

ing to an increase of problems related to it, both their side effects (psychotic symptoms) and the generation of misuse and addiction. We should pay greater attention to the prescription of opioids to patients with dysfunctional personality traits.

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The effect of alcohol administration on social behavior of rats with experimental schizophrenia

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Experimental animal modeling of schizophrenia and alcoholism allows understanding the mechanisms of comorbid pathology formation. The aim was to investigate the effect of ethanol administration on social relations in rats with experimental schizophrenia. The study was carried out on 30 Wistar adult male rats aged. After 2 weeks isolation rat social ranks were determined. Alcohol preference was evaluated in the two-bottle test. Schizophrenia was modeled by administering to rats ($n=15$) dopamine precursor levodopa-carbidopa (LC) during 5 days each month in four months experiment. The control animals ($n=15$) received water. All animals were subjected to intermittent alcoholization throughout the experiment after the introduction of the LC. The behavioral parameters evaluated in the "open field" and "despair" tests.

It was found out that the experimental rats who received alcohol did not differ in the number of interactions compared to the rats who received only alcohol. In the rats with experimental schizophrenia a significantly higher social interactions were observed compared to the control group. This is consistent with the results of the clinical studies, which have shown that patients often drink alcohol to relieve anxiety and tension. The two-bottle test has shown the difference between the experimental and control groups only in the first week of the experiment. Apparently, this can be explained by the prolonged isolation. In the despair test, before the alcoholization, the rats with experimental schizophrenia were completely immobilized, compared to the controls. After alcoholization the differences in the despair test were not observed.

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Quality of life in patients with asthma

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Introduction Quality of life (QoL) is a complex concept that depends on many factors such as life style, past experiences, expectations, future plans and ambitions. It may be altered in patients suffering from chronic disease.

Objectives Assess QoL in patients with asthma as well as associated factors.

Methods We conducted a cross-sectional, descriptive and analytic study, including 30 patients followed for asthma at pulmonary outpatient department, Hedi Chaker Hospital, Sfax, Tunisia. Asthma control level was evaluated by the Asthma Control Test (ACT). QoL

was assessed using the 36-item Short Form Health Survey (SF-36), that contains 36 questions grouped into 8 domains (D1: Physical Functioning, D2: Role limitations due to physical problems, D3: Bodily Pain, D4: General Health, D5: Vitality, D6: Social Functioning, D7: Role limitations due to emotional problems and D8: Mental Health).

Results The mean age was 51 ans. The mean duration of disease was 11 years. The average ACT score was 16.8 points. Asthma was uncontrolled in 1/3 of patients. The mean of average overall scores SF-36 was 46.22. QoL was altered in 83.3% of patients. The most altered domains were D8 followed by D7 then D4 and D2. The average overall score SF-36 was correlated to ACT score ($P<0.001$), early age of onset of the disease ($P=0.049$) and poor asthma control ($P<0.001$). Altered QoL was associated to advanced age ($P=0.016$), long duration of disease ($P<0.001$) and low ACT score ($P=0.034$).

Conclusion Optimum asthma and associated comorbidities support would improve control and therefore the patient's quality of life.

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

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Prevalence of alcohol consumption in psychiatric consultations and drug addiction consultations by application the cage questionnaire camouflaged

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Introduction Alcohol consumption associated with other psychiatric disorders in outpatient psychiatric comorbidity is a common, yet often underdiagnosed and undertreated, resulting in a worse prognosis of both diseases.

Objective To evaluate the prevalence of alcohol consumption in psychiatric outpatient consultations and compared to drug addiction consultations.

Methods A total of 25 outpatient psychiatrists of Extremadura and 10 doctors of substance abuse centers of Extremadura (CEDEX) participated in the study. They were included in the study a total of 373 patients, 244 who were in treatment at mental health center and 129 as a center of drugs.

Results The mean age of patients in psychiatric consultations was 50.05 years and 42.60 years of CEDEX. The percentage of women was 54% of cases in psychiatric consultations and 18.6% in the CEDEX. Diagnoses included in psychiatric consultations were: anxiety disorders (17.2%), depressive disorders (46.3%); personality disorders (7.8%); mild mental retardation (2.5%); psychotic disorders (12.3%); dementia (2.5%); bipolar disorder (6.1%); and ADHD (1.2%). In the consultations of drugs they were: 45.4% alcohol dependent; 15.7% to cannabis; 13.3% cocaine; 10.9% heroin; 8.1% more heroin to cocaine; and 6.6% to other addictions. A total of 18.9% of patients in psychiatric consultations had a score of 2 or more in the CAGE and 62.8% of the CEDEX.

Conclusions We found nearly a fifth of the patients attending psychiatric outpatient clinics which have a hazardous drinking, harmful or alcohol dependence, for almost two thirds of drug queries.

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