

International Joint Congress

www.congresalbatros.org

December
7th, 8th and 9th 2021
Novotel Tour Eiffel
PARIS | FRANCE

WADD & ALBATROS

Quand les addictions mettent au défi les autres disciplines
Psychiatrie, Hépatologie, Cancérologie, Infectiologie, Sociologie, Politique...

When Dual Disorders challenge other disciplines
Addictions and other mental disorders

Avec le parrainage de





**Une pluridisciplinarité
au service des usagers
fondée sur les connaissances
et les pratiques**

Fédération Française d'Addictologie

- ✓ *lieu de convergence de tous les acteurs du champ des conduites addictives*
- ✓ *réunit aussi bien les professionnels que les usagers*
- ✓ *qu'il s'agisse de drogues licites (tabac, alcool), illicites (cannabis, opiacés...) ou d'addictions sans produit*

- Une organisation nationale
- Une présence dans toutes les régions
- Connaître, transmettre
- Prévenir, soigner, accompagner
- Débattre
- Contribuer aux politiques publiques





QUAND LES ADDICTIONS METTENT AU DÉFI LES AUTRES DISCIPLINES

Le congrès 2021 de l'ALBATROS se fera dans un contexte qui permettra à la fois de retrouver le fil de nos vies, mais aussi celui des échanges scientifiques qui sont la matrice de nos recherches, de nos réflexions et de nos pratiques cliniques et préventives. Cette année, l'Albatros affirme encore davantage sa dimension internationale en s'associant avec le World Association on Dual Disorders (WADD). C'est à la fois une garantie sur la qualité des échanges et des travaux qui seront présentés, mais aussi sur le sujet majeur des pathologies duelles.

En effet si l'addictologie est une discipline qui s'est construite au carrefour de nombreuses autres (cancérologie, hépatologie, neurologie...), c'est avec la psychiatrie que les interactions et la confrontation des champs sont à la fois fréquentes et fécondes.

Les pathologies duelles, ou le double diagnostic en addictologie, correspondent à l'association d'un trouble de l'usage de substances et d'un trouble psychiatrique. Elles sont l'illustration la plus évidente du défi que les deux disciplines doivent relever ensemble. C'est en effet une situation qui fait partie de la pratique courante des addictologues et des psychiatres puisque on estime qu'elles existent chez environ la moitié des patients.

L'importance du thème de ce congrès est indéniable. Il justifie la nécessité des confrontations internationales qui, cette année encore, seront à la hauteur de la richesse et de la complexité du sujet. Recherche fondamentale, épidémiologie, protocoles cliniques, diagnostiques et thérapeutique, et dimension sociale feront l'objet de communications et de travaux en ateliers. Ils permettront des échanges non seulement entre disciplines mais aussi entre tous les professionnels de la santé (chercheurs, universitaires, cliniciens, infirmiers, psychologues, éducateurs...) qu'ils soient français ou du monde entier. Car si les addictions mettent au défi les autres disciplines, ils sont aussi un challenge à relever pour tous les professionnels.

L'ALBATROS est heureux et fier de s'être associé avec le World Association on Dual Disorders (WADD) pour cet événement qui réunit des représentants de 70 pays parmi les plus éminents de la recherche et de la clinique au niveau mondial.

Nous n'avons donc aucune crainte en vous souhaitant un bon congrès à tous !



Amine BENYAMINA
President of ALBATROS



Pedro RUIZ
President of WADD



Nestor SZERMAN
Vice President of WADD



Icro MAREMMANI
Secretary of WADD

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MASQUE OBLIGATOIRE

PENDANT TOUTE LA DURÉE DU CONGRÈS



FACE MASK REQUIRED

DURING THE CONGRESS



Avec le soutien institutionnel de



ORGANISATION MÉDICALE DU CONGRÈS DE L'ALBATROS

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#TousAntiCovid

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Tuesday December 7

	ROOM 1	ROOM 2	ROOM 3	ROOM 4
1.00	Welcome to the Congress Pedro Ruiz - WADD President & Amine Benyamina - ALBATROS President			
1.30	Epidemiology of Dual Disorders Matthew Hickman - Bristol - UK & Jürgen Rehm - Toronto - Canada	Dual Disorders and Cancer Matthew Carpenter - Charleston - USA & Pol Rovira - Barcelona - Spain	SYMPOSIUM Criminal non-liability and addiction, where do we go now? Cyril Azif - Brest - France Mathieu Lacambre - Montpellier - France & Cyril Manzanera - Montpellier - France	LECTURE Predicting Patient Outcomes Simon Deniel - Caen - France Louise-Adelaide Jakubiec - Bordeaux - France Laura Lambert - Bordeaux- France & Margaux Poireau - Paris - France
2.45				
2.45	ABBVIE Laboratory Symposium Table ronde - Elimination de l'hépatite C en France : Où est Charlie ? Faredj Cherikh - Nice - France - Hélène Donnadieu Rigole - Montpellier - France - Colette Gerbaud - Nice - France Sophie Métivier - Toulouse - France & Laurent Roudière - Paris - France			
4.15	COFFEE BREAK			
4.45	Long-acting Buprenorphine: when innovation sparks debate Fadi Meroueh - Montpellier - France Marta Torrens - Barcelona - Spain Benjamin Rolland - Lyon - France & Albert Caporossi - Patient-Expert en addictologie FPEA - France	Experimental models in dual disorders David Belin - London - UK & Rafael Maldonado - Barcelona - Spain	LECTURE Virtual Therapies Marc Auriacombe - Bordeaux - France Yasmina Frem - Sèvres - France Thomas Lehoux - Strasbourg - France & Fuschia Serre - Bordeaux - France	SESSION SPÉCIALE « YOUNG INVESTIGATORS » en partenariat avec EISAI Schizophrénie, Cancer & Addiction Maud Dupuy - Toulouse - France Linda Scoriels - Paris - France El-Hadi Zerdazi - Paris - France
6.00				
6.00	Liver and addictions: gut feelings Shilpa Chokshi - London - UK & Sophie Leclercq - Bruxelles - Belgium	Expert patients speak out Tom Coderre - Boston - USA Albert Caporossi - FPEA - France	LECTURE Autism-Psychosis Spectrum and Dual Disorders Zineb Bencharfa - Salé - Morocco & Pinhas Dannon - Jérusalem - Israel	YOUNG INVESTIGATORS SYMPOSIUM ON ALCOHOL AND OTHERS DRUGS en partenariat avec REUNIRA (Réseau national de recherche en alcoologie) Farid Benzerouk - Reims - France Jérôme Jeanblanc - Amiens - France & Angeline Maillard - Paris - France
7.15				

MASQUE OBLIGATOIRE
PENDANT TOUTE LA DURÉE DU CONGRÈS


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ROOM 1	ROOM 2	ROOM 3	ROOM 4
Neurobiology, neuroimaging: what's in the box? <i>Jean-Luc Martinot</i> - Orsay - France & <i>Reinout Wiers</i> - Amsterdam - Netherlands	SYMPOSIUM Interface Personality Disorders - Problematic Substance Use Disorder <i>Guillermo Jemar</i> - Buenos Aires - Argentina <i>Gema Calero</i> - Madrid - Spain <i>W.O Inderkumer</i> - Buenos Aires - Argentina & <i>D. Gervansini Dini</i> - Uruguay	LECTURE Trauma-Anxiety Dual Disorders and Mindfulness <i>Sharon Rabinovitz</i> - Haifa - Israel <i>Simona Trifu</i> - Bucharest - Romania & <i>Johannes Veaser</i> - Brussels - Belgium	LECTURE Gaming, Food and Sex <i>Mathieu Boudard</i> - Bordeaux - France <i>Dorian Cessa</i> - Lyon - France <i>Nadine Hamieh</i> - Paris - France <i>Yolaine Rabat</i> - Bordeaux - France & <i>Benoit Schreck</i> - Nantes - France
9.00			
10.15			
10.15	ACCORD HEALTHCARE Laboratory Symposium Buprenorphine LP: towards a paradigm shift in the management of opioid addiction? <i>Georges Brousse</i> - Clermont-Ferrand - France - <i>Jean-Pierre Daulouède</i> - Bayonne - France <i>Maurice Dematteis</i> - Grenoble - France - <i>Michael FROST</i> - Conshohocken - USA & <i>Florence Vorspan</i> - Paris - France		
11.15			
11.15	SYMPOSIUM Cannabis Médical <i>Nicolas Authier</i> - Clermont-Ferrand - France <i>Georges Brousse</i> - Clermont-Ferrand - France <i>Benjamin Rolland</i> - Lyon - France	LECTURE Dual Disorders Treatment <i>Daniel Garcia-Fuentes</i> - Barcelona - Spain <i>Jorge Gonzalez Espinoza</i> - Santiago - Chile & <i>Kun-Hua Lee</i> - Hsin-chu City - Taiwan	SESSION « THE VOICE OF ADDICTION » parrainée par l’AJPA et l’AFPEP <i>Mathilde Auclain</i> - Versailles - France <i>Noomane Bouaziz</i> - Neuilly-sur-Marne - France <i>Laura Lambert</i> - Bordeaux - France <i>Ludovic Polli</i> - Nancy - France & <i>Charlotte Souchet</i> - Créteil - France
12.30	LUNCH BREAK		
1.30	Psychedelic drugs: are they the future of dual disorders treatment? <i>Matthew Johnson</i> - Baltimore - USA & <i>David Erritzoe</i> - London - UK	LECTURE Opioids and Cannabinoids <i>Hagit Bonny-Noach</i> - Ariel - Israel <i>Daniel Feingold</i> - Ariel - Israel & <i>Frank Gray</i> - Slough - UK	LECTURE Opioids & Prevention <i>Nicolas Franchitto</i> - Toulouse - France <i>Frank Gray</i> - Slough - UK <i>Rita Haddad</i> - Villejuif - France <i>Laurent Michel</i> - Paris - France & <i>Brigitte Reiller</i> - Bordeaux - France
2.45			
2.45	ZENTIVA Laboratory Symposium - Treating Alcohol Use Disorder: Tomorrow is today <i>Guillaume Airagnes</i> - Paris - France - <i>Michael Bisch</i> - Grenoble - France - <i>Georges Brousse</i> - Clermont-Ferrand - France & <i>Benjamin Rolland</i> - Lyon - France		
3.45	COFFEE BREAK		
4.15	Dual Disorders in Opioid Patients <i>Icro Marenmani</i> - Pisa - Italy & <i>Christopher Jones</i> - Atlanta - USA	SESSION PARRAINÉE PAR LA FFA Updates about the state of care for adult ADHD in France and Europe <i>Mathieu Chappuy</i> - Lyon - France & <i>Etienne Kammerer</i> - FFA - France <i>Lucie Pennel</i> - Grenoble - France	LECTURE Psychoactive Substances in real life <i>Alexandre Baguet</i> - Rouen - France <i>Leila Chaouachi</i> - Paris - France <i>Orane Gaumont</i> - Issy-Les-Moulineaux - France & <i>Caroline Vigneau</i> - Nantes - France
5.30			
5.30	PREMIER CONFERENCE La montagne : une addiction ? <i>Jean-Christophe Rufin</i> - Paris - France		
6.30			

Thursday December 9

	ROOM 1	ROOM 2	ROOM 3	ROOM 4
9.00		Grand Prix Ceremony 2021		
9.45		GILEAD Laboratory Symposium - Virus et addictions <i>Stéphane Chevaliez</i> - Crétail - France - <i>Yavor Delchev</i> - Paris - France - <i>Juliette Foucher</i> - Bordeaux - France <i>Laurent Michel</i> - Paris - France & <i>Wanda Yekhlief</i> - Neuilly sur Marne - France		
11.15			LECTURE A variety of approaches to mental disorders <i>Emmanuelle Baillet</i> - Bordeaux - France <i>François Destombe</i> - Lille - France <i>Yifrah Kaminer</i> - Farmington - USA & <i>Gérard Shadili</i> - Paris - France	 SESSION AGRÉÉE DPC proposée par la Coordination Nationale TDAH Adultes TDAH & Addictions : diagnostic et prise en charge pharmacologique de la pathologie duelle <i>Louise Carton</i> - Lille - France & <i>May Boumendjel</i> - Versailles - France
12.30		Games and gaming: IRL and virtual <i>Vincent Gouttebarger</i> - Amsterdam - Netherlands & <i>Jiang Du</i> - Shanghai - China		
	LUNCH BREAK			
1.30	ADHD and addictions <i>José Martinez-Raga</i> - Valencia - Spain & <i>Alex Baldacchino</i> *	The company we keep: framing addictions and mental health <i>Michael T. Compton</i> - New York - USA & <i>Gail Gilchrist</i> - London - UK	SESSION PARRAINÉE PAR L'AESP Découvertes dans le multivers sémiologique de l'addictologie <i>Louise Carton</i> - Lille - France <i>Romain Ick</i> - Paris - France <i>Sibylle Mauries</i> - Paris - France <i>Julien Cabé</i> - Clermont-Ferrand - France	LECTURE Covid-19 and Dual Disorders <i>Camille Ballester</i> - Montpellier - France <i>Faredj Cherikh</i> - Nice - France <i>Izza Mounir</i> - Nice - France <i>Marlène Sanz</i> - Saint-Malo - France & <i>Gabrielle Sauvin</i> - Grasse - France
2.45		Dual Disorders in times of COVID-19: Past, Present and Future Challenges CONFERENCE hosted by Bernard Basset - Paris - France <i>Nicolas Hoertel</i> & <i>Gilles Pialoux</i> - Paris - France		
4.00		COFFEE BREAK		
4.30		PREMIER CONFERENCE Le goût de l'abstraction : une addiction de l'écrivain français du 18^e au 20^e siècle ? Appetite for abstraction: a 200-year addiction in French authors ? <i>François Sureau</i> - Paris - France		
5.30				
5.30		Conclusions & Perspectives		

ROOM I

Amphitheater, Presidential program

TUESDAY DECEMBER 7

1.00 **Bienvenue au Congrès / Welcome to the Congress**
 1.30 *Pedro Ruiz* - WADD President & *Amine Benyamina* - ALBATROS President and Organizer

1.30 **Épidémiologie des pathologies duelles / Epidemiology of Dual Disorders**
Chair: Bruno Falissard - Villejuif - France

- Les agonistes des récepteurs opioïdes : prévenir la mortalité liée aux opioïdes
Opioid Agonist Treatment (OAT) and Prevention of Drug Related Deaths and Overdose Mortality
Speaker: Matthew Hickman - Bristol - UK
- Alcool et dépression : que savons-nous sur leur réciprocity ?
Alcohol use and depression: what do we know about reciprocal causation?
Speaker: Jürgen Rehm - Toronto - Canada

2.45 **Symposium Laboratoires ABBVIE / ABBVIE Laboratory Symposium**
 2.45 **Table ronde - Elimination de l'hépatite C en France : Où est Charlie ?**
Chair: Hélène Donnadieu Rigole - Montpellier - France
Speakers: Faredj Cherikh - Nice - France ~ *Colette Gerbaud* - Nice - France
Sophie Métivier - Toulouse - France & *Laurent Roudière* - Paris - France

4.15 **PAUSE CAFÉ / COFFEE BREAK**

4.45 **Buprénorphine à longue durée d'action : quand l'innovation thérapeutique fait débat dans les métiers**
Long-acting Buprenorphine: when innovation sparks debate
Speakers: Fadi Meroueh - Montpellier - France ~ *Marta Torrens* - Barcelona - Spain ~ *Benjamin Rolland* - Lyon - France
 6.00 & *Albert Caporossi* - Patient-Expert en addictologie - FPEA - France

6.00 **Quand Foie et Addictions nous prennent les tripes / Liver and addictions: gut feelings**
Chair: Didier Samuel - Villejuif - France

- Système immunitaire dans la genèse et la modulation de la maladie alcoolique du foie
Immunopathogenesis of Alcoholic Liver Disease and development of immunomodulatory targets
Speaker: Shilpa Chokshi - London - UK
- Microbiote et troubles liés à l'alcool : de l'expérience fondamentale aux applications cliniques
Role of the gut microbiota in the modulation of the gut-brain axis in alcohol use disorders: experimental approaches and clinical implications
Speaker: Sophie Leclercq - Brussels - Belgium

7.15

WEDNESDAY DECEMBER 8

9.00 **Neurobiologie, neuro-imagerie : qu'est-ce qu'il y dans le crâne ?**
Neurobiology, neuroimaging: what's in the box?
Chair: Pierre-Michel Llorca - Clermont-Ferrand - France

- Développement cérébral & imagerie des addictions : dommages, modérateurs, résilience
Speaker: Jean-Luc Martinot - Orsay - France
- Remédiation cognitive dans le traitement des addictions: actualités et nouveautés
Training cognitive processes in the treatment of addiction: state of the art and new developments
Speaker: Reinout Wiers - Amsterdam - Netherlands

