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Objectives: To evaluate suicidality in MDD patients with insomnia compared to those without insomnia.

Methods: From the National Inpatient Sample (NIS 2006-2015) database using ICD-9 code, we obtained patients with the primary diagnosis of MDD and comorbid diagnosis of insomnia disorders (MDD+S). We compared it with MDD patients without insomnia disorders (MDD-S) by performing a 1:2 match for primary diagnosis code in the unweighted dataset. Suicidal ideation/attempt data were compared between the groups by multivariate logistic regression analysis.

Results: After the diagnostic code matching, 139061 patients were included in the MDD+S group and 276496 patients in the MDD-S group. MDD+S patients were older (47 years vs 45 years, p < 0.001) compared to the MDD-S group. Prevalence of Suicidal ideation/ attempt was 56.0% in the MDD+S group and 42.0% in the MDD-S group (p < 0.001). After adjusting for age, sex, and race, MDD+S was associated with 1.8 times higher odds of suicidal behavior compared to the MDD-S group. (Odds ratio: 1.79, 95% confidence interval 1.68-1.91, p < 0.001).

Conclusions: Insomnia in MDD patients is significantly associated with the risk of suicide. It is important to be watchful for insomnia in MDD patients.

Disclosure: No significant relationships.

Keywords: Insomnia; Depression; Suicide; mood disorders

O285

Sleep in adults with autism spectrum disorder and adhd: A meta-analysis

J.A. Ramos-Quiroga*

Department Of Psychiatry, Hospital Universitari Vall d'Hebron. Universitat Autònoma de Barcelona, Barcelona, Spain *Corresponding author.

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Introduction: Sleep-related problems have been frequently reported in neurodevelopmental disorders, with special emphasis in Autism Spectrum Disorder (ASD) and Attention Deficit/Hyperactivity Disor-der (ADHD).

Objectives: To perform a meta-analysis (PROSPERO's CRD42019132916) on sleep disturbances in adults with ASD and/or ADHD.

Methods: A total of 1126 studies and 66 references were identified by electronic and manual searches, respectively. Of these, 42 studies were included in the meta-analysis.

Results: showed that both disorders share a similar sleep-impaired profile with higher sleep onset latency, poorer sleep efficiency, greater number of awakenings during sleep, and a general lower self-perceived sleep quality compared with healthy controls. A higher proportion of N1 sleep was found in ASD participants, while a greater Periodic Limb Movements in Sleep is specific in ADHD adults.

Conclusions: Sleep is impaired by several sleep problems and disorders in both ASD and ADHD adults. More research is needed to develop more awareness in mental healthcare, and better treatment of this impairing comorbidity in ASD and ADHD

Disclosure: No significant relationships. **Keywords:** meta-analysis; ADHD; autism; sleep Addictive disorders

O286

Opium tincture for opioid substitution treatment

M. Nikoo^{1*}, K. Kianpoor¹, N. Nikoo¹, S. Javidanbardan¹, A. Kazemi¹, F. Choi¹, M. Vogel², A. Gholami³, S. Tavakoli⁴, J. Wong¹, E. Moazen-Zadeh⁵, R. Givaki⁶, M. Jazani⁷, F. Mohammadian⁸, N. Markazi Moghaddam⁹, C. Schütz¹⁰, K. Jang¹ and S. Akhondzadeh¹¹

¹Psychiatry, Addictions and Concurrent Disorders Research Group, Institute of Mental Health, Vancouver, Canada; ²Division Of Substance Use Disorders, Psychiatric Services of Thurgovia, Thurgovia, Switzerland; ³Substance Use Disorder, Kian Methadone Maintenance Treatment Clinic, Sari, Iran; ⁴Private Practice, Rooz-e-No, Methadone Maintenance Treatment Clinic, Shiraz, Iran; ⁵Department Of Psychiatry, Addiction Institute of Mount Sinai, New York, United States of America; ⁶Psychosomatic Research Center, Isfahan University of Medical Sciences, Isfahan, Iran; ⁷Vice President Of Sales, Marketing, Export & Medical Department, Darou Pakhsh Pharmaceutical Mfg. Co., Tehran, Iran; ⁸Pharmacovigilance & Clinical Trial Manager, Darou Pakhsh Pharmaceutical Mfg Co., Tehran, Iran; ⁹Department Of Health Management And Economics, School of Medicine, AJA University of Medical Sciences, Tehran, Iran; ¹⁰Psychiatry, Institute of Mental Health, Vancouver, Canada and ¹¹Psychiatric Research Center, Roozbeh Hospital, Department Of Psychiatry, Faculty of Medicine, Tehran University of Medical Sciences, Tehran, Iran

*Corresponding author.

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Introduction: Opium tincture (OT) is widely used for opioid substitution treatment (OST) in Iran.

Objectives: To determine if OT is a safe and effective medication for OST.

Methods: Opium Trial was a multicenter, double-blind, noninferiority randomized controlled trial, with 204 participants with opioid dependence in Iran. Participants were then randomized to OT or methadone arms with an allocation ratio of 1:1 and were followed for 12 weeks. The primary outcome was retention in treatment, compared between the two groups using both intention-To-Treat (ITT) and Per-Protocol (PP) analyses.

Results: A total of 70 participants (IT: 68.6%, PP: 69.3%) in methadone arm and 61 participants (ITT: 59.8%, PP: 60.4%) in OT arm remained in the treatment. The relative retention rate was 1.15 (0.97, 1.36) in both analyses in favour of methadone. A total of 46 out of 152 (30.3%) participants in OT arm and 83 out of 168 (49.4%) participants in methadone arm reported opioid use outside the treatment. The difference in these two proportions (OT - methadone) was 19%: (10%, 28%) in favour of OT. The proportion of patients with adverse events were not different between the two arms (P = 0.06). There was no serious AE in OT arm.

Conclusions: Opium tincture is a clinically effective and safe medication, but this study could not conclude if it was as equally effective as methadone in retaining participants in treatment, but it showed that OT was superior to methadone in reducing opioid use outside the treatment.

Disclosure: No significant relationships.

Keywords: Iran; Opium tincture; Opioid substitution treatment; Randomized clinical trial