coefficient, *p*—significance level; * Confidence interval (CI) computed with method: bootstrap percentiles; ** Beta (β) is completely standardized effect size.
Conclusions: Depressiveness plays the role of a mediator between neuroticism, extraversion, agreeableness as well as conscientiousness, and work addiction. Depressiveness is a factor which increases the risk of work addiction.

Disclosure of Interest: None Declared

EPV0032

Behavioral addictions an updated look in the child and adolescent population

Y. D'Hiver Cantalejo[1]*, A. Helo Basha[1], V. Ros Fons[1] and C. Delgado Gandia[1]

[1]Psiquiatria, Hospital Nuestra Señora Del Prado, Talavera de la Reina, Spain
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.943

Introduction: BEHAVIORAL ADDICTIONS AS A REPETITIVE PATTERN OF BEHAVIOR WITH DECREASE IN SELF-CONTROL AND A POWERFUL DESIRE TO CARRY OUT IT, DESPITE THE NEGATIVE CONSEQUENCES; WITH ACCOMPANYING SYMPTOMATOLOGY OF IRRITABILITY, CONCERN AND ANXIETY.
Objectives: ANALYZE THE RESULTS ON REPORTS OF BEHAVIORAL ADICTIONS
Methods: IN THE REPORTS ON BEHAVIORAL ADDICTIONS, ESTUDES (SURVEY ON THE DRUG USE IN SECONDARY EDUCATION IN SPAIN, 14-18 YEARS OLD) AND EDADES (SURVEY ON ALCOHOL AND DRUGS IN SPAIN) WE FOUND THE FOLLOWING:

- MANY MINORS PARTICIPATE IN GAMBLING GAMES.
- THE USE OF THE INTERNET, GAMBLING WITH MONEY AND VIDEO GAMES ARE VERY COMMON PRACTICES.
- ONLINE BETTING GAMES ARE MORE PREVALENT IN YOUNG PEOPLE.
- WITHIN THE PATHOLOGICAL GAME, A GREATER PREVALENCE OF BEHAVIOR IS OBSERVED RISK.
- WITHIN THE ABUSIVE USE OF THE INTERNET, GREATER CONSUMPTION OF CANNABIS AND ALCOHOL.

Results: REGARDING THE TREATMENT, THE USEFULNESS OF COGNITIVE PSYCHOTHERAPY IS RECOGNIZED. BEHAVIORAL AND THE USE OF PSYCHODRUGS SUCH AS NALMEFENE AND NALTREXONE.
Conclusions: ADDICTION TO THE INTERNET AND VIDEO GAMES COULD BE RECOGNIZED AS PSYCHIATRIC DIAGNOSES WHEN THEY LEAD MORE COMPLEX CHARACTERISTICS. SOME STUDIES PROPOSED TO TAKE INTO ACCOUNT THE EMOTIONAL NEEDS AND THE IMPULSIVITY, WHILE OTHERS, TALK ABOUT THE NEURO-BIOLOGICAL-GENETIC COMPONENT OF ADDICTIONS.

Disclosure of Interest: None Declared

EPV0033

Benefits and Challenges of Transition from High-Dose Methadone to Buprenorphine Depot: A Case Report

M. Delic[1]

[1]Center for Treatment of Drug Addiction, University Psychiatric Clinic Ljubljana, Ljubljana, Slovenia
doi: 10.1192/j.eurpsy.2025.944

Introduction: Opioid dependence is a complex condition that often requires long-term treatment and care. Methadone, a synthetic full opioid agonist, and buprenorphine, a partial agonist at the opioid receptor, are commonly used in substitution therapy for opioid dependence, typically administered as an oral liquid or sublingual tablet. Transitioning from high-dose methadone to buprenorphine for the treatment of opioid use disorder (OUD) poses a risk of precipitated withdrawal. This risk arises from introducing a high-affinity partial agonist (buprenorphine) at the mu-opioid receptor after it has been occupied by a lower-affinity full agonist (methadone). As a result, this transition is usually only performed for patients on low doses of methadone (<30-40 mg). Microdose induction has been proposed as a potential solution to facilitate a smoother transition to buprenorphine.
Objectives: To present a case report of a rapid transition from high-dose methadone to buprenorphine depot, highlighting both the benefits and challenges of this process.
Methods: This case report describes a patient who was switched from 150 mg of methadone to 32 mg of sublingual buprenorphine using microdosing, and subsequently transitioned to a weekly 160 mg buprenorphine depot injection.
Results: The patient was successfully transitioned to sublingual buprenorphine and later to buprenorphine depot without experiencing withdrawal symptoms. Even later, the patient reported no signs of withdrawal and was satisfied with the buprenorphine dosage. The patient attended monthly check-ups with the doctor; however, 15 days after the transition, he began consuming alcohol and soon after, started using cocaine.
Conclusions: This report supports the use of microdose induction for initiating buprenorphine, particularly for patients stabilized on high doses of methadone who may struggle with traditional buprenorphine induction methods. Although the patient remained abstinent from opioids, he quickly relapsed with alcohol and cocaine, issues that had not been present during his methadone treatment. Regular and more frequent therapeutic assessments are very important for many patients to prevent relapse.