10.15

- 10.15 **Symposium Laboratoires ACCORD HEALTHCARE / ACCORD HEALTHCARE Laboratory Symposium**
Buprenorphine LP: towards a paradigm shift in the management of opioid addiction?
 • **News about long-acting opioid substitution therapy**
Modérateur : Jean-Pierre Daulouède - Bayonne - France
 • Opioid substitution therapy: innovating to meet evolving patient needs - **Georges Brousse** - Clermont Ferrand - France
 • Implantable opioid substitution therapy: what you need to know - **Michael Frost** - Conshohocken - USA
 • **Management of OST patients and users: towards a new approach**
Modératrice : Florence Vorspan - Paris - France
 • Round table: sharing experiences with **Michael Frost** - Conshohocken - USA
Georges Brousse - Clermont Ferrand - France ~ **Jean-Pierre Daulouède** - Bayonne - France & **Maurice Dematteis** - Grenoble - France

- 11.15 **Tour du monde du cannabis médical / Around the world in medical cannabis**
Chair: Patrick Aeberhard - Paris - France
 • Sur le chemin du cannabis médical au Maroc / Morocco, on the road to medical cannabis
Speaker: Mehdi Paes - Rabat - Morocco
 • A developmental understanding of the relationship between cannabis and psychosis risk
Speaker: Patricia Conrod - Montreal - Canada
 • Medicinal cannabis in Australia: a story of fast but partial success
Speaker: John Ryan - Melbourne - Australia

12.30 **PAUSE DÉJEUNER / LUNCH BREAK**

- 1.30 **Les psychédéliques : la voie d'avenir des pathologies duelles ?**
Psychedelic drugs: are they the future of dual disorders treatment?
Chair: Alain Dervaux - Villejuif - France
 • Psychédéliques dans le traitement d'addiction
Psychedelics in the Treatment of Addiction
Speaker: Matthew Johnson - Baltimore - USA
 • Psychédéliques sérotoninergiques en théorie et en pratique
Serotonergic psychedelics in affective and addictive disorders in theory and in practice
Speaker: David Erritzoe - London - UK

- 2.45 **Symposium Laboratoires ZENTIVA / ZENTIVA Laboratory Symposium**
Treating Alcohol Use Disorder: tomorrow is today
Moderator: Georges Brousse - Clermont-Ferrand - France
 • What are the latest recommendations in the treatment of alcohol dependence? **Guillaume Airagnes** - Paris - France
 • Baclofen: back to the future - **Benjamin Rolland** - Lyon - France
 • COVID-19: what impact on alcohol addiction two years out? **Michael Bisch** - Nancy - France
 • Round table - **Guillaume Airagnes, Michael Bisch, Georges Brousse, Benjamin Rolland with guest participants**

3.45 **PAUSE CAFÉ / COFFEE BREAK**

- 4.15 **Pathologies duelles et troubles liés aux opioïdes / Dual Disorders in Opioid Patients**
Chairs: Marc Auriacombe - Bordeaux - France & Laurence Lalanne - Strasbourg - France
 • Opioïdes, santé mentale et suicide: des défis urgents et corrélés
Opioids, Mental Health, and Suicide - Interrelated and Urgent Challenges
Speaker: Christopher Jones - Atlanta - USA
 • Pathologies duelles et opioïdes: clinique et thérapeutique
Dual Disorders in Opioid Patients: Clinical and therapeutic aspects
Speaker: Icro Maremmanni - Pisa - Italy

- 5.30 **CONFÉRENCE DE PRESTIGE / PREMIER CONFERENCE**
La montagne : une addiction ?
Speaker: Jean-Christophe Rufin - Paris - France

THURSDAY DECEMBER 9

9.00

Cérémonie Grand Prix 2021 / Grand Prix Ceremony 2021

- **Prix WADD « Honorary Member »**

Marc Auriacombe - Bordeaux - France & Maurice Dematteis - Grenoble - France

- **Prix ADDICTIONS FRANCE « Prévention & Addictions »**

Dorian Cessa - Lyon - France - Bénédicte Jullian - Toulouse - France & Laurent Michel - Paris - France

- **Prix GROUPE VYV - ADDICT'AIDE « Digital & Addictions » en hommage au Pr Michel Reynaud**

Marc Auriacombe - Bordeaux - France - Thomas Lehoux - Strasbourg - France & Fuschia Serre - Bordeaux - France

- **Prix LUNDBECK « Recherche originale »**

Alexandre Baguet - Rouen - France - Nadine Hamieh - Paris - France - Marlène Sanz - Saint-Malo - France

- **Prix ROCHE « Addictions & Environnement »**

9.45

Aviane Auguste - Pointe-à-Pitre - Guadeloupe - France - Faredj Cherikh - Nice - France & Izza Mounir - Nice - France

9.45

Symposium Laboratoires GILEAD / GILEAD Laboratory Symposium**Virus & addictions / Viruses and addictions**

Modérateurs : Laurent Michel - Paris - France & Juliette Foucher - Bordeaux - France

- **Screening of viral hepatitis outside the hospital** - Stéphane Chevaliez - Créteil - France
- **HCV management strategies in psychiatric patients** - Wanda Yekhelef - Neuilly sur Marne - France
- **HCV elimination: real life experience in an addicology prevention center** - Yavor Delchev - Paris - France
- **Round table**

11.15

11.15

Jeux et jeux pathologiques : IRL et virtuels / Games and gaming: IRL and virtual

Chairs: Marie Grall-Bronnec - Nantes - France & Nestor Szerman - Madrid - Spain

- **Sportifs de haut niveau, santé mentale et l'usage des substances**

Elite athletes, mental health and substance use

Speaker: Vincent Gouttebarger - Amsterdam - Netherlands

12.30

- *Speaker: Jiang Du - Shanghai - China*

PAUSE DÉJEUNER / LUNCH BREAK

1.30

TDAH et addictions / ADHD and addictions

Chairs: Florence Vorspan - Paris - France & Laurence Lalanne - Strasbourg - France

- **ADHD and addictions in adolescents and young adults**

*Speakers: José Martinez-Raga - Valencia - Spain & Alex Baldacchino**

2.45

2.45

Pathologies duelles et COVID: un challenge de tout moment
Dual Disorders in times of COVID-19: Past, Present and Future Challenges
CONFERENCE hosted by Bernard Basset - Paris - France

Speakers: Nicolas Hoertel & Gilles PIALOUX - Paris - France

4.00

PAUSE CAFÉ / COFFEE BREAK

4.30

CONFÉRENCE DE PRESTIGE / PREMIER CONFERENCE

Le goût de l'abstraction : une addiction de l'écrivain français du 18^e au XX^e siècle ?

Appetite for abstraction: a 200-year addiction in French authors?

Speaker: François Sureau - Paris - France

5.30

Conclusions & Perspectives

ROOM 2

TUESDAY DECEMBER 7

1.30

Pathologies duelles et cancer / Dual Disorders and Cancer*Chairs: Jérôme Foucaud - Paris - France & Pascal Hammel - Villejuif - France*

- Troubles mentaux et tabac : un sevrage plus complexe ?

*Tobacco Use Among Individuals with Mental Health Concerns: Complications for Cessation?**Speaker: Matthew Carpenter - Charleston - USA*

- Alcool et cancer : quelles implications de la taxation ?

*Alcohol and cancer: what are the implications for taxation?**Speaker: Pol Rovira - Barcelona - Spain*

2.45

PAUSE CAFÉ / COFFEE BREAK

4.45

Modèles expérimentaux des pathologies duelles / Experimental models in dual disorders*Chair: Mickaël Naassila - Amiens - France*

- Is drug addiction really about the drug? Role of incentive habits in compulsive drug seeking and relapse

Speaker: David Belin - London - UK

- Is the gut-brain axis involved in dual disorders?

*Microbiote et cerveau: quels liens avec les pathologies duelles?**Speaker: Rafael Maldonado - Barcelona - Spain*

6.00

6.00

La parole aux experts patients / Expert patients speak out*Chairs: Mélina Fatseas - Bordeaux - France & François Paille - Nancy - France**Speakers: Tom Coderre - Boston - USA & Albert Caporossi - FPEA - France*

7.15

WEDNESDAY DECEMBER 8

9.00

SYMPOSIUM**Interface Personality Disorders - Problematic Substance Use Disorder:
New Clinical Conceptions and Proposals for a Multidisciplinary Approach***Chair: Guillermo Jemar - Buenos Aires - Argentina*

- Clinical - Phenomenological Aspects about the diagnosis, treatments and propaedeutics in Personality Disorders

Speaker: Guillermo Jemar - Buenos Aires - Argentina

- Proposals for ways of understanding, countertransferences and approaches in Personality Disorders

Speaker: Gema Calero - Madrid - Spain

- Emergency Intervention in Personality Disorders

Speaker: W.O Inderkumer - Buenos Aires - Argentina

- Multidisciplinary proposals to address Personality Disorders

Speaker: D. Gervansini Dini - Uruguay

10.00

11.15

SYMPOSIUM**Cannabis Médical***Speaker: Nicolas Authier - Clermont-Ferrand - France*

- Intérêt (ou pas) du cannabis dans le traitement des pathologies psychiatriques

Speaker: Georges Brousse - Clermont Ferrand - France

- Cannabis thérapeutique en addictologie : quel avenir ?

Speaker: Benjamin Rolland - Lyon - France

12.15

PAUSE DÉJEUNER / LUNCH BREAK

1.30

Dépression, auto-médication et troubles addictifs / Depression, self-medication and addictive disorders*Chairs: Miguel Casas - Barcelona - Spain & Raphael Gaillard - Paris - France*

- Traumatismes, auto-médication et addiction : l'équilibre délicat

*Trauma, self medication and addiction: balancing compassion and concern**Speakers: Shaul Lev-Ran - Tel Aviv - Israel*

- Dual depression. A gender perspective

Speakers: Marta Torrens - Barcelona - Spain

2.45

PAUSE CAFÉ / COFFEE BREAK

4.15

La faim des pathologies duelles ? / An appetite for dual disorders?*Chair: Philip Gorwood - Paris - France*

- L'addiction alimentaire : état actuel de la science

*Can Food Be Addictive? The Current State of the Science**Speakers: Ashley Gearhardt - Ann Arbor - USA & Erica Schulte - Philadelphia - USA*

- Speaker: Carlos Roncero - Salamanca - Spain

5.30

THURSDAY DECEMBER 9

11.15

LECTURE**Cancer & Addictions**

12.15

PAUSE DÉJEUNER / LUNCH BREAK

1.30

Déterminants sociaux et sociétaux des pathologies duelles**The company we keep: framing addictions and mental health***Chairs: Olivier Cottencin - Lille - France & Michel Lejoyeux - Paris - France*

- Santé mentale : les déterminants sociaux et l'insécurité alimentaire

*The Social Determinants of Mental Health, with a Focus on Food Insecurity**Speaker: Michael T. Compton - New York - USA*

- Addressing intimate partner violence and abuse perpetration by men in treatment for substance use

Speaker: Gail Gilchrist - London - UK

2.45

ROOM 3

TUESDAY DECEMBER 7

1.30

SYMPOSIUM

Irresponsabilité Pénale et Addiction : Enjeux et Perspectives
Criminal non-liability and addiction, where do we go now?

Chair: **Nidal Nabhan Abou** - Rennes - France

- Contexte général et enjeux de l'expertise psychiatrique pénale

General context and role of forensic psychiatry

Speaker: **Cyril Azif** - Brest - France

- Du bon usage des toxiques en matière expertale

Good use of substances in expert matters

Speaker: **Cyril Manzanera** - Montpellier - France

- Evolutions législatives : régression ou amélioration ?

Legislative evolution: regression or progress

Speaker: **Mathieu Lacambre** - Montpellier - France

2.30

PAUSE CAFÉ / COFFEE BREAK

4.45

LECTURE

Virtual Therapies

Chair: **Hassan Rahioui** - Paris - France

- Effectiveness and acceptance of a smartphone-based virtual agent screening (KANOPEE app) for alcohol and tobacco problems and associated risk factors during COVID-19 pandemic in the general population

Speaker: **Marc Auriacombe** - Bordeaux - France

- Virtual Day care center for patients suffering from addictions during the pandemic

Speaker: **Yasmina Frem** - Sèvres - France

- Virtual Reality Exposure Effectiveness in Eliciting Cocaine Craving

Speaker: **Thomas Lehoux** - Strasbourg - France

- Craving-Manager application designed to manage craving and individual predictors of substance use/addictive behavior among individuals with addictive disorders: study protocol for a randomized controlled trial

Speaker: **Fuschia Serre** - Bordeaux - France

5.45

6.00

LECTURE

Autism-Psychosis Spectrum and Dual Disorders

Chair: **Mohamed Taleb** - Vernon - France

- Smoking in patients hospitalized for schizophrenia: Prevalence and management challenges

Speaker: **Zineb Bencharfa** - Salé - Morocco

- The Influence of Substance Abuse on Inhibition Capacities and Risky Decision in a Group of Outpatient Schizophrenia Patients

Speaker: **Pinhas Dannon** - Jérusalem - Israel

7.00

WEDNESDAY DECEMBER 8

9.00

LECTURE

Trauma-Anxiety Dual Disorders and Mindfulness*Chair: Laurent Karila - Villejuif - France*

- Child Maltreatment, Sexual Risk Behaviors and Victimization Among Female Adolescents Seeking Detoxification Treatment for Substance Use Disorders: an Israeli Case Study

Speaker: Sharon Rabinovitz - Haifa - Israel

- Childhood adverse events and attachment style as inadequate predictors of ADHD pathology in adult psychiatry

Speaker: Simona Trifu - Bucharest - Romania

- Impact of attachment pathology on personality development in subjects with ADHD and comorbid affective pathology

Speaker: Simona Trifu - Bucharest - Romania

- Mindfulness-based relapse prevention and individual functions of substance abuse

Speaker: Johannes Veaser - Brussels - Belgium

10.00

11.15

LECTURE

Dual Disorders Treatment*Chair: Nicolas Franchitto - Toulouse - France*

- Dress Syndrome associated to Lamotrigine treatment in a patient with BPD and severe alcoholism

Speaker: Daniel Garcia-Fuentes - Barcelona - Spain

- Use of bupropion in adults duals with TDAH

Speaker: Jorge Gonzalez Espinoza - Santiago - Chile

- The reliability and validity of VR (Virtual Reality) based assessment for craving in Taiwan

Speaker: Kun-Hua Lee - Hsin-chu City - Taiwan

12.15

PAUSE DÉJEUNER / LUNCH BREAK

1.30

LECTURE

Opioids and Cannabinoids*Chair: Patrick Bendimerad - La Rochelle - France*

- Cannabis tourism destinations: Health risk for vulnerable travellers with current or pre-existing mental disorders

Speaker: Hagit Bonny-Noach - Ariel - Israel

- Identifying aberrant use of medical marijuana: Research protocol and preliminary results

Speaker: Daniel Feingold - Ariel - Israel

- Rapid Initiation of Extended Release Buprenorphine in Patients using Fentanyl and Fentanyl Analogs

Speaker: Frank Gray - Slough - UK

2.30

PAUSE CAFÉ / COFFEE BREAK

4.15

SESSION PARRAINÉE PAR LA FFA

Updates about the state of care for adult ADHD in France and Europe*Chair: Louise Carton - Lille - France*

- Access to medications for adult ADHD in Europe ; updates in France

Speaker: Mathieu Chappuy - Lyon - France

- ADHD and addictions in France: a challenge to build a multidisciplinary network and improve care context

Speaker: Etienne Kammerer - FFA - France

- ADHD and addictive comorbidities: dimensional and integrative adaptations of the pharmacological treatment. Illustration from a clinical case

Speaker: Lucie Pennel - Grenoble - France

5.30

THURSDAY DECEMBER 9

11.15

LECTURE

A variety of approaches to mental disorders*Chair: Méлина Fatseas - Bordeaux - France*

- Two-Week Ambulatory Assessment of Craving as a Predictor of 5-Year Addiction Treatment Outcomes
Speaker: Emmanuelle Baillet - Bordeaux - France
- Percolation of non-adjacent expertises during pandemic: a case study on the development of harm reduction tools
Speaker: François Destombe - Lille - France
- Treatment Outcome of Dually Diagnosed Youth with Substance Use Disorder (SUD) and Depression
Speaker: Yifrah Kaminer - Farmington - USA
- Temporalité et addiction, quelle fabrique du temps ?
Speaker: Gérard Shadili - Paris - France

12.15

1.30

SESSION PARRAINÉE PAR L'AESP

Découvertes dans le multivers sémiologique de l'addictologie*Modérateurs : Pierre-Alexis Geoffroy - Paris - France & Farid Benzerouk - Reims - France*

