

Topiramate: HARS=9.55±1.25, HDRS=9.65±2.89, GAS=82.65±4.75; Amisulpride: HARS:4.72±3.44, HDRS=6.53±3.42, GAS=82.53±6.37. Thus, the mirtazapine augmentation group differed significantly from the venlafaxine group ($p<.000$), the topiramate group ($p=.002$), and the amisulpride group ($p=.014$).

Conclusions: Moderate to severe anxiety and depressive symptoms with concomitant low functioning were present in all subjects before treatment. Following 4–6 weeks of alcohol detoxification using various medications (venlafaxine, mirtazapine, topiramate, amisulpride) these symptoms subsided and reached normal levels in all study groups. However, in our study, mirtazapine appeared to be more efficient than the other medications in reducing psychopathology and improving global functioning.

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Addiction and pregnancy

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Background: There is a lack of research-based information on all aspects of woman's substance use and related problems including physiological and psychological effects and consequences during pregnancy.

Use of illicit substance during pregnancy can result in many pathological effects to fertility, maternal and fetal risks.

Methodes: The study reported our therapeutically approach which include best way to find safest treatment for mother and child, to reduce opioid or other illicit drug use, to reduce maternal or infant deaths, to prevent transmitted disease HIV and HCV, to reduce crime associated with drug use, to facilitate an improvement in social functioning, to prevent drug related harms occurring to pregnancy of addicted woman and to improve health and development outcomes for the baby.

Results: Pregnant women aged 15 to 25 were more likely to use illicit drugs and smoke cigarettes during the pregnancy women aged 26 to 44.7% of pregnant women aged 15 to 44 used illicit drugs during pregnancy 22% reported binge alcohol use. 40% reported smoking cigarettes.

Conclusion: Our resrch suggesting recommendation for the comprehensive program. That provided health care for mother and infant and monitoring of mother ability to retain in treatment and avoid using illicit drugs. Support women to be encouraged to register with a GP and seek maternity care. Effective pharmacotherapy treatment of PAS dependence for mother and appropriate obstetric, perinatal and neonatal outcomes. Creating of Vulnerable Infants Project (VIP).

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Mechanisms of addiction and relapse: Startling evidence for lingering appetitive effects of drug-cues in smokers and former smokers

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Background and aims: Implicit memories like consumption habits and conditioned reactions to drug-related stimuli are operational in addiction and relapse. The affective startle paradigm is an attractive tool for the measurement of the incentive salience of drug-related cues. We tested whether the stronger appetitive valence of drug cues, shown in two recent startle studies in smokers, does persist after prolonged abstinence, and may thus contribute to relapse.

Method: We examined the auditory startle reflex magnitude of mildly deprived (4–6 hours) heavy smokers ($n = 24$), former smokers ($n = 16$, mean abstinence interval 18 months), and non-smokers ($n = 24$) while they viewed smoking-related scenes or standardized unpleasant, neutral and pleasant control scenes from the International Affective Picture System.

Results: As expected, non-smokers showed no appetitive reactions toward smoking-cues. In smokers, smoking-cues had both appetitive implicit (startle suppression) and explicit (ratings for valence and craving) motivational effects, resembling those of pleasant scenes and differing from neutral and unpleasant scenes. This effect was more pronounced in smokers who later relapsed after a smoking cessation program, and in smokers consuming less than 20 cigarettes per day. Former smokers, despite reporting no craving and negative reactions to smoking cues, still showed evidence of implicit appetitive valence of these cues.

Conclusions: Nicotine addiction results in automatic appetitive reactions to drug-cues, which does not vanish after prolonged abstinence and which may thus contribute to relapses. Heavy smoking may result in a progressive internalization of smoking habits and a decline in reactivity towards external smoking-associated cues.

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Quality of life in patients undergoing opioid maintenance therapy - A comparative study of slow release morphine versus methadone treatment

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Background: Increasing research interest is focussing also on Quality of Life (QoL) in substance dependent individuals. QoL-assessments have been acknowledged as promising measurements in order to evaluate drug treatment programs.

Methods: A prospective, randomized, double-blind, double-dummy, cross-over study design was used in order to compare methadone and slow-release morphine maintenance on patients' QoL. Sixty-four participants were randomized between two treatment groups receiving either slow-release morphine capsules for 7 weeks followed by methadone oral solution for another 7 weeks (group A), or vice versa (group B). At baseline, week 7 and week 14 QoL status was evaluated using the German version of the Lancashire Quality of Life Profile.

Results: A significant time effect with respect to the domains: general state of health (0.018), mental health ($p=0.001$), general well-being ($p<0.001$), leisure time at home ($p=0.032$) and leisure time out of home ($p=0.008$). Our findings did not show any statistically significant differences between between the two treatment groups in any Quality of Life scores at week 7 and 14. At the end of study phase (week 14) group A showed significant increases in the domains general well-being (0.010), leisure time at home ($p=0.014$). Significant improvements for group B were assessed with regard to general well-being ($p=0.003$), mental health ($p=0.003$) and general state of health ($p=0.017$).