

EPV0042

Prevalence of internet use disorder and associated psychiatric comorbidities in youth patients presenting to tertiary care center

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Introduction: Internet use has become integral part of daily living in current world; at the same time its misuse is likely to cause addiction and negative impact in mental health. Internet addiction is similar to other substance addiction and has been associated with different psychiatric comorbidities.

Objectives: To study prevalence of internet use disorder in youth patients, to find the association of psychiatric comorbidities with pattern of internet use and to study socio-demographic variables.

Methods: An institutional based cross-sectional study was carried out in psychiatric out-patient department of tertiary hospital. A total of 146 youth patients (15-24 years) who consented for the study were enrolled. Psychiatric diagnosis was made by the consultant psychiatrist using ICD-10/DSR criteria.

Results: Out of total 146 patients with mean age 19.99 years, internet use was found in 89.7% of youth patients out of which 63.7% used in single device and 26.3% in multiple devices. Internet addiction was found in 67.8% youth patients and internet gaming in 33.6% patients. Higher level of internet addiction was found in adolescent (15-19 years) than adult (20-24 years) with statistically significant p value 0.014; patients from middle and higher socio-economic condition than low socio-economic condition with statistically significant p value 0.024; patients from urban region compared to semi-urban and rural with statistically significant p value 0.000; and patient using internet gaming with statistically significant p value 0.000. Among psychiatric diagnosis, Anxiety, depression and substance use disorders were associated with internet use disorder however were statistically insignificant.

Conclusions: Internet addiction is high in youth patients; adolescent (15-19 years) compared to adults (20-24 years). Anxiety, Depression and substance use disorders had higher association with internet use disorder.

Disclosure of Interest: None Declared

EPV0043

Outcome of offenders with substance use disorder

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Introduction: Substance use is related to higher risk of criminality among prisoner with or without co-occurring mental disorder. This contributes to a poor correctional outcome and higher risk of suicide and other psychiatric disorders.

Objectives: The aim of this study is to compare offenders with substance use disorder with offenders with no addictive comorbidity.

Methods: We studied the medical files of all the offenders referred to the forensic psychiatry unit in the Razi hospital for an examination between January 2010 and October 2020 analyzed socio-demographic, psychiatric and criminological factors of this population.

Results: We found that the first group, with substance use disorder, was substantially consisted of male offenders (99.2%) compared to the second group (92%); (p=0). A significantly higher level of education was found in the second group compared to the first (p=0.004). Offenders with no substance use disorder tended to live with their family while the rest of the cases lived on their own (p=0.018), they also had three times more family history of psychiatric disorders than the other group (p=0). Psychiatric comorbidity was more important in the second group with more cases of schizophrenia and mental disability while the first group consisted mainly of people with personality disorders (p=0.018).

The average number of anterior convictions was 3.12 first group and 1.33 in the second group, which is significantly lower (p=0)

Conclusions: Specific interventions, in particular addiction management, are required to reduce the criminal risk in this population.

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EPV0044

Toxic encephalopathy after an overdose of cocaine : a case serie

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Introduction: cocaine is a widely used illegal drug, known for its fast ability to induce euphoria and arousal. However, cocaine exposure can contribute to several mental and physical effects. Cocaine induced brain damage can be divided into 3 mechanisms: direct effect leading to toxic encephalopathy, secondary to vascular damage causing vasculitis, stroke and vasospasm, and tertiary effect due to hypoxia through a cardiovascular collapse.

Objectives: Here, we report 2 young men who developed a subacute encephalopathy with different clinical and radiological presentation after a cocaine overdose

Methods: a case serie

Results: we present two men aged respectively of 28 (P1) and 42 years-old (P2). Both had a history of alcohol consumption and toxicomania (mainly cocaine) during the past year. They manifested, 2 weeks following a cocaine overdose, with gait disorder and confusion. On examination, P1 was apathic and confused. He had a subcortical frontal syndrome with gait apraxia and grasping reflex, along with a quadri-pyramidal syndrome. While patient P2 developed a cognitive decline, parkinsonism with dystonic posture of the trunk and the right limbs, and a pseudobulbar syndrome. Brain MRI was performed in both patients and showed a bilateral multifocal leukoencephalopathy (P1) and the presence of bilateral hyper T2 and FLAIR weighted images affecting basal ganglia, the mesencephalon and the periventricular cerebral white matter. Cerebrospinal fluid (CSF) analysis showed no pleocytosis and normal proteinorrachia. Electroencephalogram was also normal. Infectious differential diagnosis including Human Immunodeficiency Virus (HIV) and syphilis were excluded and metabolic screening