- Usage chronique de benzodiazépines et troubles cognitifs, que nous disent les rongeurs ? *Louise Carton - Lille - France*
 - Le TDAH de l'enfance à l'âge adulte : mais où donc sont rangés les symptômes - *Romain Icick - Paris - France*
 - Nicotine la journée et dormir la nuit : faut-il choisir ? Le sevrage peut-il aider ? *Sibylle Mauries - Paris - France*
 - Chemsex : Comment se repérer quand les drogues se mêlent au sexe ? *Julien Cabé - Clermont-Ferrand - France*

2.30

ROOM 4

TUESDAY DECEMBER 7

1.30

LECTURE

Predicting Patient Outcomes*Chair: Arkaitz Colina - Bayonne - France*

- Neuropsychology of addictions in residential Therapeutic Communities: are addictive and psychiatric comorbidities linked to substance use and cognitive specific profiles?
Speaker: Simon Deniel - Caen - France
- Stroop interference score and craving-use link intensity among patients beginning outpatient treatment for substance use disorder: an EMA study
Speaker: Louise-Adélaïde Jakubiec - Bordeaux - France
- Clinical Insight fluctuations and prospective association with craving in addiction: an EMA study
Speaker: Laura Lambert - Bordeaux - France
- Is the length of inpatient stay the best predictor of maintained abstinence after cocaine detoxification?
Speaker: Margaux Poireau - Paris - France

2.30

PAUSE CAFÉ / COFFEE BREAK

4.45

SESSION SPÉCIALE « YOUNG INVESTIGATORS » en partenariat avec EISAI**Schizophrénie, Cancer & Addiction***Chair: Pascal Hammel - Paris - France*

- Momentary decrease in cognitive performance as a vulnerability factor for substance use in schizophrenia
Speaker: Maud Dupuy - Toulouse - France
- Influence of cannabis on the risk of transition in young people at ultra-high risk of psychosis (ICAAR study): a longitudinal study
Speaker: Linda Scoriels - Paris - France
- Cocaine-Induced Hallucinations occurrence and severity: two distinct phenotypes with shared and specific risk factors
Speaker: El-Hadi Zerdazi - Paris - France

5.45

6.00

**YOUNG INVESTIGATORS SYMPOSIUM ON ALCOHOL AND OTHERS DRUGS
en partenariat avec REUNIRA (Réseau national de recherche en alcoologie)***Co-chairs: Mickaël Naassila - Amiens - France & Florence Vorspan - Paris - France*

- Alcohol use disorder and schizophrenia comorbidity: translational approach to explore common vulnerability
Speaker: Farid Benzerouk - Reims - France
- Reduction of alcohol consumption by psilocybin: role of serotonin type 2A receptors in the nucleus accumbens and identification of genetic regulations by PCR array
Speaker: Jérôme Jeanblanc - Amiens - France
- Which are the differences in structural brain alterations between patients with co-occurring cocaine and alcohol use disorders and patients with only cocaine use disorder?
Speaker: Angeline Maillard - Paris - France

7.00

WEDNESDAY DECEMBER 8

9.00

LECTURE**Gaming, Food and Sex***Chair: Amandine Luquiens - Nîmes - France*

- Item Response Theory analyses of DSM-5 criteria for internet gaming disorder adapted to electronic screen use disorder: An exploratory survey in a suburban community sample
Speaker: Mathieu Boudard - Bordeaux - France
- Chemsex in France: a lookout for risks factors & forgotten populations
Speaker: Dorian Cessa - Lyon - France
- Physical exertion at work and addictive behaviors: tobacco, cannabis, alcohol, sugar and fat consumption: longitudinal analyses in the CONSTANCES cohort
Speaker: Nadine Hamieh - Paris - France
- Food addiction among stroke patients: an hospital-based study
Speaker: Yolaine Rabat - Bordeaux - France
- Frequency and factors associated with Attention Deficit Hyperactivity Disorder in patients with Sex Addiction
Speaker: Benoît Schreck - Nantes - France

10.30

11.15

SESSION « THE VOICE OF ADDICTION » • Parrainée par l'AJPPA et l'AFEP

Jury : **Michaël Bisch** - Nancy - France - **Olivier Cottencin** - Lille - France & **Amandine Luquiens** - Nîmes - France
 Modérateurs : **Bernard Angerville** - Amiens - France - **May Boumendjel** - Versailles - France & **Romain Gomet** - Créteil - France

- Improving the quality of life (QOL) of patients in ambulatory addiction treatment facilities (French "CSAPA") thanks to cognitive remediation (CR): an exploratory-study ~ **Mathilde Auclain** - Versailles - France
- Impact of tDCS on Cannabis Craving in patient with Schizophrenia and a comorbid cannabis use disorder: a randomized multicenter double-blind placebo-controlled study (tCCS) ~ **Noomane Bouaziz** - Neuilly-sur-Marne - France
 - Does clinical insight level predict successful quit attempts during the first three months of outpatient addiction treatment? **Laura Lambert** - Bordeaux - France
- The retina as an early marker of brain functional alteration for young alcohol users ~ **Ludovic Polli** - Nancy - France
- From CBT to the development of risk reduction in outpatient hospital ~ **Charlotte Souchet** - Créteil - France

12.30

PAUSE DÉJEUNER / LUNCH BREAK

1.30

LECTURE**Opioids & Prevention**

Chair: **Philippe Nubukpo** - Limoge - France

- Implementation of a reactive system for management of physicians suffering from substance use disorder: organizational and institutional concerns with such a sensible subject
 Speaker: **Nicolas Franchitto** - Toulouse - France
- Examining efficacy and safety of extended-release buprenorphine in subgroups of subjects with moderate to severe opioid use disorder
 Speaker: **Frank Gray** - Slough - UK
- The role of substance use in the risk of not getting employed among young people: prospective findings from the CONSTANCES cohort
 Speaker: **Rita Haddad** - Villejuif - France
 - Implementation of a community-based psychiatric intervention among people who inject drugs in the City of Haiphong, Vietnam: the DRIVE-Mind project
 Speaker: **Laurent Michel** - Paris - France
 - Overview of hepatitis C testing and treatment in France
 Speaker: **Brigitte Reiller** - Bordeaux - France

2.45

PAUSE CAFÉ / COFFEE BREAK

4.15

LECTURE**Psychoactives Substances in real life**

Chair: **Fadi Meroueh** - Montpellier - France

- Benzodiazepine use and misuse among outpatients with alcohol use disorders
 Speaker: **Alexandre Baguet** - Rouen - France
- Nitrous oxide: From trivialization to alert
 Speaker: **Leila Chaouachi** - Paris - France
- Borderline personality disorder and comorbid alcohol use: association with uncertainty and dissociation
 Speaker: **Orane Gaumont** - Issy-Les-Moulineaux - France
- Psychedelic consumption: the reality beyond the myth
 Speaker: **Caroline Vigneau** - Nantes - France

5.15

THURSDAY DECEMBER 9

9.30



SESSION AGRÉÉE DPC proposée par la Coordination Nationale TDAH Adultes
TDAH & Addictions : diagnostic et prise en charge pharmacologique de la pathologie duelle

- Vignette clinique
- Comment poser un diagnostic avec la pathologie duelle ?
 - Prise en charge thérapeutique
- Cas cliniques : TDAH et mésusage de psychostimulants / TDAH et addiction comportementale

Speakers: **Louise Carton** - Lille - France & **May Boumendjel** - Versailles - France

12.30

PAUSE DÉJEUNER / LUNCH BREAK

1.30

LECTURE

Covid-19 and Dual Disorders

Chair: **Yves Edel** - Paris - France

- Changes in the consumption of psychoactive substances by people incarcerated at the Villeneuve-Lès-Maguelone prison during first lockdown linked to Covid 19

Speaker: **Camille Ballester** - Montpellier - France

- COVID 19: Managing boredom and feelings of emptiness through addictive behaviors

Speaker: **Faredj Cherikh** - Nice - France

- Mindfulness state and tobacco consumption during the COVID-19 lockdown among hospital workers

Speaker: **Izza Mounir** - Nice - France

- Impact of disturbances related to COVID-19 crisis on: alcohol consumption, alcohol craving, and relapse of alcohol dependent patients

Speaker: **Marlène Sanz** - Saint-Malo - France

- Mise en évidence de la corrélation entre état psychique et alimentation à travers une étude de la population durant le confinement
The role of the close correlation between psychic state and diet through a study of the population during lockdown

Speaker: **Gabrielle Sauvin** - Grasse - France

2.45

GRANDS PRIX ALBATROS / WADD 2021

- Prix WADD « Honorary Member »
- Prix ADDICTIONS FRANCE « Prévention & Addictions »
- Prix EISAI « Schizophrénie, Cancer & Addiction » spécial Jeunes
- Prix Groupe VYV - Addict'Aide « Digital & Addictions » en hommage au Pr Michel REYNAUD
- Prix LUNDBECK « Recherche originale »
- Prix REUNIRA « Alcool & Autres produits » spécial Jeunes Chercheurs
- Prix ROCHE « Cancers & Addictions »



WADD ALBATROS

ALBATROS / WADD 2021 AWARDS

- WADD "Honorary Member" Award
- ADDICTIONS FRANCE "Prevention & Addictions" Award
- EISAI "Schizophrenia, Cancer & Addiction" Award special young investigators
- Groupe VYV - Addict'Aide - "Digital & Addictions" Award in tribute to Prof. Michel REYNAUD
- LUNDBECK "Original Research" Award
- REUNIRA "Alcohol & Others Drugs" Award special young investigators
- ROCHE "Cancers & Addictions" Award



WADD ALBATROS

Guillaume AIRAGNES - Paris - France

Symposium Laboratoires ZENTIVA / ZENTIVA Laboratory Symposium

Prise en charge du TUA : Le monde d'après c'est maintenant

Treating Alcohol Use Disorder: tomorrow is today

- **Quelles sont les dernières recommandations dans la prise en charge de la dépendance à l'alcool ?**
What are the latest recommendations in the treatment of alcohol dependence?

La dépendance à l'alcool correspond au stade le plus sévère des troubles liés à l'usage de l'alcool et elle se caractérise par son évolution chronique. Ainsi, un enjeu majeur est l'amélioration de l'observance au long cours afin de prévenir la rechute. Un objectif d'arrêt de l'usage, comparé à un objectif de réduction, est associé à de meilleures chances de succès en ce qui concerne la prise en charge des sujets dépendants. Cependant, environ la moitié des patients dépendants ne souhaitent pas arrêter l'usage de l'alcool. Il apparaît alors comme prioritaire de faciliter leur entrée dans les soins, avec des objectifs thérapeutiques pragmatiques en fonction de ce que le patient est prêt à accepter.

La prise en charge de la dépendance à l'alcool repose sur une approche multimodale. Les principales composantes de la prise en charge sont les stratégies psychothérapeutiques,

médicamenteuses, de remédiation cognitive, de réhabilitation sociale et de prise en charge des comorbidités : coaddictions, troubles psychiatriques co-occurents et pathologies somatiques.

Parmi les comorbidités à prendre en charge, la littérature s'est densifiée concernant l'attention à accorder au traitement des troubles du sommeil et de la douleur.

Enfin, la littérature rapporte les bénéfices d'une prise en charge intégrative, par opposition aux prises en charge séquentielles ou en parallèles non coordonnées entre elles. Il est important que la prise en charge intégrative ne soit pas déconnectée du système de soins global et des soins primaires, notamment pour faciliter le repérage précoce, l'accès aux soins spécialisés et éviter la stigmatisation des patients.

Mathilde AUCLAIN - Versailles - France

Session « The Voice Of Addiction »

Parrainée par l'AJPPA et l'AFFEP

- **Improving the quality of life (QOL) of patients in ambulatory addiction treatment facilities (French "CSAPA") thanks to cognitive remediation (CR): an exploratory-study**

CR is today well-known for improving cognitive impairments (executive functions, memory, attention, motivation). Yet, published studies seem to involve only patients with schizophrenia or patients who withdrew from alcohol use disorder. Patients attending ambulatory addiction centers (French "CSAPA") often show still "active" substances use, a wish for moderate use/risk reduction rather than abstinence and/or stronger reluctance to withdrawal, and then, stronger exposure to difficulties. We suggest cognitive improvement could help them enhance their QOL and motivate them to keep reducing their substance use disorders (SUD).

We adapted "Cogremed" - a CR 3-month group program for patients with schizophrenia - to the topic of addictions, providing 3 aspects: cognitive stimulation (Happyneuron software), use of metacognition and psychoeducation (impact of addictions over cognition and coping strategies in daily life).

We studied cognitive impairment (MOCA, neuropsychological tests) perceived by patients and their therapist (STICCS), SUD (ASSIST, AUDIT), QOL (AQOLS), impulsivity (BIS-11) and well-being (HAD, Rosenberg self-esteem scale).

Statistical analyses (N=21) conclude to significative progresses in memory processes ($p=.013$), inhibition ($p=.036$), flexibility ($p=.006$) (neuropsychological scales, $n=16$), QOL ($p=.002$), depression ($p=.014$), self-esteem ($p=.006$) and perceived cognitive impairment ($p>.001$) according to both patients and their therapist (clinical scales, $n=21$). A linear regression analysis shows yet that lower anxiety, alcohol use and cognitive complaint put together may significantly mostly explain QOL improvement.

Further surveys with a larger group compared with a control group and a long-term follow-up are yet needed for stronger results. However, considering the several aspects of QOL that seem improved and the potential benefits on these patients' social exclusion and motivation to carry on treatment, this exploratory study encourages the inclusion of CR in the multidisciplinary treatment of addiction in French ambulatory facilities.



WADD & ALBATROS

Aviane AUGUSTE - Pointe-à-Pitre - Guadeloupe - France

• First epidemiological cohort on tobacco and alcohol abuse in Guadeloupe (TOBASCO Study): Opportunity for new and relevant strategies for Cancer prevention in the French West Indies

DESCRIPTION AND OBJECTIVES - Guadeloupe is a French overseas department where tobacco and alcohol have long been perceived as less impactful on the epidemiology of cancer compared to mainland France. The shift of tobacco and alcohol consumption towards that of France calls for immediate action. The prevention programs put in place so far are identical to those in the mainland France. Local health authorities desire adapted public health interventions based on indigenous data; which are currently scarce. To date, data on clinical management of alcohol and tobacco abuse in Guadeloupe is lacking from the overall picture for prevention. We will describe the sociodemographic/consumption profiles of tobacco and alcohol addicts in Guadeloupe and determine the factors associated to successful cessation and treatment drop out.

MATERIAL AND METHODS - We will conduct a descriptive cohort study recruiting patients attending the addiction treatment and prevention centres in Guadeloupe for tobacco or alcohol abuse.

Approximately 600 patients are expected during 12 months with measures at baseline and after 3 months. We will determine distinct profiles of patients based on diverse characteristics using latent class analyses. We will use logistic regression models to assess the determinants of tobacco and alcohol cessation, and treatment drop out among new patients following 3 months of treatment at these centres. Stratified analyses will be performed to determine whether these associations differ by socioeconomic status.

RESULTS AND CONCLUSIONS - These new data will complement the existing data on the territory for a more comprehensive view for tobacco and alcohol prevention. This study will notably help improve linkage to treatment for persons at high-risk of substance abuse and/or dependence. We will provide levers for the health authorities to inform interventions to strengthen capacity for tobacco and alcohol prevention in Guadeloupe.

Marc AURIACOMBE - Bordeaux - France

Virtual Therapies

• Effectiveness and acceptance of a smartphone-based virtual agent screening (KANOPEE app) for alcohol and tobacco problems and associated risk factors during COVID-19 pandemic in the general population

AIM - To determine if a smartphone application (KANOPEE) using an embodied conversational agent could identify risk factors for problems with alcohol/tobacco use in the context of the current COVID-19 epidemic; to assess adherence and to evaluate trust and acceptance of the application.

METHODS - The conversational agent, named Jane, interviewed participants about perceived problems with use of alcohol and tobacco since pandemic, explored risk for tobacco and alcohol use disorder with the CDS-5 and CAGE and experience of craving for each substance. For those at risk, a brief intervention was implemented by the app. Descriptive, univariate and multivariate analyses were performed to specify personalized associations with reporting a problem with alcohol/tobacco use, descriptive analysis reported experience with the intervention and acceptance and trust in the app.

RESULTS - Between April 22 to October 26, 2020; 1588 French

participants completed the KANOPEE interview and 318 answered the acceptance and trust scales. 42% of tobacco users and 27% of alcohol users reported problem use since the pandemic. Positive screening with CDS-5 and CAGE, and craving were associated to experiencing problems ($p < .0001$). Lockdown periods influenced alcohol ($p < .0005$) but not tobacco use ($p > .05$). 88% users reported KANOPEE was easy to use and 82% found Jane to be trustworthy and credible.

