

FC06. Free Communications: MENTAL HEALTH, SOCIAL PSYCHIATRY AND ADDICTIONS 2

FC06.01

Trait aggression and hostility in recovered alcoholics

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There is a long-recognized association between alcohol consumption and aggressive behaviour. This study was designed to examine aggression in a group of socially well-adapted recovered alcoholics (RA). The question addressed was whether the treatment, together with long-term abstinence from alcohol, could reduce aggression and hostility in RA.

A group of male RA ($n = 64$), who did not meet the DSM-IV criteria for any psychiatric or personality disorder, were recruited to the study from aftercare groups. According to data from their group therapists, they were reliably abstinent for at least 3 years and socially well adapted. The study participants representing the control group ($n = 69$), diagnosed as being “reliable nonalcoholics” (NA) by the Munich Alcoholism Test, were recruited from general practice. Data were derived from an in-house questionnaire on general characteristics of both groups, and aggressive and hostility traits were assessed using Buss-Durkee Hostility Inventory (BDHI). The univariate and multivariate between-groups design was used for data analysis.

Taking into account the BDHI dimensions of aggression and hostility, the difference between RA and NA groups was statistically significant (Wilks' lambda (8,125)=0.769; $p=0.00004$). There were statistically significant differences in the BDHI scales for indirect aggression, irritability, negativism, suspicion, resentment, and guilt. Both RA and NA group did not differ significantly in variables that assessed physical and verbal aggression. After a 3-year abstinence, subjects from the RA group displayed signs of hostility and covert aggression.

FC06.02

Effects of multiple drug abuse on attentional functioning - the impact of substance abuse, psychiatric disorder and time of abstinence

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Introduction: Effects of multiple drug abuse on neurocognitive functioning in the domain of attentiveness functioning have not yet been researched systematically. Furthermore, only a few studies deal with the significance of substance-specific abuse clustering and concomitant psychiatric disorders, and the question of how reversible functional impairment is remains unanswered. This study seeks to clarify some of these issues.

Method: A total of 945 multiple drug users (567 male, 378 female) were examined under controlled abstinence for 6 months at the Rehabilitation Center. Neuropsychological tests were done at the time of admission, after four weeks of withdrawal therapy (t1), as well as after three (t2) and six months (t3). In addition to intelligence, subjects were given attentiveness tests (i.e., alertness, divided attention, flexibility, intermodal comparison, incompatibility, working memory, Go/NoGo, visual scanning) using a computerised test battery and compared to normals, pure cannabis users and schizophrenics without drug abuse.

Results: The substance abuse group showed significant decreases in all attentiveness functions ($p<0.0001$), with patients suffering from concomitant schizophrenic disorders showing greater decreases ($p<0.05$). These decreases were stable during follow-up. Depending on the specific substance abuse clustering, there were different restitution effects.

Conclusion: These results show the importance of different factors for cognitive long-term effects of multiple drug abuse especially in the domain of attentiveness functions.

FC06.03

Social exclusion and substance dependency: new models of care and interventions?

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Objective: To investigate the relationship between social exclusion and outcomes of mentally ill patients with substance abuse problems receiving assertive outreach treatment in London.

Method: Analysis was conducted on data on 580 patients from the “Pan-London Assertive Outreach Study (PLAO)”. Data were collected using clinician-rated scales of alcohol and drug abuse in the last six months before baseline. Outcomes “voluntary and compulsorily hospitalisation” were assessed over a 9-month follow-up period.

Results: The analysis identified a group of patients with substance abuse who suffer from social exclusion and forensic problems ($n=77$, 15.8%), and had poorer outcomes than the rest of the patients in terms of voluntary (52% vs. 36% respectively) and compulsorily (39% vs. 22% respectively) hospitalisation.

Conclusion: There is a surprisingly low prevalence rate of substance abuse in AO teams in London. However, there is in these teams a distinct group of patients with substance abuse and social exclusion characteristics who could benefit from specific interventions in dual diagnosis and forensic mental health. The question that poses itself is whether or not we should re-think models of care and types of interventions provided for dual diagnosis patients receiving AO care.

FC06.04

Factors related to the use of drugs among medical students

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Introduction: The use of alcohol and other drugs among medical students has been a theme of growing interest and concern on the part of researchers, teaching institutions and medical associations since the decade of the 1960's. Objective: Recent use of alcohol, tobacco, tranquillisers, amphetamines, cannabis, organic solvents, and cocaine among 456 medical students was surveyed.

Method: Assessment was done by means of a self-report questionnaire according to World Health Organisation guidelines.

Results: Among medical students, after alcohol and tobacco, cannabis and solvents are the most frequently used psychoactive substances. As such, they were the most deeply analysed drugs in this study. Factors associated with the recent use of cannabis and solvents were established by logistic regression. Living with parents or a companion appeared as a protective factor for the use of cannabis. However, being male and regularly participating in the activities at the campus Sports Association showed as risk factors for the use of both cannabis and solvents.