

P-69 - PSYCHOSTIMULANT DRUG DETOXIFICATION IN PATIENTS WITH DUAL DIAGNOSIS

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Introduction: There is no pharmacotherapy with specific indication for psychostimulant detoxification. Few studies have been made about pharmacological strategies in this dependence. In dual patients, literature about this remains limited.

Objectives and aims: To describe socio-demographic features, drug-related experiences, primary psychiatric disorders and therapeutical approaches in dual inpatients, and compare them with non dual inpatients.

Methods: We present a descriptive and cross-sectional study, based on the description of 300 admitted patients for psychostimulant detoxification from June 2008 to August 2011.

Clinical and socio-demographic characteristics were registered using an ad-hoc questionnaire. Structured interviews based on SCID I, SCID II, ASI and CAADID were performed to screen psychiatric co-morbidity.

Results: Almost 63% reached criteria for dual diagnosis (72.4% men, mean age $36\pm 7,8$ years). The most common diagnostics were psychotic disorders (45.5%) in axis I and Cluster B personality disorders in axis II (31.8%).

44.7% were multiple-drug abusers. 57.9 % of dual patients had been previously hospitalized in comparison with 28.1% of non dual patients, being this statistically significant.

Dual patients used a higher number of pharmacological treatments at discharging from hospital ($3,1\pm 1,5$ vs $1,9\pm 1,4$, $p < 0.001$). The most frequent approaches were antiepileptics (80,8%), antidepressant (67.7%), antipsychotics (51.3%), interdictors (16.9%), anxiolytics (12.8%) and opioid agonists (10.4%).

Conclusions: Dual patients admitted for a psychostimulant detoxification frequently reach criteria for psychotic disorders and cluster B personality disorders. They exhibit a severe condition, requiring numerous admissions and presenting higher prevalence of poly-drug abuse. Similarly, they need additional pharmacological strategies to complete detoxification.