DISCUSSION - Alcohol and tobacco are the most available substances for managing stress in the current pandemic and increase risk for substance use disorder. In this context direct human interactions must be limited and access to usual onsite health services is reduced. eHealth smartphone applications are an alternative for screening and early interventions in the general population. KANOPEE was able to screen for risk factors for Substance Use Disorder and was acceptable to users.

Alexandre BAGUET - Rouen - France

Psychoactives Substances in real life

• Benzodiazepine use and misuse among outpatients with alcohol use disorders

OBJECTIVE - Benzodiazepines (BZDs) are widely prescribed during addiction treatment, especially among people with alcohol use disorders (AUD). Unfortunately, evidence has emerged that BZD use in long-term therapy can cause negative effects: dependence, tolerance and withdrawal are well-known, but also others. Despite this public health concern, little is known about BZD misuse among people with AUD. The objective of this study was to estimate the prevalence of chronic BZD use, as prescribed and misuse, among adults with AUD, to characterize misuse, and to examine the characteristics associated with BZD misuse, especially anxiety level.

METHOD - A sample of outpatients treated for AUD at the addiction prevention center (CSAPA) of CHU Rouen, France from January to April 2021 ($n=107$) were identified. Measurements included past-year drug prescription, BZD use and misuse, substance use disorders, mental illness, demographic characteristics, and validated self-reported questionnaires: Alcohol Use Disor-

ders Identification Test, a French scale measuring BZD addiction («Echelle Cognitive d'Attachement aux Benzodiazepines», ECAB), and the Hospital Anxiety and Depression scale.

RESULTS - Our sample was 74.8% men; the mean age was 48.32 ± 10.98 years. 89.7% reported a history of alcohol dependence in the past year and 49.5% reported a current prolonged BZD prescription. The prevalences of misuse and dependence on BZD were respectively 21.5% and 11.2%. All patients who misused BZD used concurrently another substance (especially tobacco, cannabis). 30.8% of patients were anxious, 51.8% of women and 25.0% of men ($p=0.01$). Among those a third (35%) were dependent on BZDs. The prevalence of major depression was 14%.

CONCLUSIONS - Prolonged BZD prescription among people with AUD was common in this study, adding to the evidence of a high risk of misuse and dependence in this population. Screening BZD misuse is essential in this population.

Emmanuelle BAILLET - *Bordeaux - France*

A variety of approaches to mental disorders

• Two-Week Ambulatory Assessment of Craving as a Predictor of 5-Year Addiction Treatment Outcomes

INTRODUCTION - Addiction is a chronic condition characterized by attempts to stop or reduce substance use followed by relapse. A main objective of addiction treatment is to prevent relapse by targeting craving, an unwanted and intense desire to use substances that constitutes a major risk factor for relapse. Craving may fluctuate considerably over a period of several hours and can be assessed in real time by Ecological Momentary Assessment (EMA). However, the predictive value of craving relative to addiction outcomes has only been studied over short periods of time (1 month to 2 years) whereas this disorder often follows a chronic course (5 to 10 years).

OBJECTIVE - To examine whether craving levels at the initiation of treatment are associated with long-term outcomes (abstinence/non-abstinence).

METHODS - Craving intensity was assessed 4 times per day by a two-week EMA study among participants initiating outpatient treatment for Substance Use Disorders (DSM-5) in a French addiction clinic. Subjects received a follow-up assessment 5 or more years after inclusion. Craving fluctuations and its association with 5-year outcomes were analyzed with Hierarchical Linear Models.

RESULTS - Stronger decreases in craving intensity during the first two weeks of treatment was associated with more abstinence at 5 years ($n=39$; $b=0.08$; $p=0.043$).

DISCUSSION - Our results suggest that the craving trajectory at the beginning of addiction treatment may provide an important indicator of long-term treatment outcomes. This finding has potential implications for personalized treatment.

Camille BALLESTER - *Montpellier - France*

Covid-19 and Dual Disorders

• Changes in the consumption of psychoactive substances by people incarcerated at the Villeneuve-Lès-Maguelone prison during first lockdown linked to Covid 19

The SARS-CoV2 pandemic reached France in January 2020 leading to the first lockdown of the population from March 17 until May 11, 2020, in order to regulate virus spreading. Therefore consequent containment measures were set up in prison with the cancellation of visiting rooms and a huge reduction of social activities. An increased use of psychoactive substance (PAS), already higher than in the general population, was noticed. This was enhanced with the stress of the containment. On the other hand we experienced a decrease in the availability of PASs.

An observational study was carried out among inmates to monitor the consumption of PAS during this period. Anonymous questionnaires were distributed to assess pre and per containment consumption.

Results show that tobacco and cannabis use increased, whilst cocaine decreased. No change in other PAS use was found. Stress, isolation and boredom were cited as factors that may have influenced their consumption. The lack of availability of PASs as well as an increased cost during this period were also expressed and could have favored a reduction in consumption.

Finally, patients noticed the decrease of the number of the health unite consultations: an adaptation of patients addictological care has to be developed consequently.

Zineb BENCHARFA - *Salé - Morocco*

Autism-Psychosis Spectrum and Dual Disorders

• Smoking in patients hospitalized for schizophrenia: Prevalence and management challenges

INTRODUCTION - Smoking is the leading cause of preventable death in the world. Studies have shown that the frequency of its use in schizophrenic patients is significantly higher than in the general population, or in other psychiatric disorders, which hinders both treatment strategies and the efficacy of antipsychotics. The objectives of our study are to highlight the prevalence of smoking in this population, to assess their nicotine dependence, as well as to support the difficulties of their management.

MATERIALS AND METHODS - We conducted a cross-sectional study of 92 male patients, hospitalized at the Ar-razi Hospital in Salé, using the Fagerström scale, associated with a questionnaire that included age, marital status, educational level, occupation, somatic comorbidities, current treatment, other substances used, withdrawal attempts, age of first cigarette, family history of smoking, and finally, number of cigarettes per day before and after psychiatric diagnosis.

RESULTS - All our patients were male, the average age was 31 years, 84.8% of our patients were single, 39.1% had stopped their studies in high school, 73.9% were without a profession, only 23.9% were under classic neuroleptics while 4.3% were under Clozapine, the most of our patients were also using Cannabis, 52.2% of our patients attempted a withdrawal, with an average duration of 6 months. 69.6% of our patients had a family history of smoking, and only 21.7% had somatic comorbidities, 34.8% had a very strong dependence on nicotine. The average daily consumption was 12 cigarettes per day before the onset of psychiatric symptoms, rising to 18 cigarettes per day after the psychiatric diagnosis.

CONCLUSION - The frequency of tobacco use in schizophrenic patients is high. Unfortunately, these patients remain poorly aware of the harms of smoking, hence the need to integrate a smoking control strategy into the hospital management of schizophrenia.

Young investigators symposium on alcohol and others drugs en partenariat avec REUNIRA (Réseau national de recherche en alcoologie)

• Alcohol use disorder and schizophrenia comorbidity: translational approach to explore common vulnerability

DESCRIPTION PRÉCISE DES OBJECTIFS - We have previously demonstrated that the NVHL model of schizophrenia in rats display vulnerability to AUD after alcohol intake during adolescence (Jeanblanc J et al 2015). We sought to confirm this result in other animal models and analyze the effect of a CB1 agonist. In humans, we explored motivation for alcohol drinking in patients with schizophrenia. Drinking motives are considered to be major predictors of alcohol consumption and alcohol-related problems. However, these motives have been poorly investigated in patients with schizophrenia. The aim of the present study among patients with schizophrenia was twofold: 1) assess the validity of the short form of the Drinking Motives Questionnaire-Revised (DMQ-R SF); and 2) investigate the relationship between drinking motives and comorbid alcohol use disorder (AUD). Using etiologically different animal models of schizophrenia (a genetic model: MAP-6 KO mice and a rat neurodevelopmental model: Methylazoxymethanol acetate (MAM) of schizophrenia), we tested their alcohol intake during adolescence and at adulthood, after or not, co-exposure to a CB1 agonist during adolescence.

MATÉRIEL ET MÉTHODES - A total of 179 patients with schizophrenia were approached to participate in the study. DSM-5 criteria were used to identify patients with comorbid AUD (AUD+; n = 42) and non-abstinent patients without comorbid AUD (AUD-; n = 71). Female and male MAP-6 KO (and WT) mice were given access, or not, to alcohol during adolescence and their alcohol intake and sensitivity to the ataxic effects of alcohol was measured during both adolescence and at adulthood. Alcohol intake was measured during adolescence and adulthood in the MAM neurodevelopmental model of schizophrenia after exposure or not to alcohol and/or the CB1 agonist CP55,940 during adolescence in male rats.

RÉSULTATS ET CONCLUSIONS - Group comparisons revealed higher use of alcohol and other substances, as well as stronger drinking motives among AUD+ patients, while groups were comparable concerning clinical features of schizophrenia, including psychotic symptom dimensions and severity. Regression analysis showed that the AUDIT score was significantly associated with two internal drinking motives: enhancement and coping. In mice, consumption of alcohol during adolescence induces an increase in alcohol intake and a decrease in the ataxic effect of alcohol at adulthood. In the MAM model of schizophrenia, rats exposed either to alcohol or the CB1 agonist showed an increased propensity to drink alcohol at adulthood that was absent after the combination of exposures (alcohol + CB1 agonist) during adolescence. In general, our preclinical results support the hypothesis of an increased vulnerability to alcohol intake after consumption of alcohol or CB1 agonist during adolescence. Clinical findings suggest that the DMQ-R SF is a reliable tool for assessing drinking motives among patients with schizophrenia. Enhancement and coping motives seem to play a major role in comorbid AUD among these patients. Community-based and clinical treatment programs should take the drinking motives of dual-diagnosis patients into consideration, in order to improve their outcomes and to reinforce screening of alcohol/cannabis intake during adolescence to improve prevention of the comorbidity.

Hagit BONNY-NOACH - Ariel - Israel

Opioids and Cannabinoids

• Cannabis tourism destinations: Health risk for vulnerable travellers with current or pre-existing mental disorders

According the World Health Organization, mental health issues are among the leading causes of travelers' ill health worldwide, and a psychiatric emergency is one of the most common medical reasons for air evacuation. However, little international attention paid to the risks of substance use, including cannabis use among vulnerable travellers with current or pre-existing mental disorders, during travel.

In recent years, the use of cannabis has garnered more attention with changes in global drugs policy. More countries have decriminalized and legalized cannabis, and have become cannabis tourism destinations. Tourists and backpackers use cannabis products during trips abroad, and the cannabis tourism market is growing worldwide.

As more people with current and pre-existing mental disorders and dual-diagnosis travel abroad, it is important to point out the risks that these vulnerable travelers may face as a result of it.

It is important for medicine experts, health professionals and policymakers, as well as for patients with current or pre-existing mental health disorders who travel abroad and their family members, to be aware of vulnerability to cannabis and the risks associated with using cannabis and other psychoactive substances abroad.

In this presentation we want to share our perspective on the health risk for vulnerable travellers with current or pre-existing mental disorders in cannabis tourism destinations worldwide and to emphasize the dangers associated with cannabis use before, during, and after travel.

Session « The Voice Of Addiction »

Parrainée par l'AJPJA et l'AFEP

• Impact of tDCS on Cannabis Craving in patient with Schizophrenia and a comorbid cannabis use disorder: a randomized multicenter double-blind placebo-controlled study (tCCS)

Schizophrenia is a very comorbid condition with cannabis addiction. The prevalence of cannabis use in schizophrenia ranges from 13 to 45%, with a lifetime median of 27.1% (Sarrazin et al. 2015). This comorbidity is associated with a poor prognosis in these patients, exposing them to more severe symptoms, more relapses and re-hospitalizations, lower adherence to treatment and poorer quality remissions (Zammit et al. 2008). Therapeutics aimed at helping patients with schizophrenia to reduce or stop their cannabis use is of great importance because it could improve the overall prognosis of these patients (Machielsen et al. 2017).

Craving is considered to be an essential feature of drug addiction, prone to its chronicization and relapses after periods of abstinence (Franken 2003; Robinson and Berridge 1993).

Decreasing craving could then help patients with schizophrenia to reduce or even stop their cannabis use and thus improve the prognosis of their disease (Machielsen et al. 2017). There is currently no validated drug treatment for cannabis addiction. Non-invasive stimulation methods such as rTMS (repeated transcranial magnetic stimulation) or tDCS (direct current transcranial stimulation) targeting the dorsolateral prefrontal cortex (DLPFC) could induce an increase in mesolimbic dopamine secretion and thus "correct" the neurobiological disturbances of chronic dependence and impulsivity (Strafella et al., 2001; Diana et al. 2017). tDCS is a promising and well tolerated neuro-modulation

tool. A low intensity current passes through the brain via two electrodes, the anode and the cathode, placed on the scalp. Anodal stimulation increases cortical excitability while cathodic stimulation decreases it (Nitsche et al. 2000).

several animal studies have shown the efficacy of tDCS in reducing craving and withdrawal states in animal models of addiction (cocaine, nicotine and food) (Pedron et al. 2014, 2016; Macedo et al. 2016). A meta-analysis of a RCT (Jansen et al. 2013) demonstrated a significant effect of tDCS on craving for several addictions. More recent meta-analyses (Zhang et al. 2019; Song et al. 2019) have confirmed this anti craving effect. A pilot study evaluating the effect of tDCS (anode on the right DLPFC and cathode on the left DLPFC) on cannabis craving of habitual cannabis users revealed a significant decrease in craving (Boggio et al. 2010). Looking to schizophrenia pathology a recent clinical trial involving 100 patients with schizophrenia with predominantly negative symptomatology showed that tDCS (anode on the left DLPFC and cathode on the JTP) resulted in significant improvement in negative symptoms, with no significant adverse effects (Valiego et al. 2020).

Given this data we designed this study to assess the cumulative effect of repeated sessions of tDCS on cannabis craving in patients with schizophrenia. this study will be the first to evaluate repetitive sessions with a multicenter design.

Mathieu BOUDARD - Bordeaux - France

Gaming, Food and Sex

• Item Response Theory analyses of DSM-5 criteria for internet gaming disorder adapted to electronic screen use disorder: An exploratory survey in a suburban community sample

BACKGROUND - Screen use is part of daily life worldwide and morbidity related to excess use of screens is reported. Some use of screens in excess could express a screen use disorder (ScUD).

OBJECTIVES - Our goals were (1) to describe screen uses in a general population sample and (2) to test the unidimensionality and psychometric properties of the 9 DSM-5 Internet Gaming Disorder (IGD) criteria adapted to screen use in a community sample.

METHODS - This cross-sectional survey in a French suburban city targeted adults and adolescents. A self-questionnaire covered main types of screens used and for which activities in the past month, and ScUD diagnostic criteria in past 12 months. Factor and 2-parameter IRT analysis were used to investigate the dimensionality and psychometric properties of the ScUD criteria.

RESULTS - Among the 300 participants (57.0% female, mean age 27), nearly all (99.0%) used screens and 1.7% endorsed a ScUD. Screen types used and screen activities differed between participants with no ScUD criteria and those with at least one ScUD criterion. Unidimensionality was confirmed by all fit indices. The Loss of interest in other recreational activities criteria had the highest factor loading.

CONCLUSIONS - We described screen uses in a French community sample and have shown that the adaptation of the DSM-5 IGD to "screen use disorder" had good psychometric validity and is discriminating. We suggest to use those criteria to assess potential "screen use disorder". Further studies should determine if all criteria are needed and if others should be added.



WADD & ALBATROS

SESSION PARRAINÉE PAR L'AESP

Découvertes dans le multivers sémiologique de l'addictologie

• Chemsex : comment se repérer quand les drogues se mêlent au sexe ?

CONTEXTE - La pratique du chemsex est en pleine expansion ces dernières années. Entre un tiers et un quart des usagers seraient en attente de conseils ou d'orientation auprès de professionnels. Pourtant, les différents intervenants (professionnels de santé et membres d'associations) pouvant être amenés à rencontrer des usagers pratiquant le chemsex n'y sont parfois pas sensibilisés, ce qui ne permet pas toujours une orientation ou un accompagnement optimal. Ces situations sont souvent complexes et nécessitent des interventions pluridisciplinaires. Il n'existe pas à ce jour d'outil d'aide au repérage précoce et à l'intervention brève (RPIB) pour la pratique du chemsex. Ce type d'outil accessible à tous, permet de réaliser une évaluation de la situation et une première phase d'intervention. Il pourrait faciliter l'accès aux soins de ces patients.

OBJECTIF - Cette communication présente le processus de fabrication d'un outil d'aide au repérage précoce et à l'intervention brève pour le Chemsex. Les besoins des professionnels et des usagers ont été évalués ainsi que leurs ressentis vis à vis de l'outil de RPIB que nous avons développé.

