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EV1440

What are the predictors of success in smoking cessation program?

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Smoking is the most important avoidable cause of morbidity and premature mortality in the European Union and other countries. Identification of individual characteristics that predict success in smoking cessation is highly desirable. Psychological determinants of smoking cessation, especially depression and anxiety disorders are associated with a higher prevalence of smoking, a higher rate of nicotine dependence, and elevated withdrawal symptoms. In this study, we aimed to identify the determinants that effect the smoking cessation program success. We scanned 232 patient files, who attended between February 2016–June 2016 in Smoking Cessation Program in a State Hospital. The patients who have applied at least two times to unit were included to study. Phone calls were done 6 months after first admission to check the status of smoking. Then we compared sociodemographic characteristics, nicotine dependence levels and psychological symptoms of patients. Sociodemographic Data Form, Fagerstrom Nicotine Dependence Scale and Symptom Check List-90 were done with every patient. It is important to determine the predictors to quit smoking for smoking cessation program. In many studies, the level of nicotine dependence has been identified as the main predictor of successful smoking cessation. It is known that the psychiatric co-morbidity is related with low success in this program. Determining psychiatric co-morbidity and treating this will be effective for success of smoking cessation.

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Alexithymia in patients with substance use disorders

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Introduction Alexithymia is considered as a deficit in emotion processing. It includes difficulty to identify and describe feelings as well as discriminate between feelings and physical sensations. Alexithymia may be a risk factor for substance use (SUD).

Objectives The objective of this work is to identify the prevalence and correlates of alexithymia among patients with SUD.

Methods This study concerns 40 subjects who were hospitalized in a rehabilitation center in Sfax. The subjects completed a form investigating sociodemographic and drug use characteristics. Alexithymia was assessed using the Toronto Alexithymia Scale TAS-20 a. The TAS-20 have three factors: difficulty in identifying feelings (F1), difficulty in describing feelings (F2), and externally oriented thinking (F3).

Results The mean age of 30.86 ± 8.07 years. The mean score of alexithymia was 65.39 ± 9.65 (42–83). The scores of its dimensions were 25.3 ± 6.10 for F1, 17.16 ± 3.3 for F2 and 23.16 ± 3.18

for F3. The prevalence of alexithymia was 62.8% among addicts. High alexithymic patients did not differ from low or moderate alexithymic patients in terms of, employment, education or the type of substance. TAS-20 was correlated to socio-economic status ($P=0.002$). No correlation was observed between age and alexithymia (total TAS-20) when measured as a continuous variable ($P=0.802$). High alexithymic patients exhibited a higher preference for poly-substance use compared with no alexithymic patients ($P=0.05$).

Conclusion Findings suggest that alexithymia is frequent in SUD patients. It should be noted in clinical practice that many patients with SUD may have a reduced capacity to identify and describe feelings during detoxification.

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EV1442

An unusual case of 'laughing gas' addiction in Singapore

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Objective Recreational use of nitrous oxide (N₂O) or 'laughing gas' inhalation is a common phenomenon in countries like UK and US where it is associated with music festivals and parties. However, as far as we know, recreational N₂O use in Singapore has hitherto not been reported in the press or scientific journals. We report the first case of N₂O use and addiction in a young Singaporean male who was introduced to it by a friend from a Western country where its use is prevalent.

Methods A 20-year-old Singaporean male with an existing psychiatric diagnosis of major depression, presented with a 3 year history of solitary regular N₂O inhalation that escalated from infrequent low dose use to the current daily high-dose use which he was unable to control. He exhibited symptoms of dependence – including preoccupation, tolerance, withdrawal and difficulty in cutting down. No major adverse medical complications were noted so far.

Results The patient was assessed to have Nitrous Oxide Dependence; and is currently undergoing regular counselling sessions in an attempt to motivate him to cut down or stop his N₂O use.

Conclusion This case is unique for 2 reasons:

– extant literature suggests that only anecdotal evidence exists for psychological dependence of N₂O in Singapore; yet our patient clearly demonstrates psychological dependence;

– this is the first reported case of N₂O use disorder in Singapore; and perhaps ASEAN, with the unusual presentation in a young male whose use is solitary and private.

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Readiness to change, insight and motivation in hospitalized alcohol-dependent patients in three countries

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