European Psychiatry S457

Introduction: Although stigmatization is a barrier to treatment for many individuals and groups, individuals with mental disorders are the most affected by stigmatization. Among mental disorders, substance use disorders are the group with high levels of social stigma and internalized stigma. Internalized stigma may lead to a decrease in self-esteem and withdrawal from society and may increase depressive symptoms. Among individuals who use substances, depressive symptoms are high due to both the effects of the substances used and the psychosocial and legal problems experienced. In the literature review, no study examining the relationship between internalized stigma and depression in adolescents was found

Objectives: This study aimed to examine the relationship between internalized stigma and depression in a group of adolescents diagnosed with substance use disorder.

Methods: The study was conducted between December 2023-March 2024 with 71 adolescents between the ages of 12-18 who were diagnosed with substance use disorder and admitted to the outpatient clinic of university hospital in a city located in the southeastern part of Turkey. Information Form, Internalized Stigma of Mental Disorders Scale-Adolescent Form (ISMI-AF), and Beck Depression Inventory (BDI) were used for data collection. **Results:** The mean age of the adolescents was 15.97 years (1.51); 85.9% were male, 59.2% were high school students, and 90.1% had severe depressive symptoms. According to the Pearson correlation analysis, no significant relationship was found between the total scores of the ISMI-AF and BDI; however, BDI, educational status of the adolescent, and academic achievement was found to be statistically significant as determinants of the ISMI-AF (R2=0.29). It was determined that the variables specified in the model explained 24% of the ISMI-AF (Adjusted R Square = 0.24)

Conclusions: Almost all of the adolescents who participated in this study were found to have severe depressive symptoms. In addition to depression, adolescents' school life and academic achievement were important variables explaining internalized stigma. Since adolescents' school attendance may be a situation that will prevent substance use, interventions to be carried out in cooperation with mental health professionals and school nurses are very important.

Disclosure of Interest: None Declared

EPV0040

Westernisation of Alcohol Consumption in Women: A Rapid Pathway to Dependence and Increased Detoxification Service Use

Â. Ferreira¹*, I. Pereira², M. Cameira², M. Andrade², S. Morais³ and J. Teixeira²

 1 São Bernardo Hospital, Setúbal; 2 Júlio de Matos Hospital, Lisbon and 3 Garcia de Orta Hospital, Almada, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.946

Introduction: The Westernisation of alcohol consumption habits among women has led to increased alcohol intake and a rise in Alcohol Use Disorder (AUD) cases in females. Although AUD prevalence remains higher in men (7.7% compared to 1.5% in women), women display distinct features in the disorder's progression, such as the telescoping effect, where the transition from initial consumption to dependence occurs more rapidly. This trend underscores the importance of studying frequent female users of

alcohol detoxification services to identify contributing factors to this accelerated progression.

Objectives: This study seeks to characterise frequent female users of alcohol detoxification services, focusing on gender differences, particularly the faster progression of alcohol dependence in women and the influence of Westernisation on their drinking habits.

Methods: A retrospective analysis was performed on clinical records from 2022 to 2023 for patients hospitalised at the Alcohol Treatment and Rehabilitation Unit. The analysis included patients who were hospitalised two or more times within a 12-month period. Demographic, psychosocial, and clinical variables were compared, with a particular focus on female patients.

Results: Of the 360 patients admitted between 2022 and 2023, 37 were readmitted within 12 months. Women constituted 29.7% of these cases, with an average age of 52 years (compared to 51 in men), and were more often divorced or separated (81.8% vs 76.9%) and unemployed (72.7% vs 69.2%). Psychiatric family history (72.3% vs 65.4%) and psychiatric comorbidities (90.9% vs 61.5%) were more prevalent in women. Women also had a higher total number of hospitalisations (4.09 vs 3.62), although their 12-month readmission rates were similar to men (1.46 vs 1.50).

Conclusions: These findings support the literature on the telescoping effect, evidenced by women's older age and a similar number of readmissions despite a more precarious social situation and greater psychiatric comorbidities. Notably, although women were a minority among readmissions, their proportion exceeded the expected prevalence rate (30%/70% vs 15%/85%). This highlights the necessity of personalised therapeutic approaches that address the unique factors perpetuating AUD in women.

Disclosure of Interest: None Declared

EPV0041

Numbing the Pain: How Alcohol Use for Chronic Pain Relief Leads to Dependency – Review and Case Study

Â. Ferreira¹*, I. Pereira², A. Falcão² and J. Teixeira²

 $^1\mathrm{S\~{a}o}$ Bernardo Hospital, Setúbal and $^2\mathrm{J\'{u}lio}$ de Matos Hospital, Lisbon, Portugal

 * Corresponding author.

doi: 10.1192/j.eurpsy.2025.947

Introduction: Chronic pain is a debilitating condition affecting 20% to 30% of adults globally, with prevalence rates rising to 19% to 38% in Europe. It is often linked to self-medication, particularly through alcohol consumption, due to alcohol's short-term analgesic properties, which act on the opioid system. However, continued alcohol use for pain relief can lead to alcohol use disorder (AUD), worsening the pain and causing physical and mental health issues.

Objectives: This study explores the relationship between alcohol use in chronic pain management and the development of AUD through a literature review and a clinical case.

Methods: A narrative literature review was conducted using PubMed with the terms "alcohol use disorder" and "chronic pain." English and Portuguese articles from the last 10 years were included, yielding 85 results. A clinical case involving a patient with chronic pain and alcohol dependence illustrates the issue.