METHODE - A la suite d'une revue de la littérature sur la pratique du Chemsex et en suivant la méthodologie utilisée par la Haute Autorité de Santé pour la création de l'outil RPIB Alcool-Tabac-Cannabis, nous avons élaboré notre outil d'aide au repérage précoce et à l'intervention brève spécifique à la pratique du chemsex, ainsi qu'un guide utilisateur disponible pour les intervenants afin de les orienter dans l'usage de l'outil. Nous avons évalué l'intérêt pour ce type d'outils et l'outil en lui-même auprès de profession-

nels pluridisciplinaires dans les différentes structures accueillant ces patients sur le Puy-de-Dôme au travers d'un questionnaire qualitatif et quantitatif.

RESULTATS - Nous avons pu proposer cette évaluation à 14 professionnels du sanitaire ou médico-social aux profils diversifiés, et avons pu recueillir leur impression. Près de 86% d'entre eux prenaient en charge des usagers pratiquant le Chemsex. Une majorité exprimait rencontrer régulièrement des difficultés dans ces prises en charge, et 85,7% considérait utile de disposer d'un outil de RPIB, mais aussi de ressources comme des formations dédiées, des sites ou brochures d'information. Ils plébiscitaient également la mise en place d'un réseau de professionnels. Chaque partie de l'outil a ensuite été analysée et commentée, ce qui a permis de l'adapter et de finaliser la version actuelle. Les répondants ont très majoritairement trouvé l'outil simple d'usage, d'une durée de passation adaptée, et se sentaient en capacité de l'utiliser dans leur pratique quotidienne.

CONCLUSION - Notre travail a permis la création d'un outil d'aide au RPIB Chemsex en s'appuyant sur la littérature et les méthodologies déjà éprouvées par les instances de santé. Cet outil a été reçu positivement par les professionnels et devrait maintenant être diffusé et évalué à plus grande échelle afin d'être validé sur de larges populations d'usagers et de professionnels. Il permettra la mise à disposition des professionnels de tout horizon d'un outil simple et facilement accessible, permettant un repérage des consommations et des risques encourus, et une intervention brève permettant un premier accès au soin minimal, à visée motivationnelle.

Albert CAPOROSI - Paris - France

Buprénorphine à longue durée d'action : quand l'innovation thérapeutique fait débat dans les métiers

Long-acting Buprenorphine: when innovation sparks debate

La parole aux experts patients

Expert patients speak out

Né en 1961, j'ai commencé à me défoncer vers l'âge de 16-17 ans. Quelques clopes, quelques verres et la rencontre avec le cannabis a orienté les trente années qui ont suivies. Viré du lycée l'année suivante, j'avais déjà mis en place les conditions permettant une consommation régulière et pris le temps de m'accrocher à la codéine. Ma situation a empiré les années suivantes : deal, héroïne, cocaïne. Suite à un accident de voiture avec dommage à un tiers, sur injonction parentale, j'ai essayé un sevrage. Loupé. Mais j'ai mis à profit ce sursaut pour, les années suivantes, « m'intégrer » : baccalauréat en candidat libre, premiers emplois « sérieux » comme technicien de télévision puis comme monteur dans une structure de post production. Cela tient une quinzaine d'années, entre un travail harassant, les joints et les plans de poudre au mieux, la pharmacie au pire. En 1992, fatigué de courir tous les jours pour me réapprovisionner, j'accède à un traitement de substitution en ville (morphine puis méthadone). Je suivrai ce traitement une vingtaine d'années.

En 1999, facultés cognitives très diminuées, je suis obligé de quitter mon boulot. La défonce occupe alors 100% de ma vie. Plus aucune hygiène corporelle, plus de relations sociales, cette dégringolade me conduit en aout 2011 à l'hôpital où je rencontre un infirmier, ex-usager : un Patient-expert. Cette rencontre est déterminante. Le sevrage effectué, il m'oriente vers une association d'entraide, Narcotiques Anonymes. Vilaine rechute à quelques mois clean. Je décide de continuer de me « rétablir » à l'aide des

réunions NA que je fréquente beaucoup. Le bénévolat au sein de l'association d'entraide m'offre l'opportunité d'animer quelques réunions, de présenter l'association auprès de professionnels (médecins, infirmiers, éducateurs), de structures professionnelles (CSAPA) ou gouvernementales (MILDECA).

A deux ans clean, j'entreprends une thérapie cognitive-comportementale. Elle durera deux ans. C'est à l'occasion d'une réflexion sur mon devenir, réflexion entreprise avec la psychologue, que je décide de passer un DU en addictologie générale. Cette formation sera approfondie les deux années suivantes, en direction de la théorie de l'attachement en lien avec les troubles addictifs et en questionnant la structure mentale des personnes sujettes à la dépendance. Parallèlement, je participe comme auto-entrepreneur, à des actions de prévention en milieu scolaire et étudiant.

Reconnu travailleur handicapé en 2006 par la MDPH, ce statut est toujours le mien aujourd'hui. Il prend en compte les vulnérabilités avec lesquelles je vis. En 2019, le Pr. Michel Reynaud, invite une dizaine de « collègues » à participer à l'aventure France Patients Experts Addictions. L'objectif est de définir, promouvoir le rôle du patient expert dans le processus de soin en addictologie.

Certifié Patient-expert en addictologie par FPEA, dont je suis membre, je souhaite accompagner les candidats au certificat au mieux de mes possibilités.

Pathologies duelles et cancer

Dual Disorders and Cancer

• **Troubles mentaux et tabac : un sevrage plus complexe ?**

Tobacco Use Among Individuals with Mental Health Concerns: Complications for Cessation?

Tobacco use is increasingly concentrated among individuals with comorbid psychiatric disorders, even if not officially diagnosed. Historically, the importance of smoking cessation for these individuals was not prioritized, under the false belief that they were unmotivated to quit, could not quit, and/or that they needed to smoke to control their psychiatric symptomatology. After a brief review of the epidemiology of smoking and smoking cessation among individuals with comorbid psychiatric symptoms, this presentation will review the evidence for current options for pharmacotherapy and psychosocial treatments for cessation, with

tailored application in psychiatric populations. Prominent clinical trials will be summarized throughout, inclusive of sub-analyses from a recently concluded clinical trial for smoking cessation within primary care, wherein 38% of the sample reported treatment for anxiety/depression/substance use at baseline. The presentation will conclude with a set of research and clinical recommendations to consider into the future.

Dorian CESSA - Lyon - France

Gaming, Food and Sex

• **Chemsex in France: a lookout for risks factors & forgotten populations**

INTRODUCTION - For the last decade, Chemsex has continued its democratization in MSM population with a potential acceleration in the last few years. Practices, publics, products, consumption modes haven't ceased to evolve.

MATERIALS AND METHODS - Sea, Sex and Chems (SSC) is a medico-sexological study about addictive risk factors of drug uses in a sexual context (Chemsex). The study was based on an anonymous online-survey (seasexandchemsex.fr) accessible to everyone and diffused in early 2021 by diversified networks (associations, cultural actors, care settings, social networks, applications...). It aimed an enlarged recruitment decentered from care and using validated (or consensual) scores such as DAST10, hypersexual disorder criteria or NSSS (sexual satisfaction score).

RESULTS - 2767 individuals had been recruited (1934 men, 723 women, 110 non-cisgender) including almost 1200 self-describing as practicing Chemsex (Chs). Among Chs, we had drawn sociodemographic, sexological and addictological profiles: 70,9% considered themselves as homosexual, 12,9% heterosexual, 10,4% bisexual and 5,7% pansexual. 43% of them practiced Chemsex at least monthly and 13% weekly. Most consumed products were:

NPS(38%), GHB(20%), THC(17%) and cocaine(10%). Compared to non-practicing people (nChs), 84% of Chs had a DAST10 \geq 3 (vs. 32% in nChs; $p<0.001$) and a tripled hypersexuality disorder risk (12,5% vs. 4,1%; $p<0.001$). STIs also appeared more frequently with highest differences for HCV, syphilis and HIV (RR at 7,5, 4,37 and 4,22; all $p<0,001$). A low self-esteem seems associated with high risks of addictions (DAST10 \geq 6) for MSM (RR=1,71 ; $p<0,001$). In Chs female population, heterosexuality is also related with increased addiction risks (RR = 2,22 comparing to WSW, $p<0,001$).

DISCUSSION - SSC is one of the first french medico-sexological studies to investigate uses of drugs for sexuality among different populations, including for the first time women. Our findings show, Chemsex is diffusing in different communities, in different ways. It should imply new reinforcements and adaptations of public health policies.

Leila CHAOUACHI - Paris - France

Psychoactives Substances in real life

• **Nitrous oxide: From trivialization to alert**

INTRODUCTION - The misuse of nitrous oxide has been known for many years. Reserved for industrial or culinary use, in particular for the preparation of whipped cream, this so-called «laughing gas» has long been perceived as harmless, in particular because of its fleeting effect. Unrestricted sales, at low cost and widely promoted by rappers and other social network influencers, «balloons» have quickly become the must-have at young people's parties. However, the Addictovigilance network has issued an alert: nitrous oxide is not a harmless drug.

MATERIAL AND METHODS - An analysis of data from the Paris addictovigilance centre on nitrous oxide was carried out from 1st January 2018 to 30th June 2021 in order to provide an overview of the risks associated with this misuse.

RESULTS - A total of 57 notifications were collected over the study period with an exponential increase in cases in 2020 (n=33 vs n=2 in 2018) that seems to continue in 2021 (n=22). Users are

predominantly male with a sex ratio of 1.39 and an average age of 22.3 ± 4.7 years. Nitrous oxide is the only drug used in 82.5% of cases, with one out of two users using it chronically, at an average dose of 115 cartridges/day (up to 500). The complications observed are essentially neurological (54.4%), with paraesthesia, muscular weakness and walking disorders, but also psychiatric (n=3). There were also 5 mentions of the use of nitrous oxide in the context of a sexual assault.

CONCLUSIONS - The use of nitrous oxide continues to increase, despite the warnings issued and the knowledge of the disabling problems it generates. As the only cure is the cessation of consumption, addictology is at the centre of the treatment. With the advent of criminal use, awareness raising among the youngest seems more necessary than ever.

Faredj CHERIKH - Nice - France

Covid-19 and Dual Disorders

• COVID 19: Managing boredom and feelings of emptiness through addictive behaviors

The objective of our study is to describe the state of psychological health of the general population during the first confinement and to analyze behaviors at risk of addiction (addictive risk behaviors) and their link with stress, boredom, and the feeling of emptiness. This is a prospective descriptive univariate study carried out using an anonymous online questionnaire distributed via social networks. This questionnaire was sent on the 1st of April and the feed-back responses were gathered until the 31st of Mai 2020.

Results - 1193 participants, predominantly females, under 55 years old. Our analysis shows significant rates of feelings of sadness, anxiety, sleep disorders and sedentary lifestyle as well as increased use of tobacco and alcohol (13%), the Internet (73%), smartphones (88%). Craving for food is reported by 26% of participants and for tobacco by 19% of smokers. Boredom and feeling of emptiness were significantly associated with the

time spent on the internet, social network, television series and eating ($p < 0.001$). These addictive behaviors were significantly more common than drug abuse and time spent playing video-games. Craving for smoking was significantly increased by all the addictive behaviors reported above ($p < 0.0005$) while it was decreased by physical activity ($p < 0.005$). The study also underlines that craving for tobacco decreases when food craving increases. Eating when facing a feeling of emptiness increases craving for tobacco, as drinking alcohol when facing stress.

CONCLUSION - Covid-19 lock-down generated boredom and feeling of emptiness in the general population were managed with common addictive behaviors while physical activity showed a protective effect. These emotions experienced during the pandemic are therefore at risk of developing addictive behaviors in the general population and probability of aggravating pre-existing addictions

Shilpa CHOKSHI - London - UK

Quand Foie et Addictions nous prennent les tripes

Liver and addictions: gut feelings

• Système immunitaire dans la genèse et la modulation de la maladie alcoolique du foie

Immunopathogenesis of Alcoholic Liver Disease and development of immunomodulatory targets

Alcohol-related liver disease (ArLD) is an escalating global problem, it is the commonest cause of liver cirrhosis and is responsible for >2.5 million deaths/year. One of the major and most common complications that ArLD patients face is an increased susceptibility to bacterial infection, which can lead to worsening of liver disease and multi-organ failure. In fact, the development of bacterial infection often signals the terminal phase in ArLD, increasing the probability of death to more than 60% by 1 year. Current guidelines recommend intensive antibiotic therapy. However,

this has led to the increasing emergence of multi-drug resistant bacteria which are associated with a higher incidence of septic shock, rapid deterioration of liver function and mortality. As such, there is a pressing need to explore new paradigms for anti-infective therapy and host-directed immunomodulatory therapies are a promising approach. Our studies reveal several immunological pathways that mediate the profound immunodeficiency observed in patients with severe ALD and highlight novel therapeutic targets to restore an effective state of immunocompetency.

Michael T. COMPTON - New York - USA

Déterminants sociaux et sociétaux des pathologies duelles

The company we keep: framing addictions and mental health

• Santé mentale : les déterminants sociaux et l'insécurité alimentaire

The Social Determinants of Mental Health, with a Focus on Food Insecurity

This plenary talk will introduce and define the concept of the social determinants of mental health (the conditions in which people are born, grow, live, work, and age that impact mental health). These determinants are shaped by the multilevel distribution of money, power, and resources in society, and are responsible for many of the health inequities that exist within communities and countries. Simply put, society plays a prominent role in creating and shaping poor mental health and mental illnesses, and, as such, society is also in a position to improve mental health and reduce the risk for mental illnesses. Furthermore, in order to consider a prevention approach in psychiatry, we must move beyond the traditional concepts of proximal risk factors, and more toward the

“fundamental causes of disease,” also referred to as “the causes of the causes”, or the social determinants. This talk will briefly touch on the many social determinants that are impacting our societies, but will focus in and provide a more detailed analysis of one in particular: food insecurity. The presenter will give an overview of the effects of hunger, food insecurity, poor dietary quality, and nutritional deficiency and their adverse effects on mental well-being. Associations between food insecurity and the obesity epidemic in many Western countries will be discussed. Tested and effective clinical and policy interventions that support good nutrition across the lifespan will be described.

Tom CODERRE - Boston - USA

La parole aux experts patients / Expert patients speak out

Since its inception, the addiction profession has been both a leader in the recovery movement and a beneficiary of its advocacy. This presentation will outline major milestones in the history of addiction recovery in the United States, its role in the

addiction profession, and suggestions of the implications of recent historical trends for addiction professionals. You will hear from a recovery leader who will share his personal journey and how it created an opportunity to shape the future.

Autism-Psychosis Spectrum and Dual Disorders

• The Influence of Substance Abuse on Inhibition Capacities and Risky Decision in a Group of Outpatient Schizophrenia Patients

OBJECTIVE - Substance abuse is common among patients with schizophrenia, is related to worse course and outcome of illness. Unfortunately, little is known about how substance abuse affects the cognitive function of schizophrenia patients, whose cognitive function is often already comprised. Neurocognitive functioning includes inhibition control and decision-making, and both schizophrenia and substance use disorder are related to impairments of inhibition control. However, the influence of substance abuse on inhibition capacities among schizophrenia patients is unclear.

METHODS - This study measured the influence of substance use disorder on inhibition capacities and risky decision-making in a group of 39 schizophrenia patients that were evaluated using a socio-demographic questionnaire and clinical assessment using the Positive and Negative Syndromes Scale for Schizophrenia. To assess inhibition control we utilized the Matching Familiar Figure Test (MFFT) and the Stroop task, and to evaluate decision-making we used the Iowa Gambling Task (IGT) and self-report questionnaire, the Barratt Impulsiveness Scale.

RESULTS - Univariate analysis found significant differences between the groups with regard to criminal history ($\chi^2 = 5.97$, $p = .015$), smoking status ($\chi^2 = 12.30$, $p < .001$), and total BIS score ($t = -2.69$, $df = 37$, $p = .01$). Our model did not find a significant effect of substance abuse on the first response time and number of errors on the MFFT or in the total interference index of Stroop performance and net score on risky decision-making in the IGT. The two groups did not differ significantly either in first response time or in number of errors on the MFFT ($F = 0.54$, $p = .47$, $d = .24$, 95% CI [-.4, .88]; $F = .28$, $p = .60$, $d = .61$, 95% CI [0, 1.26], respectively), nor did they differ in the total interference index of the Stroop task ($F(1) = .49$, $p = .49$, $d = .25$, 95% CI [-.38, .88]).

CONCLUSION - The analyses did not detect any statistically significant effect of substance abuse on inhibition control or risky decision-making processes in outpatients diagnosed with schizophrenia, despite increased impulsivity, criminal history and smoking status. These results neither support nor disprove previous findings.

Simon DENIEL - Caen- France

Predicting Patient Outcomes

• Neuropsychology of addictions in residential Therapeutic Communities: are addictive and psychiatric comorbidities linked to substance use and cognitive specific profiles?

