EPV0679

Adolescents' attitudes towards e-cigarette in Tunisia

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Introduction: E-cigarette use has increased over the last years. Many studies have examined teenagers' attitudes towards smoking, but did not examine adolescents' attitudes towards e-cigarettes.
Objectives: The aim of this study was to examine high school students' attitudes regarding e-cigarette safety, addictive properties and social norms and to compare e-cigarettes perceptions among e-cigarette users and non-users in Tunisia.
Methods: A survey was conducted with a sample of 234 students in Mohamed Ali high school in Sfax, a town in South of Tunisia, in February 2020. Socio-demographic data and questions about vaping and attitudes towards e-cigarettes were used to evaluate students' perceptions towards e-cigarettes.
Results: Among high school students aged 15 to 20, 58,8% have ever used e-cigarette, 38,3% had done so within the previous 30 days and 20,5 % were regular users of vapes. 53.8% of students believed that e-cigarettes are harmful. 78.4% of them thought they were less harmful than regular cigarettes and 50.5% thought they could be addictive, 45.4% of students believed e-cigarette smoking decreased anxiety and a third thought it made them sociable (33.3%) and confident (30.6%).Adolescents who used e-cigarettes had significantly more favorable e-cigarette attitudes than non-users: they believed they were less harmful than tobacco (p=0,019), they were not addictive (p=0,005), they decreased anxiety (p=0,001) and they made the user sociable (p<0,001) and confident (p=0,01).
Conclusions: Our results suggest the need to provide teenagers with the correct information about e-cigarettes risks, and the balance risk-benefit of their use.

EPV0680

Predictors of smoking cessation treatment attrition in individuals with substance use disorders

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Introduction: Attrition rates in smoking cessation treatments are high, particularly in persons with substance use disorders. It is estimated that about 55%% disengage prematurely at treatment, meaning that a large portion will not benefit from smoking abstinence. So far, no previous studies have examined predictors of dropouts in a smoking cessation treatment with persons with SUD.
Objectives: The study was two-fold: 1) to analyze the percentage of early-, late-dropouts and completers, and 2) to examine sociodemographic, psychological, and substance-related predictors of dropouts.
Methods: A total of 86 participants (69.8% males; M_{age}=43.84, SD=9.917) were randomly assigned to two psychological smoking cessation treatment: cognitive-behavioral treatment (CBT) (n=51) or CBT + contingency management (CM) (n=35). Interventions were delivered during eight consecutive weeks
Results: Of the 86 participants who completed the baseline assessment, 21 did not start treatment, 17 dropped out of treatment during treatment, and the remaining 48 completed the treatment. Predictors of early-dropout were younger age (B=-.234; p=.024; OR=.792) and lower number of days in SUD treatment (B= -.005; p=.026; OR=.995). Patients' primary substance of use was associated with reduced early-dropouts; compared to cocaine users, alcohol (B=-1.827; p=.043; OR=.161) and opioids (B=-3.408; p=.018; OR=.033) related to improved attrition. Late dropout was directly related to higher number of tobacco use cessation attempts (B=.407; p=.039; OR=1.502).
Conclusions: Incorporating strategies to improve attendance and completion rates in SUD populations should be a priority. Mobile reminders, offering online therapies, or CM to reinforce attendance to therapy may be considered.

EPV0681

Sociodemographic and clinical characteristics of patients with long-term remission with buprenorphine / naloxone in opiate use disorder

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Introduction: Buprenorphine/Naloxone (BP/NLX) is an effective drug combination used in long-term maintenance therapy in opiate use disorder (OUD). In some studies, abstinence over 180 days was defined as long-term remission (1).
Objectives: The aim of this study is to determine the sociodemographic and clinical characteristics of patients in long-term remission with BP/NLX.
Methods: In this study, 30 patients who were followed up with OUD at Akdeniz University Addiction Center and were in remission with BP/NLX for at least 180 days were evaluated retrospectively.
Results: Sociodemographic and clinical characteristics are summarized in table 1.
Conclusions: OUD is associated with lower quality of life and employment rate (2). In our study, the rate of working in a regular job is high. It can be concluded that prolonged remission improves functionality in patients. Although patients are in remission for a long time in terms of opiate use, 20% of patients continue to use cannabis and 10% continue to use cocaine. In a study, there was no difference in productivity and quality of life between BP users with and without

Table 1. Sociodemographic and clinical characteristics of the patients.

