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(5 mg) daily; oral Sonapax 1 tablet (25 mg) three times a day for 3-5 day treatment) used for a new purpose. 17 patients experienced this method. Efficacy: alcohol dysphoria acute manifestations were relieved by our method within 3-5 days that 37.8% exceeds conventional treatment. In 15 minutes, patients decreased irritability, motor restlessness, stress, cravings for alcohol. In 30 minutes, the patients fell asleep. Sleep lasted 3.5 hours on average. Subsequently, patients denied craving for alcohol, calmed down emotionally and psychomotorically, wished to be treated for alcoholism. No dysphoric relapses were observed.

Conclusions: The proposed multimodality method alleviates alcohol-induced dysphoria, involving pharmacotherapeutic triad along with psychotherapeutic potentiation.

Keywords: Alcohol; Addiction; Dysphoria; Treatment

EPP1321

Alcohol addiction complicated with comorbid amnestic disorders: The search for innovative approaches to treatment

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Introduction: Alcohol amnesia and palimpsests belong to understudied areas in addictology concerning the pathogenesis, risk factors, and development of effective integrated, targeted modalities of therapy, prevention, and after-treatment care.

Objectives: Development of a new integrated, pathogenetically grounded approach to the emergency and routine therapy for immediate and long-term consequences of amnestic alcohol intoxication. Methods: Modern complex clinical-psychopathological, pathopsychological, laboratory, electrophysiological, biochemical examination; method of analogues and prototype analytical examination. Results: Integrated anti-amnestic pharmacotherapeutic triad: Noobut IC (Phenibut) orally, before meals, for 6 days, twice a day: 250 mg in the morning, 500 mg at night, within days 7-14 250 mg twice: in the morning and at night; Vitaxon 2.0 ml daily, intramuscularly, No10 totally; ozone therapy for 10 days (ozone dissolved in olive oil, 6 mg/100 ml concentration), 5 ml orally 3 times a day. Complex therapy is concurrent with synergistic psychotherapeutic potentiation. Supportive anti-relapse prevention of alcohol-induced amnesia, palimpsests with Noobut IC: 1 tablet (250 mg) orally in the morning for 2 months. The pathogenetic support of the pharmacotherapeutic triad in treatment for alcohol addiction, comorbid with amnestic disorders, is pathogenetically focused on pharmacological properties of each component of the triad and their potentiating effects, involving most pathogenetic mechanisms of this disease.

Conclusions: Relieving and prophylactic efficacy of the proposed pharmacological triad (Noobut, Vitaxon, ozone and concurrent psychotherapeutic potentiation) is proven by the statistical reliability method and illustrated by clinical examples of patient-specific research.

Keywords: Alcohol addiction; Cognitive disorders; Amnesia; Treatment

EPP1322

Method of relieving hypertoxic alcohol abuse states in alcohol dependence

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Introduction: Currently, alcohol dependence is characterized by immediate onset of dipsomania states (code F10.26, ICD-10) interpreted in clinical addictology as reliable diagnostic signs of morbid alcohol dependence. These are classified clinically by rate, severity, therapeutically resistant post alcohol comorbidities (alcoholinduced polyneuropathy, hepatic dysfunctions, etc.), and by the presence of "lucid spaces", when patients, depleted physically and mentally by hypertoxic alcohol abuse states, periodically (after binge drinking) intake no alcohol.

Objectives: Effectiveness improvement and reducing time of treatment for hypertoxic alcohol abuse states by reasonable pathogenetic use of highly effective drugs, wide polymodality and synergistic pharmacological range, with few side effects, potential for inclusion to the conventional standard treatment patterns according to thiamine concepts.

Methods: Valid clinical-diagnostic, laboratory, biochemical, electrophysiological, psychological (scaling, testing), statistical methods for identification of alcohol dependence complicated by hypertoxic alcohol abuse states.

Results: A new method of alleviating the hypertoxic intoxication in alcohol dependence has been developed on representative clinical material, which involves conventional pharmacological and drugfree symptomatic remedies and methods. Along with psychotherapeutic potentiation, a therapeutically targeted pharmacological complex was prescribed: intramuscular Vitaxon № 10 per course; Sibazon 0.5% solution, 2 ml intramuscular, 3-5 injections per course; oral Phenazepam, one tablet (0.001g) twice a day for 10-14 days; Cocarnit one ampoule daily intramuscular injection, for a course of 3-10 injections.

Conclusions: The effectiveness of the proposed pharmacological complex has been proven by the statistical reliability method and illustrated by clinical examples of patient-specific research.

Keywords: Alcohol addiction; Intoxication; Treatment

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Method of treating alcohol dependence complicated by amnestic disorders

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