INTRODUCTION AND AIMS - Therapeutic Communities (TCs) are care units welcoming people with Alcohol and Drug Use Disorder (AUD/DUD) and frequent psychiatric comorbidities that can lead to neuropsychological impairments which are likely to hinder the benefit of addiction treatment. However, these disorders are rarely considered in the support of TCs residents. The aims of this study are therefore to describe (1) the consumption profile of the residents regarding their psychiatric history and (2) their neuropsychological impairment profile.

MATERIAL AND METHODS - Residents of 3 French TCs underwent clinical interviews and questionnaires (health, psychiatric history, substance use with DSM-V criteria, consumption data) and a neuropsychological screening (BEARNI tool). At first, the sample of TCs residents ($n=26$) was compared to a healthy control (HC) group ($n=26$) matched in age, gender and academic level. An analysis of the profiles was also conducted in TCs residents according to their psychiatric history considering 3 categories: psychosis, anxiety-depressive disorder and undiagnosed psychiatric disorder.

RESULTS AND CONCLUSIONS - TCs residents all had AUD and used tobacco. 76,92% used cannabis and 65,38% cocaine. Significant difference was shown on the DSM-V criteria with anxiety-depressive consuming more alcohol than undiagnosed disorders and psychotics using more cocaine than undiagnosed. As for cognition, HC performed better than TCs residents on ataxia, working memory, visuospatial abilities subtests and total score but no difference was found on flexibility. When only comparing the 3 TCs resident groups, cognitive profile differences were found in our 3 groups.

Results indicate a consumption profile difference between people with substance use disorder and psychiatric comorbidities. TCs residents were globally impaired compared to HC and the severity of the cognitive impairments varied according to the psychiatric disorder classification. This data is a first step in better understanding specific TCs residents' consumption and cognitive profiles to identify people who may be at-risk of neuropsychological impairments and consequently adapt care and treatment proposed.

François DESTOMBE - Lille- France

A variety of approaches to mental disorders

• Percolation of non-adjacent expertises during pandemic: a case study on the development of harm reduction tools

OBJECTIVES - This study focuses on the tools, means and methods applied by a virtual team during pandemic and lockdown in order to design harm reduction devices. With antagonistic starting points, the rôle and evolution of each stakeholder has been documented and analyzed.

MATERIALS AND METHODS - Further to the works of Madeleine Akrich, deployment of STS analysis methodology

RESULTS - Harm Reduction has strong legal constraints and is often morally tainted or shortsighted; The pandemic lockdown has worsened the situation of drug users and lessened the ability

of social centers to support them; testing of devices is prohibited; Meetings are forbidden...

Given this dire background, a virtual team comprised of experts from University, Industry, Social care and users has been able to devise a set of tools and the relevant methodology to pursue their developments. User centered, these tools have proved efficient, ethical and ecofriendly. Our study exposes the different steps in overcoming initial distance up to concurrent engineering without any physical gathering and within a short time frame, each participant able to pinpoint his own trademark in the end product, and advocate the benefits of the methodology.

SESSION SPÉCIALE « YOUNG INVESTIGATORS » EN PARTENARIAT AVEC EISAI Schizophrénie, Cancer & Addiction

• Momentary decrease in cognitive performance as a vulnerability factor for substance use in schizophrenia

INTRODUCTION - Fluctuations in executive performance as measured by smartphone-based cognitive tests have recently been shown to predict the manifestation of positive symptoms in patients with schizophrenia. The aim of this controlled study is to examine whether decreased cognitive performance on these same tests also increase the risk of substance use in this population.

METHODS - Outpatients treated for schizophrenia (n=33) and healthy controls (n=45) completed an fMRI examination, followed by Ecological Momentary Assessment (EMA) for seven days. EMA assessed the experience of psychotic symptoms (patients only) as well as the use of psychoactive substances (all participants). At each EMA assessment, all participants also completed a mobile stroop or letter-word generation test.

RESULTS - The association of poor performance on the letter-word generation test and substance use over subsequent hours of the day was significantly greater in patients with schizophrenia compared to controls (OR=1.16; 95% CI=1.08, 1.24). Within-group analyses confirmed that patients were far more likely to use sub-

stances following moments of reduced executive performance for both the mobile stroop (OR=43.88, 95% CI= 21.86, 88.08) and the letter-word test (OR=6.05, 95% CI=2.83, 12.95). Although positive symptoms at T0 were associated with increased anxiety at T1 ($\gamma = 0.57$, SE = 0.27, $t = 2.11$, $p < 0.05$), they did not directly predict substance use and therefore do not mediate the role of cognitive performance. Neuroimaging analyses demonstrated significant differences in connectivity underlying the EMA findings.

CONCLUSION - This investigation provides the very first evidence that within-day fluctuations in executive functions increase the risk of substance use in patients with schizophrenia, in addition to their association with positive symptoms. These findings strongly suggest that momentary executive dysfunction is a common underlying vulnerability factor for both psychotic symptoms and substance use.

Les psychédéliques : la voie d'avenir des pathologies duelles ?

Psychedelic drugs: are they the future of dual disorders treatment?

• Psychédéliques sérotoninergiques en théorie et en pratique

Serotonergic psychedelics in affective and addictive disorders in theory and in practice

In this talk I will present data from clinical work with psychedelic-assisted therapy - of relevance to both affective disorders and addictions. An introduction to classic serotonergic psychedelics will be provided and possible brain mechanisms will be discussed. Data from both lab-based work [with psilocybin and DMT] and from global online surveys will be presented, herunder both data from full psychedelic doses and psychedelic microdosing.

Opioids and Cannabinoids

• Identifying aberrant use of medical marijuana: Research protocol and preliminary results

OBJECTIVES - The use of marijuana in medical contexts has increased in the past decades globally and in Israel. One of the negative consequences of marijuana use in non-medical context is aberrant use and addiction. However, up-to-date there is no clear definition or validated instruments for assessing aberrant use of medical marijuana (MM). the aim of the present study is to construct and validate a brief instrument for assessing aberrant use of MM in three phases.

MATERIALS AND METHODS - in this study, we systematically reviewed qualitative research focusing on narratives of positive and negative consequences of cannabis use among patients prescribed MM and conducted a qualitative investigation focusing on aberrant use and addiction among 15 MM patients.

RESULTS AND CONCLUSIONS - findings from the first two phases of the study highlight several aspects of aberrant MM use: (a) physical dependence (b) psychological dependence (c) cognitive impairments (d) non-compliance with MM indications (dose etc.) (e) self-stigma and shame associated with MM use; and (f) impaired psychosocial functioning due to excessive MM use. We conclude that MM may serve as an effective and relatively safe medication, yet patients' concerns regarding its effect should be explored. Based on these findings, I will present a research protocol for constructing and validating a brief screening tool for aberrant MM use based on a sample of 200 patients prescribed MM. With the increase in MM use globally, this instrument will allow clinicians and researchers to assess, monitor and address problematic MM use and related harms.

Opioids & Prevention

- **Implementation of a reactive system for management of physicians suffering from substance use disorder: organizational and institutional concerns with such a sensible subject**

BACKGROUND - Substance use disorders (SUD) might concern as many as 8–15% of physicians. Medical specialties are not equally affected. Our aim was to describe the addiction care delivery preferences among physicians if a dedicated consultation with a specialist in addiction medicine existed in their workplace.

METHODS - The online, anonymous questionnaire was released through the Sphinx software requested by the Ethics committee to protect data confidentiality between April 15th, 2020 and July 15th 2020. The following variables were requested: have you ever consulted a specialized addiction team? Would you recommend such a consultation if it existed? Do you think that you currently need to consult such a specialist? Preferences were explored with questions rated between 1 and 5 from most important to least important including confidentiality; neutral location; wide working hours; making appointments facilitated.

RESULTS - 1093 physicians performed the online questionnaire. The main barriers to consult a physician specialized in addiction medicine were denial of troubles (68,8%), fear of stigma (55,2%),

self-medication (54,4%), confidentiality concerns (46%), the lack of knowledge about addiction care (28,6%) and the fear of social/familial/professional and economic consequences (15,8%). Focusing on the organization of such a consultation, physicians gave priority to the confidentiality (67,5%), especially by taking place in a neutral location outside the addiction service (27,9%); and the possibility to get an appointment with wide working hours (42,8%).

DISCUSSION - Caring physicians suffering from SUD requires a multidisciplinary team with experience working with this population. Denial of trouble and concerns about confidentiality encourage them to avoid seeking help whereas prompt recognition of such addictive disease is critical because delay could result in morbidity or mortality not only in the addicted physician but also in his or her patients. The authors describe the main difficulties encountered both institutional on this sensitive subject and organizational to offer a responsive system to the growing demand of health professionals.

Yasmina FREM - Sèvres - France

Virtual Therapies

- **Virtual Day care center for patients suffering from addictions during the pandemic**

SUMMARY - Most of the day care hospital centers for Addictions had to stop in person care services and adapt to the “work from home” confinement trend. The “Hospital des quatre villes” of Sèvres (CH4V) quickly set up a virtual day care center for its patients suffering from addictions. We tried in this study to measure the impact this online treatment service had on our patients.

METHODS - Eleven patients out of twenty-two accepted to be part of this study. The number of days of alcohol consumption, the quantity of alcohol consumed each time, and the use of anxiolytics were monitored. The patients also frequently answered to several questionnaires: The Hospital anxiety and depression questionnaire, the perceived stress questionnaire, the social functioning questionnaire and the satisfaction survey of our virtual therapy services.

RESULTS - We didn't perceive any increase in the number of days of alcohol weekly consumption nor quantity consumption. Seven patients out of 8 stayed abstinent. The questionnaires scores were relatively stable all along. The satisfaction of the patients of the virtual hospital services was high and encouraging to the use of this new virtual treatment.

CONCLUSION - Mental health treatment via the internet and the phone can be an additional way to integrate in the addiction hospital day care center programs, but one should not forget that some patients don't have access to such facilities and can therefore have a deterioration of their situation.

Daniel GARCIA-FUENTES - Barcelona - Spain

Dual Disorders Treatment

- **Dress Syndrome associated to Lamotrigine treatment in a patient with BPD and severe alcoholism**

INTRODUCTION - We describe a Clinical case of a patient with Borderline personality disorder (BPD) and alcohol consumption, that is admitted in a dual pathology hospitalization plant for stabilization, and during initial treatment with lamotrigine appears erythematous reaction with hepatic function involvement.

CLINICAL CASE - We report a case of a patient with severe BPD in dual diagnosis with severe alcohol consumption, accompanied with risk conducts like driving under the effects of alcohol, suicide attempted, and with severe repercussion on the quality of life of the patient and on her relatives. In the last hospital admission, we reviewed the clinical history evolution and the clinical episodes with the patient, observing a predominance of depressive episodes and symptoms in the last years. For that reason, we initiate lamotrigine treatment with the objective of regulate and stabilize the depressive symptoms and in order to reduce the instability and impulsivity of the borderline personality of the patient. After 12 days of treatment appeared a dermatological affection compatible with cutaneous affection of lamotrigine treatment, described as erythematous reaction (trunk and lower extremities) and

febrile syndrome with involvement of the hepatic function (mixed pattern of anicteric cholestasis with TP of 51%). Abdominal ultrasound ruled out pathology of the bile duct. The patient is admitted in Internal Medicine for stabilization and is orientated as a Dress Syndrome, retiring lamotrigine and treated with prednisone 50mg, improving itching and rash, with clinical improvement and blood test normalization, with TP 82%. Then is returned to psychiatry to continue with her recovering process.

CONCLUSIONS - Lamotrigine is a useful treatment as a mood stabilizer and with potential effectiveness in predominance of depressive symptoms. Is also a well-known his risk of somatic and dermatologic affection during the treatment, particular in its induction. We must be careful with the doses (slowly increasing during weeks) and with the psychical examination during this process, attending the dermatological impairment and the blood test for the correct management. In case of some finding, a rapid coordination with internal medicine consultant is crucial for the early withdrawal and medical treatment of this presentation.

Psychoactives Substances in real life

• Borderline personality disorder and comorbid alcohol use: association with uncertainty and dissociation

OBJECTIVES - The aim of this research was to study the relationship between intolerance to uncertainty, difficulties in emotional regulation, dissociation, anxiety, depression and borderline symptomatology, history of childhood trauma and history of suicide attempts in a group of patients with borderline personality disorder and alcohol use disorder, in comparison with other individuals with borderline personality disorder only.

METHOD - Forty-seven individuals, including 37 women and 10 men, treated at Corentin-Celton Hospital, participated in this study. The mean age was 38 years. Participants completed a sociodemographic questionnaire, a substance use questionnaire, a risky behavior questionnaire, the Borderline Symptoms List 23, the Intensity of Addictive Behavior Questionnaires (alcohol and cannabis), the Hospital Anxiety and Depression Scale, the Intolerance of Uncertainty Scale, the Difficulties in Emotion Regulation Scale, the Dissociative Experiences Scale, and the Childhood Trauma Questionnaire – Short Form.

RESULTS - Individuals diagnosed with borderline personality disorder and alcohol addiction had significantly higher frequency of suicide attempts compared with individuals with borderline personality disorder alone. Within borderline personality disorder and alcohol addiction, emotional regulation difficulties correlated with borderline and anxiety-depression symptomatology, dissociation, childhood trauma, number of suicide attempts and age of first suicide attempt. Intolerance of uncertainty is associated with emotional regulation difficulties, dissociation, and emotional and sexual abuse. Dissociation was associated with emotional and sexual abuse. These correlations are all significant.

DISCUSSION - Because intolerance of uncertainty appears to be related to several elements within this comorbidity, it may represent a focus for management of borderline personality disorder and alcohol addiction. Psychoeducation and cognitive restructuring can be evoked to work on this dimension.

Ashley GEARHARDT - Ann Arbor - USA

La faim des pathologies duelles ?

An appetite for dual disorders?

• L'addiction alimentaire : état actuel de la science

Can Food Be Addictive? The Current State of the Science

Poor diet has overtaken tobacco as the leading global cause of preventable death. A food environment dominated by cheap, accessible and heavily marketed highly processed (HP) foods has been a key contributing factor to this public health crisis. There is growing evidence that HP foods, specifically those with artificially high levels of refined carbohydrates and fat, are capable of triggering addictive processes. Highly processed food addiction (HPFA), as measured by the Yale Food Addiction Scale, is associated with obesity, diet-related disease and poorer quality

of life. HPFA is also associated with biopsychosocial factors implicated in other addictive disorders and co-occurs with substance and behavioral addictions. In this talk, the current state of the science of HPFA will be discussed, including what aspects of food appear most likely to trigger addictive processes and potential treatment options.

Gail GILCHRIST - London - UK

Déterminants sociaux et sociétaux des pathologies duelles

The company we keep: framing addictions and mental health

• Addressing intimate partner violence and abuse perpetration by men in treatment for substance use

While no single factor explains why some people perpetrate intimate partner violence and abuse (IPVA), there is strong and consistent evidence that substance use is a contributory risk factor. Around 4 in 10 men in treatment for substance use have perpetrated IPVA in the past year, higher than men from the general population. Despite this, few are referred to perpetrator programmes. The ADVANCE programme of research was conducted to better understand the role of substance use in IPVA perpetration, and to develop and test an intervention to target abusive behaviour perpetrated towards a female partner by men in substance use treatment. We conducted a review to identify what works to reduce IPVA perpetrated by men who use substances and found that current integrated interventions were not more effective than treatment as usual. Existing interventions only addressed intoxicated violence, whereas our interviews with men and their female partners highlighted the complex interplay between IPVA perpetration and the effects

of intoxication, withdrawal and craving, gendered power relations and controlling behaviours. We developed the evidence informed ADVANCE intervention to target the specific risks and needs of men in substance use treatment, explicitly interweaving IPVA perpetration risks related to substance use/ substance using lifestyles excluded from other perpetrator programmes. Pre COVID-19, we trialled the 16-week group ADVANCE integrated intervention among 104 men in substance use treatment who had perpetrated IPVA in the past year. At the end of the intervention, IPVA perpetration, use of controlling behaviours, anxiety, depressive symptoms and socially desirable responses reduced for men randomly allocated to receive the ADVANCE intervention. As a result of the pandemic, we have adapted the ADVANCE intervention for remote digital delivery, preliminary findings will be presented.

Dual Disorders Treatment

• Use of bupropion in adults duals with hyperactive attention deficit disorder (TDAH)

Exists a high prevalence of TUS with TDAH (5%). This emergent condition worses the course of the illness, due to the impulsivity and dysfunction of the executive functions; that affect volition and cognition. The therapy with stimulants is risky because of their addictive properties. Don't exist studies with systematic evidence that support the Bupropion Use; but there are enough empiric data; cases and cohortes studys, Cochrane revisions and reports of Pediatrics Society of Spain and Chile, that support it use. Bupropion (1969), seem sure; efficient and without relevance collaterals effects. By the other side, in Psychiatry isn't unusual the alternative use of psychofarmacs, furthermore of habitual indications, vg: Clozapine & Lithium like prophylactic in suicidality. Beside bupropion is recommended in nicotineism and depression.