Disclosure of Interest: None Declared

EPV0034

The Relationship Internalized Stigmatization and Depression among Adolescents with Substance Use: A Cross-Sectional Study

M. Demir[1]*, F. C. Gümüş[2] and G. Dikeç[3]

[1]Nursing; [2]Psychiatric Nursing, Dicle University, Diyarbakır and [3]Psychiatric Nursing, Fenerbahçe University, İstanbul, Türkiye
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.945

https://doi.org/10.1192/j.eurpsy.2025.945 Published online by Cambridge University Press

Introduction: Although stigmatization is a barrier to treatment for many individuals and groups, individuals with mental disorders are the most affected by stigmatization. Among mental disorders, substance use disorders are the group with high levels of social stigma and internalized stigma. Internalized stigma may lead to a decrease in self-esteem and withdrawal from society and may increase depressive symptoms. Among individuals who use substances, depressive symptoms are high due to both the effects of the substances used and the psychosocial and legal problems experienced. In the literature review, no study examining the relationship between internalized stigma and depression in adolescents was found.
Objectives: This study aimed to examine the relationship between internalized stigma and depression in a group of adolescents diagnosed with substance use disorder.
Methods: The study was conducted between December 2023-March 2024 with 71 adolescents between the ages of 12-18 who were diagnosed with substance use disorder and admitted to the outpatient clinic of university hospital in a city located in the southeastern part of Turkey. Information Form, Internalized Stigma of Mental Disorders Scale-Adolescent Form (ISMI-AF), and Beck Depression Inventory (BDI) were used for data collection.
Results: The mean age of the adolescents was 15.97 years (1.51); 85.9% were male, 59.2% were high school students, and 90.1% had severe depressive symptoms. According to the Pearson correlation analysis, no significant relationship was found between the total scores of the ISMI-AF and BDI; however, BDI, educational status of the adolescent, and academic achievement was found to be statistically significant as determinants of the ISMI-AF (R2=0.29). It was determined that the variables specified in the model explained 24% of the ISMI-AF (Adjusted R Square = 0.24)
Conclusions: Almost all of the adolescents who participated in this study were found to have severe depressive symptoms. In addition to depression, adolescents' school life and academic achievement were important variables explaining internalized stigma. Since adolescents' school attendance may be a situation that will prevent substance use, interventions to be carried out in cooperation with mental health professionals and school nurses are very important.

Disclosure of Interest: None Declared

EPV0040

Westernisation of Alcohol Consumption in Women: A Rapid Pathway to Dependence and Increased Detoxification Service Use

Â. Ferreira[1]*, I. Pereira[2], M. Cameira[2], M. Andrade[2], S. Morais[3] and J. Teixeira[2]
[1]São Bernardo Hospital, Setúbal; [2]Júlio de Matos Hospital, Lisbon and [3]Garcia de Orta Hospital, Almada, Portugal
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.946

Introduction: The Westernisation of alcohol consumption habits among women has led to increased alcohol intake and a rise in Alcohol Use Disorder (AUD) cases in females. Although AUD prevalence remains higher in men (7.7% compared to 1.5% in women), women display distinct features in the disorder's progression, such as the telescoping effect, where the transition from initial consumption to dependence occurs more rapidly. This trend underscores the importance of studying frequent female users of alcohol detoxification services to identify contributing factors to this accelerated progression.
Objectives: This study seeks to characterise frequent female users of alcohol detoxification services, focusing on gender differences, particularly the faster progression of alcohol dependence in women and the influence of Westernisation on their drinking habits.
Methods: A retrospective analysis was performed on clinical records from 2022 to 2023 for patients hospitalised at the Alcohol Treatment and Rehabilitation Unit. The analysis included patients who were hospitalised two or more times within a 12-month period. Demographic, psychosocial, and clinical variables were compared, with a particular focus on female patients.
Results: Of the 360 patients admitted between 2022 and 2023, 37 were readmitted within 12 months. Women constituted 29.7% of these cases, with an average age of 52 years (compared to 51 in men), and were more often divorced or separated (81.8% vs 76.9%) and unemployed (72.7% vs 69.2%). Psychiatric family history (72.3% vs 65.4%) and psychiatric comorbidities (90.9% vs 61.5%) were more prevalent in women. Women also had a higher total number of hospitalisations (4.09 vs 3.62), although their 12-month readmission rates were similar to men (1.46 vs 1.50).
Conclusions: These findings support the literature on the telescoping effect, evidenced by women's older age and a similar number of readmissions despite a more precarious social situation and greater psychiatric comorbidities. Notably, although women were a minority among readmissions, their proportion exceeded the expected prevalence rate (30%/70% vs 15%/85%). This highlights the necessity of personalised therapeutic approaches that address the unique factors perpetuating AUD in women.

Disclosure of Interest: None Declared

EPV0041

Numbing the Pain: How Alcohol Use for Chronic Pain Relief Leads to Dependency – Review and Case Study

Â. Ferreira[1]*, I. Pereira[2], A. Falcão[2] and J. Teixeira[2]
[1]São Bernardo Hospital, Setúbal and [2]Júlio de Matos Hospital, Lisbon, Portugal
*Corresponding author.
doi: 10.1192/j.eurpsy.2025.947

Introduction: Chronic pain is a debilitating condition affecting 20% to 30% of adults globally, with prevalence rates rising to 19% to 38% in Europe. It is often linked to self-medication, particularly through alcohol consumption, due to alcohol's short-term analgesic properties, which act on the opioid system. However, continued alcohol use for pain relief can lead to alcohol use disorder (AUD), worsening the pain and causing physical and mental health issues.
Objectives: This study explores the relationship between alcohol use in chronic pain management and the development of AUD through a literature review and a clinical case.
Methods: A narrative literature review was conducted using PubMed with the terms "alcohol use disorder" and "chronic pain." English and Portuguese articles from the last 10 years were included, yielding 85 results. A clinical case involving a patient with chronic pain and alcohol dependence illustrates the issue.
Results: The review shows that 28% to 35% of chronic pain patients use alcohol for symptomatic relief. While alcohol may provide initial pain relief, prolonged use leads to tolerance, increased consumption,

https://doi.org/10.1192/j.eurpsy.2025.945 Published online by Cambridge University Press