for not including instruments dedicated to BAs in the regular visits to the GPs. The Internet was admitted by all the respondents as their source of information about BAs.

Conclusions: There is an acute need to improve the knowledge of GPs about the existence and consequences of BAs in order to increase the probability of early detection and treatment initiation for these patients. It is expected that Internet-based campaigns for increasing GPs will benefit BAs patients in the long term.

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EPV0064

Drama-based therapy program in the recovery of adults with addictive disorders

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Introduction: Following the pandemic, we can find many new communication situations. Social relationships have changed a lot and are developing differently due to digital development, new lifestyles, and the effects of COVID-19. These components: social media, the transformation of interpersonal relationships, and the use of the platforms provided by the internet can lead to addictive disorders as risk factors.

Objectives: In this presentation, we review studies investigating the relationship between the new digital techniques, social connection, and communication development of adults with addictive disorders. We attempt to provide a summary of new theories and the areas currently being researched around the topic. Another aim of our research is to present the new drama-based therapy theories and methods in adults with addictive disorders.

Methods: To learn about recent international results, we conducted a literature search in 3 databases (PubMed, Medline, Web of Science) using the following keywords: drama therapy, addiction, emotion regulation, and adults, over the past 5 years. Empirical journal articles in English were used to prepare the literature review.

Exclusion criteria were: the appearance publication before the year 2017 and the adolescent population.

Results: Changes in social behavior, emotion regulation, and addictive disorder were correlated. The studies examined social communications and loneliness in primarily cross-sectional studies design. The escapism from interpersonal relations and low self-esteem is the highest motivation to start regular videogame playing or using social media without control which becomes an addictive disorder.

Conclusions: Problematic social media use and changes in social connection threaten adults' mental health. The diagnosis of emotion dysregulation, low self-esteem, and social disconnection is the detection of risk factors for addictive disorders. The new methods and tools of drama-based therapy are new prevention possibilities for these risk factors. In this way, it is a relevant issue in the field of education science.

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EPV0065

Revolutionizing Addiction Medicine: The Role of Artificial Intelligence

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Introduction: Addiction medicine is becoming more of an issue as addiction-related problems continue to plague people all over the globe, resulting in serious health consequences. Addiction has become increasingly prevalent in recent years, as have addiction-related disorders. For efficient care and improved patient outcomes, this growing pandemic requires early and precise identification. In the field of addiction medicine, artificial intelligence (AI) looks to be a feasible tool. This systematic review examines the current state of research on the use of AI in addiction medicine, including a variety of AI techniques, their efficiency compared to conventional diagnostic methods, and their potential influence on addiction therapy. While AI has great potential for transforming addiction treatment, further research is needed to assess its use fully.

Objectives: The objective of this review is to assess the current state of research on the use of artificial intelligence in addiction medicine, focusing on its diagnostic efficacy and potential for revolutionizing addiction therapy.

Methods: To evaluate the effectiveness of AI in addiction medicine, we conducted an extensive search of the PubMed database. Our search encompassed articles published in the English language from January 2013 to March 2023. Inclusion criteria encompassed studies reporting the utilization of AI for addiction diagnosis in human patients.

Results: The initial PubMed search produced 100 papers, of which 15 were included after meticulous analysis and screening.

These studies assessed diverse types of data, including patient records and behavioral patterns, employing various AI techniques, such as machine learning and deep learning. The findings indicate that AI can accurately and swiftly identify addiction-related issues, boasting high sensitivity and specificity rates. Additionally, AI demonstrates potential in identifying specific addiction subtypes and forecasting patient outcomes. Nevertheless, these studies also underscore certain limitations of AI, such as the requirement for extensive data and susceptibility to overfitting.

Conclusions: Artificial intelligence holds the potential to revolutionize addiction medicine by enabling faster and more precise diagnostics, pinpointing specific addiction subtypes, and predicting patient outcomes. However, further research is imperative to validate AI's efficacy across diverse patient populations and address challenges related to data accessibility, communication, and integration into clinical practice.