Additionally, specify that Precision Psychiatry suggests «to find the best therapeutic option, for every patient».

Its revised 315 electronic data card of Dual Adults, from Therapeutics Communities. Its found 50 patients with the diagnostic of TDAH (CIE 10), that included impulsivity, inattention and hyperactivity. They received Bupropion 150/300mg daily; with monthly control and following for 4/12 months. Its evaluated effective outcome through: Autocontrol, improvement of executive capacity, equals relation, therapeutic adherence /performance, and craving.

RESULTS - Prevalence 15.8% (50 / 315) / 84% males / 59% among 30 to 49 year olds / 56% with full high school and 11% high technical education / 14 % casados, 36% single and 48% cohabits / 56 % previously TDAH / 92% polyadicts (prominent coca/ethanol/ cannabis) / 66% received 300 mg / daily.

POSITIVE RESPONSE - 62% in the first month / 22 % in the second month / 38 % Craving (-) in the first month

Vincent GOUTTEBARGE - Amsterdam - Netherlands

Jeux et jeux pathologiques : IRL et virtuels

Games and gaming: IRL and virtual

• Sportifs de haut niveau, santé mentale et l'usage des substances

Elite athletes, mental health and substance use

In elite sport, most of the epidemiological studies have been directed towards the physical health of athletes, principally towards the occurrence of musculoskeletal injuries and more recently towards the prevention of these injuries. Recently, mental health symptoms and disorders (e.g., those involving distress, anxiety, depression or substance misuse) have been increasingly gaining research attention in the context of elite sport. This is not surprising because elite athletes are (cumulatively) exposed to sport-specific stressors (e.g., severe musculoskeletal injuries, transitioning out of sport) and generic stressors (e.g., adverse life events) that are likely to induce mental health symptoms. A

recent cross-sport meta-analysis showed that the prevalence of mental health symptoms ranged from 20% for alcohol misuse to 35% for anxiety/depression among active elite athletes, and from 15% for alcohol misuse to 25% for anxiety/depression among former elite athletes. These prevalence rates vary slightly across sports and across countries. While educative and preventive strategies should be developed and implemented in elite sport, there is also a need to identify elite athletes potentially at risk for or already experiencing mental health symptoms such as substance misuse.

Frank GRAY - Slough - UK

Opioids & Prevention

• Examining efficacy and safety of extended-release buprenorphine in subgroups of subjects with moderate to severe opioid use disorder

OBJECTIVES - SUBLOCADE® is a once-monthly, extended-release depot formulation of buprenorphine for treating moderate to severe opioid use disorder (OUD). We conducted post-hoc subgroup analyses from the pivotal Phase III study (NCT02357901) to compare efficacy and safety of SUBLOCADE® 300mg and 100mg with placebo.

MATERIALS AND METHODS - Adults (n = 489) with moderate or severe OUD were randomized to SUBLOCADE® 300/100mg, 300/300mg (2 initial monthly injections of 300mg followed by 4 monthly maintenance doses of 100mg or 300mg), or placebo for 24 weeks. Opioid abstinence assessment was based on weekly opioid-negative urine samples and negative self-reports. Sensitivity analyses were performed to assess whether changes in age, gender, BMI, intravenous drug use, polydrug use, underlying liver conditions or psychiatric illness were associated with changes in primary and secondary efficacy endpoints and also for changes in

TEAEs, SAEs, AEs leading to death and AEs leading to discontinuation.

RESULTS AND CONCLUSIONS - In all cases, and for both dosing schedules, SUBLOCADE® treatment showed superior efficacy vs. placebo treatment. For safety analysis, the only observed difference was that the subgroup of participants with a history of psychiatric conditions had a modest increase in subjects with any AEs, treatment related AEs and serious AEs relative to subjects without a psychiatric disorder, but this was noted in both the active treatment and placebo patients and was independent of treatment with SUBLOCADE®.

In conclusion, the safety and efficacy of SUBLOCADE® was consistent across subgroups. This observed consistency supports the relevance of the results to settings outside the United States despite potential differences in populations with OUD.

Opioids and Cannabinoids

• Rapid Initiation of Extended Release Buprenorphine in Patients using Fentanyl and Fentanyl Analogs

INTRODUCTION - During the 12 months ending October 2020, highly potent synthetic opioids, including fentanyl and fentanyl analogs, accounted for 81% (53,792 of 66,047) of all opioid overdose deaths in the US¹. This case series from open-label studies evaluated initiating extended release buprenorphine (BUP-XR) following a single dose of 4 mg transmucosal buprenorphine (BUP-TM) in the challenging set of fentanyl-positive (FEN+) subjects² with opioid use disorder.

METHODS - Eligible subjects abstained from opioids for at least 6h. Urine drug screens (UDS) and clinical opiate withdrawal scale (COWS) data were collected. When the COWS score was ≥ 8 , 4 mg BUP-TM was administered. If the subject did not exhibit symptoms of hypersensitivity, precipitated withdrawal, or sedation after 1h, 300 mg of BUP-XR was injected and clinical assessments were completed in the clinic (48h) and as an outpatient (28d). Subjects could elect to receive 5 additional injections of BUP-XR and be followed for 24w.

RESULTS - Twenty subjects were FEN+ by UDS but only 5 self-reported use of fentanyl. All 20 FEN+ subjects received BUP-TM, 18 received BUP-XR injection, 14 elected to receive the second injection and 11 subjects received all 6 injections. After BUP-XR injection, COWS scores decreased from a pre-BUP-XR mean \pm SD baseline of 13.7 \pm 3.1 (moderate withdrawal) to 7.8 \pm 4.2 (mild withdrawal) at 6h and to 4.6 \pm 3.5 (no active withdrawal) at 24h. Based upon adjudication committee assessment, 2 subjects experienced precipitated withdrawal during initiation, but still completed all 6 injections. After 24w, 9 of 10 retained subjects were negative for opioids by UDS. Fourteen subjects experienced adverse events, mostly withdrawal symptoms within 48h of injection.

CONCLUSION - Rapid initiation of BUP-XR 300 mg following a single 4 mg dose of BUP-TM in FEN+ subjects was well-tolerated with 24w retention and abstinence rates comparable to subjects using a broad range of opioids.³ (ClinicalTrials.gov Identifiers: NCT03993392 and NCT04060654)

Opioids & Prevention

• The role of substance use in the risk of not getting employed among young people: prospective findings from the CONSTANCES cohort

OBJECTIVES - To examine prospectively associations between substance use (tobacco, cannabis and alcohol) and the risk of not getting employed among young people.

METHODS - From the French population-based CONSTANCES cohort, 2,873 students who never worked were included between 2012 and 2018 and followed-up for 2.7 years in average. Generalized estimating equations computed the odds of being unemployed versus employed according to substance use at baseline controlling for sociodemographic factors and depressive state. Tobacco use (smoking status and number of cigarettes per day), cannabis use frequency and at-risk alcohol use according to the Alcohol Use Disorder Identification Test (total score >7) were introduced separately in the models.

RESULTS - Tobacco use was not significantly associated with employment. Cannabis use at least weekly, and at-risk alcohol use, were associated with increased odds of being unemployed (Odds-Ratio [95% Confidence Interval]: 1.85 [1.29, 2.64] and 1.34, [1.04, 1.71], respectively). Additional analyses on sub-scores of alcohol use suggested that the association was mainly driven by alcohol dependence rather than frequency of use.

CONCLUSIONS - Public health campaigns targeting youth should include lower chances of getting employed among the detrimental roles of regular cannabis use and at-risk alcohol use.

Gaming, Food and Sex

• Physical exertion at work and addictive behaviors: tobacco, cannabis, alcohol, sugar and fat consumption: longitudinal analyses in the CONSTANCES cohort

OBJECTIVES - This study examined the prospective association of physical exertion at work with risk of tobacco, cannabis, alcohol use and sugar and fat consumption.

MATERIALS AND METHODS - Volunteers of the French population-based CONSTANCES cohort currently employed were included from 2012 to 2017 for tobacco and cannabis outcomes (n=100,612), and from 2012 to 2016 for alcohol and sugar and fat outcomes (n=75,414). High level of physical exertion was defined as a score ≥ 12 at the Rating Perceived Exertion Borg scale. Substance use was self-reported and patterns of sugar and fat intakes were obtained from principal component analysis and used in quartiles. Generalized linear models computed odds of substance use and sugar and fat consumption at follow-up according to baseline physical exertion at work, while adjusting for sociodemographic factors, depressive symptoms and baseline level of consumption.

RESULTS AND CONCLUSIONS - High physical exertion was associated with tobacco use, i.e.: increased odd of relapse in former smokers (OR:1.13, 95% confidence Interval (CI):1.02-1.24), and increased number of cigarettes per day in current smokers (OR:1.54, 95%CI:1.33-1.78) with dose-dependent relationships (P for trend <0.001). It was also associated with increased odd of cannabis use at least once per month compared to no use in the past year (OR:1.31, 95%CI:1.03-1.66) and with increased odds of sugar and fat consumption (OR:1.06, 95%CI:1.01-1.11 and OR:1.13, 95%CI:1.07-1.18, for third and fourth quartiles compared to the first, respectively). As a conclusion, the associations between physical exertion at work and subsequent tobacco and cannabis use and sugar and fat consumption should be taken into account for information and prevention strategies.

Épidémiologie des pathologies duelles

Epidemiology of Dual Disorders

- **Les agonistes des récepteurs opioïdes : prévenir la mortalité liée aux opioïdes**

Opioid Agonist Treatment (OAT) and Prevention of Drug Related Deaths and Overdose Mortality

Global evidence shows that opioid dependent patients have a substantially higher risk of premature mortality than general population - with pooled mortality risk across multiple cohorts of 1.7 per 100 person years approximately 10 times higher than general population. But there is also evidence of substantial heterogeneity with mortality risk varying from 0.8 per 100 person years in Australia to 7.6 per 100 person years in South Asia. New updated evidence shows that opioid agonist treatment (OAT) - either methadone or buprenorphine more than halves all-cause mortality - with evidence from cohort studies consistent by gender, age, location, HIV, or HCV status. OAT substantially reduces overdose and suicide and also reduces alcohol-related, cancer, and cardiovascular mortality during OAT. Mortality risk varies in critical periods in first month leaving OAT and for methadone but not buprenorphine in the first month of OAT. Evidence suggests an extremely strong

protective effect of OAT when incarcerated and after release from incarceration. There may be interactions between morbidity, overdose risk and type of OAT and co-prescription of benzodiazepines in opioid dependent patients increases overdose mortality risk. Model projections suggest that scaling up OAT, prolonging duration of OAT in the community and providing OAT in prison, could substantially reduce mortality risk in multiple sites. In many countries - including the UK - drug related deaths constitute an ongoing public health crisis demonstrated by persistent increase in opioid related deaths in the population. The key question for policymakers and practitioners is whether there is sufficient coverage and duration of OAT to avert drug related deaths in the population - which we demonstrate with new models based on linked data sets in New South Wales.

Romain ICICK - Paris - France

SESSION PARRAINÉE PAR LA FFA

Updates about the state of care for adult ADHD in France and Europe

- **Cross-national disparities in the regulation for ADHD medication in Europe and beyond**

OBJECTIVES - Adult attention deficit / hyperactivity disorder (ADHD) is a pervasive neurodevelopmental disorder that affects ~1% children worldwide¹, recently recognized as persistent in adulthood, with a prevalence of 15-20% in special populations such as individuals suffering from addiction². Although centrally-acting psychostimulants are widely and safely used to treat adult ADHD³⁻⁵, none was available in France until very recently⁶, so that patients and health professionals to gather into associations and networks aimed at facilitating proper care and putting pressure on Health authorities. The objective of the current symposium is to provide the audience with an updated and practical overview of ADHD care possibilities in France, notably in the addiction population.

MATERIALS AND METHODS - Firstly, Mathieu CHAPPUY / Romain ICICK will describe the accessibility of psychostimulant drugs for ADHD in adults in France compared to other countries, using country regulations. Secondly, Etienne KAMMERER will report

aims and achievements from the multidisciplinary group Coordination Nationale TDAH Adultes. Thirdly, Lucie PENNEL / Pr. Maurice DEMATTEIS will describe a series of complex adult ADHD cases and their treatment plan.

RESULTS AND CONCLUSIONS - Two medications show promising advances of availability for adult ADHD in France, although many other countries are more advanced in the field. The Coordination Nationale TDAH Adultes was created to face these difficulties, initially focused on addiction populations. Since, it has gathered clinicians from various backgrounds all over France to become actively involved in ADHD care and psychostimulant prescription for adults. In line with recent work from international consortia, our regional case series suggest that psychostimulant medications can be safely used, even at high dosages, after careful ADHD diagnosis and comorbidity assessment, even in case of severe addictions. A national databank could help refining these preliminary findings.

SESSION PARRAINÉE PAR L'AESP

Découvertes dans le multivers sémiologique de l'addictologie

- **Le TDAH de l'enfance à l'âge adulte: mais où donc sont rangés les symptômes ?**

Le trouble de déficit attentionnel avec/sans hyperactivité (TDA/H) est un trouble neurodéveloppemental sévère habituellement diagnostiqué avant 12 ans. Il est porteur d'un handicap parfois majeur en termes d'apprentissage et de parcours scolaire, et de complications comportementales avec comorbidités psychiatriques débutant plutôt vers l'adolescence. Ces comorbidités comprennent notamment des troubles liés à l'usage de substances (TLUS) qui grèvent le pronostic et brouillent la présentation clinique du TDA/H. La persistance du TDA/H à l'âge adulte fait désormais l'objet de données épidémiologiques robustes. Cependant, la présentation du trouble après 20 ans peut être particulièrement trompeuse,

entravant les efforts des cliniciens pour le reconnaître et le prendre en charge. A travers une revue narrative de la littérature et des données collectées à partir d'une série de cas évalués dans les consultations de notre Département, cette présentation décrira les principales transitions symptomatiques du TDA/H de l'enfance à l'âge adulte et les éléments diagnostiques principaux chez l'adulte, notamment en présence de TLUS comorbides. Notre ambition est de fournir au clinicien des outils nécessaires au repérage du TDA/H chez l'adulte, dans un contexte où certaines spécialités pharmaceutiques du TDA/H viennent d'être autorisées en primo-prescription chez l'adulte.

Predicting Patient Outcomes

• Stroop interference score and craving-use link intensity among patients beginning outpatient treatment for substance use disorder: an EMA study

INTRODUCTION - Studies examining the association of neuropsychological functioning in patients with substance use disorders have generally found that deficits in executive capacities is associated with a greater risk of relapse and poorer treatment adherence. We applied Ecological Momentary Assessment (EMA) to examine the influence of executive functions on the real-time, prospective link between craving and substance use. The objectives of the study are to: 1) assess the potential influence of executive functioning on the magnitude of the craving-substance use association; and 2) identify potential brain markers associated with these influences.

METHODS - A total of 86 patients beginning outpatient treatment for an alcohol, cannabis or tobacco use disorder completed a battery of neuropsychological tests followed by seven days of EMA. During EMA, patients were assessed five times a day via smartphones concerning their experience of craving and substance use since the last assessment. A total of 54 of

these patients also completed an MRI exam just before the EMA assessment period.

RESULTS AND CONCLUSION - As expected, the intensity of craving at any given EMA assessment strongly predicted the probability of substance use over subsequent hours of the day. A significant association was also found between the Stroop interference score and the intensity of this prospective craving-substance use link. Surprisingly, however, better Stroop interference scores were associated with a greater magnitude of association between craving and substance use. This counter-intuitive result may be explained by that fact that patients who are better able to ignore distracting stimuli may be more likely to focus on their experience of craving and subsequently be at greater risk for relapse. The present findings argue for the need to better understand the complexity of how neuropsychological functioning is associated with relapse, and they will also be discussed in light of associated brain markers as identified through MRI.

Young investigators symposium on alcohol and others drugs en partenariat avec REUNIRA (Réseau national de recherche en alcoologie)

• Reduction of alcohol consumption by psilocybin: role of serotonin type 2A receptors in the nucleus accumbens and identification of genetic regulations by PCR array

OBJECTIFS - After falling out of favour in the 1960s, psychedelics are making a comeback in the treatment of psychiatric and addictive disorders. A proof of concept was published in 2015 showing that psilocybin sustainably (36 weeks) reduces alcohol consumption in patients with alcohol use disorders (AUD). In the present work we measured the effects of psilocybin on alcohol consumption and relapse after abstinence in rats as well as the mechanism of action (brain structure and serotonin receptor involved).