Results: The review shows that 28% to 35% of chronic pain patients use alcohol for symptomatic relief. While alcohol may provide initial pain relief, prolonged use leads to tolerance, increased consumption,

S458 e-Poster Viewing

and a significant risk of AUD. Approximately 18% to 25% of patients meet the criteria for AUD, with men being more commonly affected. The clinical case describes a 56-year-old man with family history of AUD, who developed chronic pain after a work accident resulting in multiple trauma. The patient began consuming alcohol daily for pain relief, which escalated to an AUD diagnosis and worsened pain due to alcohol-induced hyperalgesia.

Conclusions: Alcohol use is prevalent among chronic pain patients, often as a form of self-medication. However, this practice is frequently counterproductive, as increased consumption to counteract tolerance can lead to serious complications, including hyperalgesia, psychiatric disorders, and significant difficulties in managing both pain and alcohol use disorder (AUD). The clinical case highlights these issues and reinforces the need for a multidisciplinary approach that addresses both pain management and alcohol dependence. Early detection of problematic alcohol use is essential to prevent the development of AUD. A comprehensive treatment plan, incorporating strategies for pain control and addiction management, is crucial for improving the overall health and well-being of patients dealing with chronic pain.

Disclosure of Interest: None Declared

EPV0043

Hellenic National Observatory for Internet and Gaming Addiction

G. Floros¹*, K. Siomos² and N. Christodoulou²

¹2nd Department of Psychiatry, Medical School, Aristotle University of Thessaloniki, Thessaloniki and ²Department of Psychiatry, Medical School, University of Thessaly, Larisa, Greece

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.948

Introduction: The Greek National Observatory for Internet and Gaming Addiction (NOIAD) is a state-sponsored organization that will be setup in the University of Thessaly during this year following its inclusion in the Greek National Health Plan for Mental Health 2021-2030.

Objectives: In this presentation of the setup and goals of NOIAD, a case will be brought forward for scientific collaboration across the European continent that could culminate in similar centers in different countries.

Methods: The main publication that NOIAD intends to produce annually will have the role of a national report or at least an update of the national situation. In addition to this report, the observatory is expected to prepare a number of studies or reports on individual problems or in response to questions from state institutions (eg Parliament, ministries). Implementation of an online platform (portal) of specialized but also popular knowledge that will aim to inform health professionals and the general population (parents, pupils/students, adults with an addiction problem) with different information profiles for each population. Information lectures, educational activities for minor students, organization of an annual interdisciplinary conference.

Results: NOIAD's principal goal is the planning and implementation of actions to address digital addictions through the collection of objective, reliable and valid information about the state of Internet and Gaming addiction prevalence and related research and clinical practice in Greece. NOIAD will provide a state-of-thenation annual report and disseminate the relevant information and

conclusions to health professionals, government bodies and the wider population. Furthermore, NOIAD will plan and provide local preventative actions in the wider area of Thessaly, especially regarding the high-school and university student population; these actions will serve as blueprints for similar activities across Greece. Conclusions: Setting up a national center to provide with a complete picture of Internet Addiction and Gaming Disorder, pool together research output and coordinate preventative actions will assist with a fragmented research landscape and make better use of limited resources.

Disclosure of Interest: None Declared

EPV0045

Sexwork and transactional sex in chemsex: results of an anonymous online study

M. Gertzen¹*, D. Dubrovin Leao¹, N. Khorikian-Ghazari¹, T. Halms¹, A.-M. Strasser¹, A. Rabenstein², T. Rüther² and A. Hasan¹

¹Psychiatry and Psychotherapy, Faculty of Medicine University of Augsburg, Augsburg and ²Psychiatry and Psychotherapy, LMU Klinikum, München, Germany

 * Corresponding author.

doi: 10.1192/j.eurpsy.2025.949

Introduction: Sex work and transactional sex (SWTS), along with Chemsex, are linked to high-risk sexual behaviors and poorer health outcomes. Chemsex is the use of methamphetamine, GHB/GBL and mephedrone in a sexual context especially among men who have sex with men (MSM). Transactional sex (TS) is the exchange of sexual services for other services or things in a non professional way. Sexwork (SW) means having sex with people in exchange for money in a professional way.

Objectives: The aim of our study was to determine the prevalence rates of sex work and transactional sex (SWTS) among chemsex users and to answer the question of whether the combination of the two leads to an increased risk profile of those affected in terms of sexual health.

Methods: To achieve this, we conducted an online survey across three European German-speaking countries, targeting MSM. The survey gathered data on participants' substance use patterns, sexual behaviors, and health outcomes, with a particular focus on their engagement in SWTS. SWTS was defined as the exchange of sexual favors for money, drugs, or other material goods, which has been shown to be associated with higher risk behaviors, including unprotected sex and multiple sexual partners.

Results: A total of 399 sexually active MSM were included, categorized into three sub-groups: 129 engaging in Chemsex (MSM-CX), 128 in sexualized substance use with non-Chemsex substances (MSM-SSU), and 142 not engaging in sexualized substance use (MSM-NSU). MSM-CX reported significantly higher rates of SWTS compared to both MSM-SSU (p=.032) and MSM-NSU (p<.001), indicating that Chemsex use is strongly linked to transactional sex. Both Chemsex and SWTS were associated with higher HIV (p<.001, p=.042) and STI (p<.001, p=.023) prevalence, but no cumulative effect was found. Among MSM-CX engaging in SWTS, participants were younger (p=.006), had more sexual partners (p=.029), and reported higher substance use, including methamphetamine, mephedrone, and GHB/GBL. These factors may contribute to the increased vulnerability to HIV and STIs.