

S37 *Alcohol abuse and dependence: ...***COMORBIDITY OF ALCOHOL DEPENDENCE**

O. M. Lesch, B. Semler, H. Walter. *Universitätsklinik für Psychiatrie, Vienna, Austria. Anton Proksch Institut, Kalksburg, Austria*

Alcohol dependence as defined by ICD-10 and DSM-IV includes a group of patients too heterogeneous to develop basic research in this area; typologies were therefore established and an increasing literature also exists on comorbidity. Anxiety or depression in the course of alcohol dependence have often been described (Berner et al, 1986; Lesch 1985; Lesch et al 1985; Schuckit 1995). Alcohol-related psychiatric disturbances during withdrawal, during relapse or during times of sobriety have different causes and need different treatment programmes. From 1976 to 1982, we investigated 444 alcohol-dependent patients in a prospective study design and found that during this long-term study, different psychopathological symptoms occur in different combinations with each other, sometimes reaching the level of a syndrome (comorbidity). In 1994 and 1995, the same patients were investigated to prove the stability of the long-term courses and the stability of different comorbidities. The results show clearly that there are stable interactions between alcohol intake and symptom development (and vice versa). Even in patients who stopped drinking totally, more than 50% showed cases of psychiatric disturbance during the long-term course. These results make it necessary to include psychiatric competence in long term treatment programmes for alcohol dependence.

S37 *Alcohol abuse and dependence: ...***OUTCOME PREDICTORS IN THE TREATMENT OF ALCOHOL-DEPENDENCE WITH ACAMPROSATE**

Henning SASS, Psychiatrische Klinik, Aachen, Germany

In a randomised double-blind, placebo-controlled study 272 patients received routine counselling and either 1.3 - 2 g of acamprosate / day as study medication or placebo for 48 weeks and were followed up for another 48 weeks without medication. Patients on acamprosate showed a significantly higher abstinence rate, had a significantly longer mean abstinence duration and a significantly higher percentage of abstinent days during the study period. Very few side effects were recorded, mainly diarrhoea and headache. The reported differences between the acamprosate group compared to the placebo group remained stable in the second year during the medication-free period of follow-up. Thus in this study acamprosate proved to be a safe and effective aid for maintaining abstinence in the treatment of a alcohol-dependence. In addition to these results the data set of the study was further analysed to get information about several clinical and research issues, e.g. if there are predictors for the positive outcome to this treatment, how the ideal patient for this treatment can be defined, whether measuring of craving is useful for the prediction of relapse or whether there are different patterns of drinking behaviour after relapse in the acamprosate vs. placebo group. The results of the additional statistical analysis and methodological as well as clinical problems linked to the interaction between pharmaceutical and psychosocial elements of a comprehensive treatment program are discussed.

S37 *Alcohol abuse and dependence: ...***NEW INSIGHTS INTO PSYCHO-ORGANIC COMPLICATIONS OF ALCOHOL DEPENDENCE**

P. Verbanck, X. Noel, S. Mampunza, O. Le Bon, I. Pelc. *CHU Brugmann, Clinique d'Alcoologie, Université Libre de Bruxelles, Belgium*

Alcohol dependence is sometimes complicated by well-known neurological problems such as Wernicke-Korsakoff syndrome, cerebellar atrophy or pontine myelinolysis. However, the neurological status of detoxified patients who do not suffer from these symptoms is less clear. Some authors mentioned a "post withdrawal syndrome" the pathophysiology, incidence and evolution of which are unknown. We present here the results of a study that was performed in a cohort of recently detoxified alcoholics free of major physical or psychiatric problems. We evaluated their clinical situation using polysomnography, TcHMPAO-SPECT examination and a specific neurophysiological assessment. We observed that dramatic alterations of sleep patterns are the rule as well as an important hypoperfusion of the frontal lobes present in most patients. The neuropsychological assessment also suggested major alterations, especially in the field of problem-solving, indicating that even in alcoholic patients who seem to be free of major neurological complications, brain alterations are commonly present. This could be of importance for the outcome of these patients.

S37 *Alcohol abuse and dependence: ...***ALCOHOL AND SUICIDE**

J. Barrias, Centro Regional de Alcoologia, Porto, Portugal

The relationship between alcohol consumption and suicidal behaviour has been studied at the Oporto Regional Alcohol Centre. Associated factors such as depression, anxiety, suicidal tendency and control locus were also studied.

In Portugal experience has shown that an increase in per capita alcohol consumption is followed by a simultaneous increase in the rate of suicide. Our study however, showed a negative correlation between these two parameters.

This paper discusses the hypotheses that could explain such a regional difference by considering other sociological variables.