MATÉRIEL ET MÉTHODES - Two operant self-administration procedures were used in rats to study the «post-dependent state» induced by inhalation of ethanol vapour and the second one of binge drinking behaviour. Rats were given a reward of ethanol (0.1ml at 20%) after pressing a lever. Psilocybin was injected either intraperitoneally or directly into the brain (nucleus accumbens or ventral tegmental area) and after, or without, injection of ketanserin directly into the brain. A screening of gene expression changes of neurotransmission systems (glutamatergic,

serotonergic, dopaminergic and gabaergic) was performed in the nucleus accumbens using a PCR array technique.

RÉSULTATS ET CONCLUSIONS - Our unpublished results show that acute psilocybin administration reduces not only relapse after abstinence but also alcohol consumption prior to withdrawal. Interestingly, we show that this effect of psilocybin is mediated by serotonin type 2A receptors in the nucleus accumbens in an experiment where psilocybin and/or the 5-HT_{2A} antagonist ketanserin are injected intraperitoneally, or in the nucleus accumbens or ventral tegmental area. Our genetic screening allowed us to identify, among others, an involvement of the mGluR2 glutamatergic receptor which is known to create heterodimers with the 5-HT_{2A} receptor. Our project provides major results in the understanding of the neurobiological mechanisms underlying the beneficial effects of psilocybin in the treatment of AUD and reinforces the interest in conducting further clinical trials.

Interface Personality Disorders - Problematic Substance Use Disorder: New Clinical Conceptions and Proposals for a Multidisciplinary Approach

• Clinical - Phenomenological Aspects about the diagnosis, treatments and propaedeutics in Personality Disorders

OBJECTIVES - Define and interpret current conceptualizations with international acceptance of Personality Disorders and problematic substance use. Provide an overview of scientific advances on the subject in Latin America. Describe the clinical experience from the different work devices in the clinical area: outpatient, hospitalization, therapeutic communities and group devices. Propose work models with sufficient scientific support adapted to the reality of each society in a specific culture, place and time: Human and material resources.

MATERIALS AND METHODS - Working tables and sharing of the different authors of this presentation. Interpellation of statistical and clinical epidemiological data of each region worked. Duly informed consent of the patients that is taken as a statistical parameter to

explain the models addressed. Conclusions, and update of hypotheses and new proposals for work formats.

CONCLUSIONS - Personality Disorders are frequently associated with problematic substance use, probably to a much greater extent than those currently reported in the scientific field. The different clinical models of diagnosis and treatment greatly hinder the proposals for precision therapeutics. The approaches are diverse and present disparate results, due to the region where they are implemented and the training of mental health effectors. Emphasis should be placed on multidisciplinary, comprehensive, phenomenological and scientifically rigorous work to achieve greater positive results in therapy.

Matthew JOHNSON - Baltimore - USA

Les psychédéliques : la voie d'avenir des pathologies duelles ?

Psychedelic drugs: are they the future of dual disorders treatment?

• Psychédéliques dans le traitement d'addiction

Psychedelics in the Treatment of Addiction

This talk will review addiction treatment with classic psychedelics (5HT2A agonists) including LSD and psilocybin. Early research from the 1950s to 1970s investigated classic psychedelics, primarily LSD, in the treatment of alcoholism. The randomized studies in this era showed that LSD substantially improved outcomes to a greater degree than control conditions. Limited research also showed promising findings using LSD to treat opioid addiction. In the modern era, open label pilot studies have suggested promising results in the treatment of tobacco use disorder and alcohol use disorder with only 2 or 3 psilocybin administration sessions. The presenter is conducting a comparative efficacy study randomizing treatment-seeking cigarette smokers to a single psilocybin or a course of nicotine patch treatment, both combined with cognitive behavior therapy. Current results show substantially better results for psilocybin (n=44; 12-month biologically confirmed 7-day point-

prevalence abstinence rates: 59% vs. 27%). Survey studies have described self-reported instances of addiction recovery for a number of substances (e.g., tobacco, alcohol, opioids, cocaine, cannabis) after classic psychedelic use. Clinical studies and survey research suggest that long-term reduced substance use is related to greater mystical-type effects (e.g., feeling of unity) experienced during the psychedelic session. This body of research suggests that classic psychedelics might have broad applicability in treating substance use disorders by facilitating psychotherapeutic processes. Given the global burden of addiction, funding agencies should encourage cautious exploration of this promising treatment approach.

Christopher JONES - CDC - Atlanta - USA

Pathologies duelles et troubles liés aux opioïdes

Dual Disorders in Opioid Patients

• Opioïdes, santé mentale et suicide: des défis urgents et corrélés

Opioids, Mental Health, and Suicide - Interrelated and Urgent Challenges

This presentation will focus on the intersection of opioid use and other substance use, mental health, and suicide. At the end of the presentation, participants will be able to describe current epidemiological trends in the U.S. and the characteristics associated with the intersection of opioid and other substance use disorders, mental health, and suicide. In addition, participants will be able to discuss the underlying mechanisms

that contribute to increased risk for these outcomes. Finally, participants will be exposed to the current strategies based on the best available evidence employed by the U.S. Centers for Disease Control and Prevention to prevent and mitigate these interrelated and urgent public health issues.

Yifrah KAMINER - Farmington - USA

A variety of approaches to mental disorders

• Treatment Outcome of Dually Diagnosed Youth with Substance Use Disorder (SUD) and Depression

BACKGROUND - The dual diagnosis (DD) of Substance use disorder (SUD) and depression frequently co-occurs in youth (13-21 Y.O). Clinically significant depressive symptoms and depressive disorders are present in 20-30% of adolescents diagnosed with a SUD. The relationships between substance use (mainly cannabis) and depression are complex. The presence of this dual diagnosis may affect both cannabis use and depression treatment outcomes.

OBJECTIVES - First, examine the nature of the association as well as clinical consequences (E.g., suicidal behavior) between SUD and depression; second, report the outcomes of two recent multi-center studies of dually diagnosed youth completed by our team.

RESULTS - The temporal association between response of each one of the disorders to treatment as well as early versus late onset of favorable depression response will be reported.

CONCLUSIONS - Following the results reported, recommendations for further clinical research considering recruitment challenges, sequence and early response to treatment will be discussed.



WADD & ALBATROS

Predicting Patient Outcomes

• Clinical Insight fluctuations and prospective association with craving in addiction: an EMA study

OBJECTIVE - To examine clinical insight fluctuations and its prospective influence on craving intensity in an Ecological Momentary Assessment (EMA) study among patients beginning outpatient addiction treatment.

METHODS - Subjects completed an EMA protocol during 14 days. A smartphone application generates 4 evaluations per day of clinical insight and craving. Clinical insight was assessed using 8 items. Total score was the average of 8 items, the higher the score, the better the insight. Craving intensity since the last evaluation was assessed on numerical rating scale (1-7). Hierarchical Linear and non-linear models were used to examine the prospective association between clinical insight at one time (T0) and craving intensity reported at the next evaluation, T1, approximately 4h hours later.

RESULTS - 24 subjects were included, 54.2% of women, average age was 45.3 y.o. (SD=10.2), 12 had an Alcohol Use Disorder. Response rate on electronic interviews was 82%. Analysis showed

that 28% of clinical insight variations was due to within-person fluctuations ($p < 0.001$). An increase of clinical insight was found associated with an increase of craving intensity in the following hours ($p = 0.006$, coef. = 0.30, $n = 24$). The effect was no longer significant ($p = 0.052$) when controlling for craving at T0, and socio-demographic variables.

DISCUSSION - An increase of clinical insight may be associated to an increase of subsequent craving intensity. It will need to be confirmed in a larger sample. The dynamic nature of clinical insight may explain why some patients have difficulty staying in treatment. Further studies may explore the reciprocal prospective association between craving and clinical insight, as craving is a stressful transitory experience, could increase the belief that there is a problem and enhance clinical insight.

Session « The Voice Of Addiction » Parrainée par l'AJPJA et l'AFFEP

• Does clinical insight level predict successful quit attempts during the first three months of outpatient addiction treatment?

CONTEXT - Low clinical insight in psychiatry is defined as poor recognition of one's mental illness, including disability to self-evaluate symptom severity. It has been reported as common in addiction and is associated with lower treatment compliance. Longitudinal studies suggest that low clinical insight could be linked to more relapse. However, association with successful quit attempt remains unknown.

OBJECTIVE - Examine the prospective link between baseline clinical insight level and self-report of successful attempt to quit during the first 3 months of outpatient addiction treatment.

METHODS - Participants were recruited in ADDICTAQUI cohort at outpatient treatment intake for addiction (substance or behavior). They completed a baseline evaluation using Addiction Severity Index (ASI), Mini International Neuropsychiatric Interview (MINI), and

modified Hanil Alcohol Insight Scale (m-HAIS). Participants completed a follow-up ASI 3 months later. Data were analyzed using multiple logistic regression and non-parametric tests.

RESULTS - Analyses showed that lower clinical insight level at baseline was associated with less successful quit attempts during the first 3 months of outpatient treatment compared to a higher clinical insight level, controlling for sociodemographic factors, addiction severity at T0, and comorbidities ($n = 58$; $\exp(B) = 1.31$; p (FDRcor) = 0.015).

DISCUSSION - This study highlights that poor clinical insight may be an obstacle to treatment success, and future studies should examine the causes to better understand its involvement in treatment responses and relapse processes.

Sophie LECLERCQ - Bruxelles - Belgium

Quand Foie et Addictions nous prennent les tripes

Liver and addictions: gut feelings

• Microbiote et troubles liés à l'alcool : de l'expérience fondamentale aux applications cliniques

Role of the gut microbiota in the modulation of the gut-brain axis in alcohol use disorders experimental approaches and clinical implications

It is well established that alterations of the gut microbiota composition can disturb many aspects of host physiology, including metabolism, immunity and the central nervous system with consequences for brain functions and behavior. Our studies showed that alterations of the gut microbiota composition of alcohol-dependent (AD) patients were associated with high scores of depression, anxiety and alcohol craving, as well as low score of sociability, suggesting the existence of a gut-brain axis in AD patients.

The transplantation of the fecal microbiota of AD patients into mice induced depression-like behavior and reduced the social interactions in the recipient mice. Nutritional interventions aiming at modulating the gut microbiota showed beneficial effect on sociability in AUD patients. We are currently exploring in more detailed the relationship between intestinal bacteria and social behavior.

Dual Disorders Treatment

• The reliability and validity of VR (Virtual Reality) based assessment for craving in Taiwan

OBJECTIVES - In tradition, self-report instrument was applied to assess the extent of craving. Despite the reliability of craving were well-documented, the patients with substance use disorders could not honestly answer the questions about craving. Therefore, we could not easily identify the possibility of relapse by craving. However, literature indicated craving could have more impact on relapse, besides, craving also related to negative emotional status. Moreover, this study used VR technique to enhance the precision of instrument for craving.

MATERIALS AND METHODS - we developed a VR based instruments for craving, and sixty participants will be recruited in this study. After informed consent, all of them will receive VR based

instrument for craving at baseline, treatment and rest phase. During three periods, they also need to complete self-report scale for craving and be assessed by biofeedback device.

RESULTS AND CONCLUSIONS - We not only anticipate our results could prove the validity and reliability for craving, but also find out some biological makers for assessing craving in clinical populations. Based on our results, we can provide more precise instrument for assessing craving in future.

Thomas LEHOUX - *Strasbourg - France*

Virtual Therapies

• Virtual Reality Exposure Effectiveness in Eliciting Cocaine Craving

OBJECTIFS - Cocaine craving is the most intense of all substances and worryingly predicts relapse in cocaine use. The immersive virtual reality (VR) paradigm is supposed to enhance the efficacy of exposure therapies, which demonstrated to have therapeutic potential in reducing craving and treating substance use disorders (SUD). With the doctoral aim of developing and validating the first VR exposure therapeutic protocol for cocaine craving, in this study we assessed the VR exposure effectiveness in eliciting cocaine craving.

MATÉRIEL ET MÉTHODES - The ethical approval for this study was obtained from Comité de Protection des Personnes (2021-A00242-39). Eleven cocaine users participants (mean age = 32.09 yrs; range = 26-48 yrs; 9 males) were recruited, including 5 smokers, 4 snorters and 2 cocaine injectors, all free of high suicide risk or psychotic and (hypo-)manic episodes (DSM-IV). Participants were invited to expose themselves to 2 10 min VR conditions (Neutral VR and Cocaine VR), with a 10 min interval. In Neutral VR, participants were exposed to neutral picture frames. In Cocaine VR, participants were exposed to cocaine paraphernalia, making and

using with peers. Subjective cocaine craving levels (CCQ- Brief total score) were self-reported after completing each of the conditions, and their means, standard deviations and Cohen's effect size were computed.

RÉSULTATS ET CONCLUSIONS - After exposure to the Cocaine VR condition, a large cocaine craving increase was observed ($M = 30.72$; $SD = 17.24$; Cohen's $d = +1.14$) compared to after exposure to the Neutral VR condition ($M = 16.36$; $SD = 7.79$). This study is the first to investigate whether VR exposure is effective in eliciting cocaine craving in a sample including smokers, snorters and cocaine injectors. This large effect of cocaine craving increase is equal or superior to the ones observed in pictures and videos exposure designs, as reported in a meta-analysis. Our results support the assumption that VR could be of clinical interest in treating SUD, and thus reinforce our doctoral ambitions to develop and validate the first VR exposure therapeutic protocol for cocaine craving.

Shaul LEV-RAN - *Tel Aviv - Israel*

Dépression, auto-médication et troubles addictifs

Depression, self-medication and addictive disorders

• Traumatismes, auto-médication et addiction : l'équilibre délicat

Trauma, self medication and addiction: balancing compassion and concern

The association between traumatic life events and an increased risk for developing addiction is well documented. Nevertheless, boundaries between initial self-medication, repetitive compulsive behaviors and the development of addiction are commonly

unclear. In this lecture, Prof. Lev-Ran will focus on the case of medicinal marijuana as a modern-day challenge of balancing compassion and concern.



Young investigators symposium on alcohol and others drugs en partenariat avec REUNIRA (Réseau national de recherche en alcoologie)

- **Which are the differences in structural brain alterations between patients with co-occurring cocaine and alcohol use disorders and patients with only cocaine use disorder?**

BACKGROUND - Cocaine use disorder patients (CUD) is often with alcohol use disorder (AUD). Cocaine-related brain abnormalities have been well described as well as alcohol-related ones. However, brain alterations in patients with co-occurring cocaine and alcohol dependence are little studied. The objective of the current study was to describe the patterns of structural brain damage in patients presenting comorbid CUD and AUD (CUD+AUD) compared to patients with CUD alone.

METHODS - Sixty-eight inpatients with severe CUD were included, 44 (65%) of whom also presented co-occurring AUD. At entry in inpatient cocaine detoxification, all patients underwent extensive clinical characterization followed by structural magnetic resonance imaging (MRI) seven days later. CUD+AUD were compared to CUD-only patients regarding clinical and neuroimaging data (voxel-based morphometry protocol).

RESULTS - There was no significant difference between CUD+AUD

and CUD patients regarding clinical data. However, CUD+AUD patients had overall significantly smaller gray matter and white matter volume than CUD patients, notably in insula, hippocampus, cerebellum, hypothalamus, cingulum and corpus callosum. Conversely, patients with CUD only showed significantly greater atrophy than those with CUD+AUD in temporal and frontal cortices as well as in the left caudate nuclei ($p < 0.005$, uncorrected for multiple comparisons for all the neuroimaging comparisons).

CONCLUSION - Brain alterations evidenced in this study were consistent with those previously reported in either CUD or AUD samples. The fact that CUD-only patients had more severe temporal and frontal brain atrophy than patients with co-occurring AUD was unexpected, bearing in mind that both groups did not differ regarding clinical characteristics. This finding, in particular, warrants further investigation, especially since frontal atrophy has been repeatedly associated with AUD.

Icro MAREMMANI - Pisa - Italy

Pathologies duelles et troubles liés aux opioïdes

Dual Disorders in Opioid Patients

- **Dual Disorders in Opioid Patients: Clinical and therapeutic aspects**

Pathologies duelles et opioïdes: clinique et thérapeutique

The Vincent P. Dole research group has operated for more than 35 years at the Santa Chiara University Hospital in Pisa, Italy, studying the clinical manifestations and treatment opportunities for patients with Heroin Use Disorder and Mental Disorders co-presence. The fields of Affective Disorders and Chronic Psychoses were the most deeply examined. As for Affective Disorders, we can say that they represent a risk, especially in the bipolar form,

for the development of heroin addiction. At the same time, chronic psychoses induce addiction through a first phase that can be framed in a perverse type of self-therapy. Applying opioid agonist therapy to these patients is not easy. In this presentation, the therapeutic proposals resulting from the clinical experience of the Vincent P. Dole Research Group will be reviewed.

José MARTÍNEZ-RAGA - