

PW01-249 - TREATMENT STRATEGIES FOR THE MANAGEMENT OF THE SELF-AGGRESSIVE MANIFESTATIONS IN HEROIN DEPENDENCE

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Objective: To evaluate the efficacy of three different strategies in the management of self-aggressive behavior (defined as repeated overdoses, explicit suicidal attempts or self-mutilation) observed in heroin dependent patients.

Methods: A group of 16 patients, mean age 26.2, diagnosed with heroin dependence, were treated as outpatients, with (1) oxcarbazepine (mean daily dose 900 mg), (2) cognitive behavioral therapy focused on coping strategies and cognitive restructuring (2 sessions per week) or (3) the combination of the previous two methods. All the included patients were monitored for 6 months using Inventory of Drug Taking Situations (IDTS), Clinical Global Impression-Improvement (CGI-I), Suicide Attempt-Self Injury Interview-Short Version (SAS II-B) and Global Assessment of Function (GAF). The randomization of the patients in the three groups was single blinded.

Results: Oxcarbazepine was well tolerated and no drop out related to adverse events was registered. Patients that received combined therapy registered an improvement ($p < 0.01$) in all self-aggressive behaviors (33% to baseline), global functioning (25%) and clinical impression (24%). There was a significant difference between this group and the psychotherapy only treated group ($p < 0.01$ on SAS II-B, GAF, CGI), but not significant when it was compared to oxcarbazepine group ($p = 0.06$). Regarding the impact of treatment strategies over the severity of addiction, only the combined therapy had some success, by decreasing with 11% the IDTS score.

Conclusion: The combined therapy, using CBT and oxcarbazepine, reduced the risk for self-aggressive behaviors on medium term in heroin dependent patients and mildly decreased the severity of the dependence.