Age (Mean±SD) (Min-Max)		32.96±6.02 (24-51)	
		n (30)	%
Sex	Male	25	83.3
	Female	5	16.7
Marital status	Single	14	46.7
	Married	9	30
	Divorced	7	23.3
Child	Yes	10	33.3
	No	20	66.7
Working	Yes	25	83.3
	No	5	16.7
Forensic case	Yes	13	43.3
	No	17	56.7
Infectious disease	Yes	8	26.7
	No	22	73.3
Heroin use route	Foil	22	73.3
	Intravenous	8	26.7
Marijuana use	Yes	6	20
	No	24	80
Cocaine use	Yes	3	10
	No	27	90
Methamphetamine use	Yes	1	3.3
	No	29	96.7
Buprenorphine dosage (mg) (Mean±SD)		5.00±2.91	
Naloxone dosage (mg) (Mean±SD)		1,25±0.72	
Abstinence time (Day) (Mean±SD) (Min-Max)		695.50±393.80 (210-1600)	
Hemoglobin (g/dL) (Mean±SD) (Min-Max)		14.49±0.83 (12.90-16.30)	
Leukocyte (x10³/mm³) (Mean±SD) (Min-Max)		8.06±1.84 (5.57-12.63)	
Alanine Transaminase (U/L) (Mean±SD) (Min-Max)		26.03±21.77 (8-118)	
Aspartat transaminaz (U/L) (Mean±SD) (Min-Max)		26.96±17.28 (13-95)	
Blood Urea Nitrogen (mg/dL) (Mean±SD) (Min-Max)		11.93±13.45 (7-19)	
Creatinine (mg/dL) (Mean±SD) (Min-Max)		0.84±0.15 (0.60-1.34)	
Vitamin B12 (pg/ml) (Mean±SD)		356.25±166.40	
Sedimentation (mm/hour) (Mean±SD)		6.75±6.39 (2-16)	

current cannabis use. Continued use of cannabis by patients may be related to this condition. However, cannabis use increases many mental illnesses, especially psychosis (4). In patients in remission with BP/NLX, studies should also be carried out to avoid other substances than opiates. In our study, in accordance with the literature (5), no negative effects on kidney and liver functions were observed with long-term BP/NLX treatment. BP/NLX appears to be safe in prolonged use.

Disclosure: No significant relationships.
Keywords: opiate; remission; naloxone; buprenorphine

EPV0682

In-treatment behaviors in a multicomponent intervention to promote smoking cessation and prevent weight gain among smokers with obesity: A pilot study

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Introduction: Smoking rates are quite high among overweight and obese individuals. Many smokers with excess weight are at increased risk for health complications and report that concern about post-cessation weight gain is a barrier to quitting. It is necessary to perform studies to assess the efficacy of interventions for smoking cessation among individuals with excess weight.
Objectives: To describe in-treatment behaviors, in terms of smoking and weight, in an integrated intervention for smoking cessation and weight gain management.
Methods: A total of 16 smokers (37.5% females, M_{age}=52.31, SD=9.58) were randomly assigned to one of the two following 8-week smoking cessation conditions: 1) Cognitive-Behavioral Treatment (CBT) for gradual smoking cessation + a Weight Gain Prevention (WGP) module for weight stability (n=7); 2) the same

treatment alongside Contingency Management (CM) for smoking abstinence (n=9). Smoking behavior (cigarettes per day, carbon monoxide (CO) in expired air and urine cotinine) and weight were tracked at every visit from baseline through the end of treatment.
Results: Cigarettes per day significantly decreased in both conditions (p≤.028), as well as CO (p≤.018) and cotinine (p≤.043). Regarding body weight gain, participants maintained their body weight (Kg) from baseline to the end of treatment (CBT+WGP: Δ_{kg}= .671, CBT+WGP+CM: Δ_{kg}= .667, p≥.058) and their BMI (CBT+WGP: 30.56 vs. 30.85, CBT+WGP+CM: 29.74 vs. 29.85, p≥.139).
Conclusions: Preliminary data indicated that a multicomponent intervention to promote gradual smoking cessation and prevent weight gain facilitates in-treatment tobacco reduction and weight stability. CM procedures improved in-treatment smoking behaviors.

Disclosure: No significant relationships.
Keywords: obesity; contingency management; weight gain prevention; smoking cessation

EPV0683

Gaming addiction among Tunisian adolescent

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Introduction: Gaming is a source of addiction for adolescents. It is recognized as a behavioral and mental health condition, both by the American Psychiatric Association and by the World Health Organization.
Objectives: To determine the prevalence of gaming addiction among secondary school students.
Methods: This cross-sectional study was conducted between September and October of 2020 among students enrolled in secondary school. The participants had filled the Game addiction scale and a data file regarding the socio-demographic information, physical and information about the internet access and use.
Results: The initial sample was composed of 180 secondary school students. Among them 28 were excluded because they did not play video games. Final sample consisted of 152 students (90 males, 62 females) with a mean age of 13.14 ± 1.2 years. The average duration of connection among participants was 5.3 hours per day. Nearly one quarter of the participants (24,3%) played videogames more than 20 h per week. The prevalence of gaming addiction was 21,7%. The participants with gaming addiction were, on average, younger than those who were not addicted to gaming Game-addicted individuals were more likely to be male than female (13,8% vs 7,9%; p=0,036). There was, also, a significant relation between IA and having academic difficulties (p=0.042).
Conclusions: Based on our study findings, that gaming addiction is a challenging problem among Tunisian adolescents. We recommend authorities consider gaming addiction a serious problem for the young population and make this growing phenomenon an adolescent health priority.

Disclosure: No significant relationships.
Keywords: gaming; Addiction; adolescent