

Methods Clinical-psychopathological, clinical-laboratory, consulting of specialists, methods of psychological investigation (CIWA; CAH; SF-36) at day 1, 7 and 14 of treatment.

Results AWS quantification score on admission was 41. Further therapeutic regress of all AWS components was registered. At day 1 the patient's condition started improving, clinical score was 32; at day 3 – 17; day 5 – the score was 13, insignificant tremor remained. At day 7 of treatment, practically complete relieving effect of the therapy was ascertained. With CAH method at day 7 of the treatment, an increase of figures in all scales was registered: state of health 2.7, activity 2.4, mood 2.5. SF-36 method: at day 1 – the score was 24, day 7 – 32, day 14 – 49.

Conclusions Thus, the developed by us method of integrated treatment with inclusion of Cocarnit for withdrawal state in alcohol addicts allows to stop acute signs of pathology within 3–5 days.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0841

Attachment disorders in alcohol and gambling addicted patients: Preliminary evaluations

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Introduction The addictive behaviors can be seen as attachment disorders. In literature studies about the relationship between attachment styles and addictions are few. However, in addicted patients the identification of secure or insecure attachment styles seems to have serious implications for the therapeutic alliance and the treatment.

Objectives To study the relationships between different attachment styles and types of addiction (chemical or behavioral).

Aims To examine the role of attachment styles in patients with alcohol dependence (AD) or pathological gambling (PG).

Materials We recruited 29 with AD and 33 with GP according to DSM-IV-TR criteria; all patients were abstinent from addictive behaviors at least since one month, the experiences in close relationships (ECR) was administered for the study of attachment styles.

Results PG compared to AD has higher raw scores both anxiety factor ($P < 0.001$) and avoidance factor ($P = 0.003$) at ECR. ECR ambivalent correlates with the diagnosis of PG ($P = 0.010$); ECR avoidant correlates with AD ($P = 0.006$); ECR anxiety shows a trend of correlation with the diagnosis of AD ($P = 0.052$). The subjects showed the following attachment styles (Table 1).

Conclusions This is the first study that compares the attachment styles of patients AD and PG. We found differences in attachment styles of the two types of addiction, confirming the need of different approaches and then different types of treatment. Our findings need to be replicated in larger groups, also widening the target of other addictions.

Table 1

	Secure	Ambivalent	Anxious	Avoidant
PG	2	27	–	4
AD	1	13	6	9

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Attachment styles and severity of pathological gambling: Preliminary evaluations

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Introduction The addictive behaviors can be seen as attachment disorders. To our knowledge, the literature on the relationship between pathological gambling (PG) and attachment styles is still poorly represented. However, in addicted patients, the identification of secure or insecure attachment styles seems to have serious implications for the therapeutic alliance and the treatment.

Objectives To examine the clinical role of attachment styles in the PG patients.

Aims To study the relationships between the different attachment styles and PG and the severity of PG.

Materials We recruited 33 patients with GP according to DSM-IV-TR criteria; all patients were abstinent from addictive behaviors at least since one month, the experiences in close relationships (ECR) was administered to investigate attachment styles, the South Oaks Gambling Screen (SOGS) to investigate the severity of gambling.

Results The subjects showed the following attachment styles (Table 1). Ambivalent attachment style correlates with high scores to the SOGS ($P < 0.001$), and with a shorter period of abstinence from PG ($P = 0.022$). Patients with ambivalent attachment style have increased severity of PG at SOGS, correlating with higher raw score on the anxiety factor of ECR and lower raw score on avoidance factor (for both $P = 0.036$).

Conclusions Patients showed ambivalent attachment, and anxiety factor correlates with a greater severity of PG. Attachment style could be a severity index of PG. Our findings need to be replicated in larger groups, also widening the target of other addictions both chemical and behavioral.

Table 1

	Secure attachment	Ambivalent attachment	Anxiety attachment	Avoidant attachment
PG	2	27	–	4

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Incidence of Internet addiction in adult attention deficit hyperactivity disorder

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Objective In this study, it was aimed to determine the internet use properties of Adult Attention Deficit Hyperactivity Disorder (ADHD) patients who were followed-up at Haydarpasa Numune Research and Training Hospital, Psychiatry Department; ADHD Outpatient Clinic.

