

EPV0014

Women's addiction : experiences at Arrazi Psychiatric Hospital in Morocco

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Introduction: Drug addiction, also called substance use disorder, is a disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medicine. There is a complex interplay of neurobiology, genetics, and the environment –nature and nurture– that play into the development of addiction, alcohol, and other drug use disorder. Substances such as alcohol, marijuana and nicotine also are considered drugs.

Research has shown that women often use drugs differently, respond to drugs differently, and can have unique obstacles to effective treatment as simple as not being able to find child care or being prescribed treatment that has not been adequately tested on women.

Objectives: describe the socio-demographic and clinical characteristics of female patients admitted to the addictology department of Arrazi Hospital in Salé

Methods: Retrospective study with descriptive and analytical aims on the files of women who were admitted to the addictology service since its opening in 2000, with the aim of specifying the prevalence and the characteristics of addictive behaviors in the female population.

Results: in progress

Conclusions: in progress

Disclosure of Interest: None Declared

EPV0016

Combating Gaming Disorder in 2024: A Survival Manual

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Introduction: Gaming Disorder (GD) has not been officially recognized as a diagnostic entity in the DSM-5, being listed in the “conditions for further study” section. However, it is described in the ICD-11, and clinically, it is observed that an increasing number of individuals, particularly the younger population with easier access to technology, are affected by this issue. Nefarious consequences include loss of performance at school/work and a potential for failing other responsibilities such as in the familiar and social spheres.

Objectives: Despite its harm, psychiatrists are generally less familiar with this entity when compared to other psychiatric disorders. Thus, our main goal was to establish a comprehensive and holistic review of its approach.

Methods: A bibliographical research on the topic was conducted from the available scientific literature on the topic, with the utmost prioritization of evidence-based sources.

Results: The overall prevalence of Gaming Disorder is challenging to assess precisely, but it is estimated to be around 3%, making it comparable to obsessive-compulsive disorder and some substance use disorders. It is more common than pathological gambling. Clinically, GD is characterized by an excessive preoccupation with gaming that supersedes all aspects of life. It may also involve a compulsion to play and the presence of withdrawal symptoms from periods when there are no gaming activities. The behavior is driven by the ACE triad (anonymity, convenience, and escape). Often, individuals with GD do not seek treatment. Although there are no specific pharmacological agents, antidepressants, mood stabilizers, and naltrexone have shown some success. In psychotherapies, cognitive-behavioral therapy has the strongest evidence.

Conclusions: There is a limited amount of information on GD, and when researching the topic, one primarily encounters information on other substance-related addictive disorders and, in the case of behavioral disorders, gambling. However, as young people are increasingly exposed to screens and video games with potential harmful effects on their development, and in adults, inhibiting them from taking on work and family responsibilities, it is essential to conduct more studies on the subject to prevent these deleterious consequences.

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EPV0017

Alcohol withdrawal seizures, epilepsy and brain traumaG. Dzhupanov^{1*}, V. Nikolov¹ and G. Slaveykov²¹State psychiatric hospital for treatment of drug addiction and alcoholism and ²University multiprofile hospital for active treatment in neurology and psychiatry St Naum, Sofia, Bulgaria

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Introduction: Alcohol addiction can lead to withdrawal seizures, but most patients do not develop epilepsy. In some cases a permanent complication occurs - symptomatic epilepsy. In other cases epilepsy precedes alcohol addiction. Comorbidity may pose serious challenges to treating clinicians. There are conflicting data regarding relationship between alcohol use, seizures and epilepsy (Scorza CA et al., CLINICS 2020;75:e1770). Other factors like brain trauma may have impact in genesis of epileptic states as well.

Objectives: Evaluation of interplay between seizures, epilepsy and brain trauma in patients with alcohol use disorder.

Methods: Analysis of a case series in a hospital setting and review of relevant literature.

Results: In our series of cases the number of patients who have suffered epilepsy before the onset of alcohol use is small. In most of the hospitalized patients epilepsy occurred after the development of alcohol use disorder. In this group we observed that head and brain trauma play role in genesis of seizures and epilepsy and in some instances the reverse happens.

Conclusions: Our data indicate the potential role of brain trauma as predisposing and complicating factor in patients who developed seizures and epilepsy. Seizures sometimes increase the risk of brain trauma. Seizures and trauma are important factors in typology of Lesch (Lesch et al. 2011) and a serious evaluation in this direction is important, because its diagnostic, therapeutic and prognostic implications. Further clarification in this field is necessary.

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