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EPV0066

Cannabinoids Hyperemesis Syndrome – An Urgent Call for Timely Diagnosis, Management, and Future Directions– A Case Report and Review of the Updated Literature

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Introduction: Cannabinoid Hyperemesis Syndrome (CHS) is distinguished by a pathognomonic cyclic pattern of hyperemesis characterized by recurring episodes of severe vomiting every few weeks to months, as well as obsessive thoughts and compulsive behavior, such as a proclivity to take frequent hot baths or showers. It is largely accepted as the most commonly used illicit drug in the United States, with estimates ranging from 42% to 46% lifetime consumption. Despite greater awareness of CHS, practitioners continue to lack comprehension, resulting in an unfortunate delay in patient identification and treatment.

Objectives: The aim of this article is to bring attention to CHS in order to enable clinicians, and more specifically, addiction medicine specialists and psychiatrists, to diagnose it as quickly as possible and thus avoid unnecessary additional invasive examinations and investigations. This will save the patient's time, prevent financial burdens and mental health stresses, and increase their overall quality of life.

Methods: A thorough screening and data extraction of the relevant articles was conducted using PubMed, Cochrane, and Embase. Databases were used to search for articles on CHS published between January 2021 and September 2023, yielding relevant articles. Keywords used were "hyperemesis", "cyclical vomiting", "cannabis" and "cannabinoid".

Results: We present a case of 20-year-old teens who came to emergency with severe dehydration and vomiting of more than 40 episodes at home. He had multiple admissions for abdominal pain, nausea, and vomiting in the past and was evaluated and diagnosed with gastritis, PUD, and H. pylori infection. A more detailed medical history revealed a frequent use of cannabis over the past few years and symptoms manifestation and worsening is associated with the use of cannabis. After the complete cessation of cannabis, there have been no new symptomatic episodes reported in the patient and the patient is stable clinically.

Conclusions: Cannabinoid Hyperemesis Syndrome (CHS) is a serious health hazard that requires immediate discovery and treatment. Despite the widespread use of cannabis, CHS is often misdiagnosed, resulting in unnecessary medical treatments and complications for patients. Given their special knowledge of linking chronic cannabis use to this syndrome, this case report and literature review highlight the critical role of addiction medicine experts and psychiatrists in quickly detecting and treating CHS. Early detection and treatment, particularly complete cannabis abstinence, are critical in alleviating symptoms, minimizing recurrent hospitalizations, and ultimately improving patients' overall quality of life.

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EPV0067

What Do Case Studies Tell Us About Addictions and Psychiatric Comorbidities? A Survival Story: The necessity for a transdiagnostic and holistic approach

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Introduction: Comorbidities in addiction: It is a rule rather than an exception. The story starts in childhood; even before, in infancy, may be in utero. The dimensional traits have been already there, existing obviously far before any DSM-5 diagnosis. Developmental qualities of stress sensitivity, impulsivity and emotion dysregulation are the leading ones. Besides, comorbidity research (NESARC being one of the prominent) (Hasin and Grant. Soc Psychiatry Psychiatr Epidem, 2015;50 (11): 1609-1640) addressed childhood abuse, neglect or other childhood adverse experiences as a definite risk factor for adolescence and adult mental disorders, particularly substance use disorders. Developmental and environmental adversities in a mutually amplifying pattern make a vicious cycle in which the individual finally finds an illusionary exit, a pathway to addiction.

Objectives: This presentation aims to discuss the complexities and challenges for the diagnosis and treatment of a patient with a twenty five year follow-up, a survival period for the patient herself as well as for the therapeutic alliance (Ulug, Arch Neuropsychiatr, 2015;52: 213-215).

Methods: Case study: The history and the life chart of her, diagnosed as having at least seven DSM diagnoses, indicate the depth of psychopathology and the intensity of interventions, most of which failed due to the lack of a transdiagnostic and holistic perspective. A specific focus of the case study will be on the problematic use of Borderline Personality Disorder formulation/diagnosis and its