Method Thirty participants who were diagnosed with adult ADHD aged between 18–31 years rated their ADHD symptoms in childhood retrospectively, using Wender Utah Rating Scale. Patients rated current adult ADHD symptoms with the Adult ADHD DSM-IV-Based Diagnostic Screening and Rating Scale (DSRS) and severity of symptoms measured by Adult ADHD Self-Report Scale (ASRS). Internet addiction (IA) was assessed with Young's Internet Addiction Scale (IAS). It was determined that, none of 30 Adult ADHD patients have been diagnosed with IA. 29 of patient have moderate internet use although 1 of patients have risky internet use. The results revealed that total ASRS score ($P=0.020$), total Adult ADHD DSM-IV-Based DSRS score ($P=0.036$) and the Attention Deficit related properties subscale total score ($P=0.042$) were significantly correlated with the IAS total score. Subscale of the self-report scales including; failing to finish schoolworks, chores, or duties at workplace, difficulty of following through on instructions ($P=0.017$), restiveness; impaired inhibitory performance ($P=0.017$), feeling not confident ($P=0.017$), difficulty of managing time ($P=0.047$), failing to give close attention to details or making careless mistakes ($P=0.037$) are closely relevant to IAS total score.

Result In conclusion, clinical features, which are characteristic of Adult ADHD could have same shared etiology with IA. Furthermore, ADHD patients are more likely to have an IA diagnosis. However, it was thought that this result had to be supported with studies including larger samples.

Keywords Adult ADHD; Internet; Addiction

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EW0844

Internet addiction and impulsivity among university students

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Introduction The progress in technology adds to the new ways of communication between people. In our age, online communication has taken the place of face to face communication. People express themselves, become friends and in a way become who they are through the tools of social media. Many biological and psychological factors may affect the choice of people for communicating through social media.

Objective Main objective of this research is to measure the frequency of Internet addiction and its relationship to social media use and impulsivity.

Methods The population of the study is composed of 117 female (58.5%) and 83 male (41.5%) students between 18–25 years of age from Uskudar University. Barratt Impulsivity Scale and Internet Addiction Scale were used for data collection and measurement of variables.

Results Among the participants, 97.5% were found to go online everyday. Among the participants, 74.5% went online for social media use. Only 5% of the subjects fitted the criteria for Internet addiction. Thirty-six percent had limited symptoms for Internet addiction. Internet addiction symptoms and impulsivity were

positively related. The tool for Internet access did not affect Internet addiction. Those who used a smart phone went online for social media use more commonly than those who used a computer.

Conclusion It has been debated that social media and the increase in smart phone use may be affecting young people and increase internet addiction rates, however we have found that impulsivity is an important factor for internet addiction as in other types of addiction.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0845

Cognitive-behavioral therapy in young adults with major depression and alcohol dependence

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Background Adolescents and young adults are a vulnerable population to both alcohol use disorders and depressive major disorder. Use of cognitive-behavioral therapy (CBT) could help in diminishing depressive symptoms severity as well as alcohol dependence severity.

Objective To evaluate CBT efficacy in young adults diagnosed with major depressive disorder and alcohol dependence.

Methods A number of 12 patients, age 23–35, 7 male and 5 female, outpatients, diagnosed with alcohol dependence and major depressive disorder, moderate or mild episodes, according to ICD-10 criteria, were included in a 3 months CBT oriented program. All subjects were evaluated using a Visual Analogic Scale (VAS) for self-evaluation of alcohol problems severity (score ranging from 0 – absent to 10 – extremely severe), AUDIT scale, Hamilton Depression Rating Scale (HDRS) – 17 items, and Global Assessment of Functioning (GAF). Patients participated in 30 minutes individual CBT sessions, twice per week, for 12 weeks. Cognitive restructuring based on patients' diary, coping skills training, and activation techniques have been applied in the CBT sessions.

Results After 12 weeks all patients reported decreases on VAS and AUDIT scores, with mean percentages of 55 and 50, while GAF increased with 45%. HDRS scores decreased with 65%. These changes were considered significant when compared to initial values ($P=0.007$ for VAS, $P=0.009$ for AUDIT, $P=0.012$ for GAF and $P<0.001$ for HDRS), according to dependent samples t -test $P<0.05$, bivariate.

Conclusion Cognitive-behavioral therapy, focused on cognitive restructuring, coping skills training, and activating techniques is an efficacious intervention in young patients with comorbid depressive and alcohol dependence.

Disclosure of interest The presenting author was speaker for Astra Zeneca, Bristol-Myers Squibb, CSC Pharmaceuticals, Eli Lilly, Janssen-Cilag, Lundbeck, Organon, Pfizer, Servier, Sanofi Aventis and participated in clinical research funded by Janssen-Cilag, Astra Zeneca, Eli Lilly, Sanofi Aventis, Schering Plough, Organon, Bioline Rx, Forenap, Wyeth, Otsuka Pharmaceuticals, Dainippon Sumitomo, Servier.

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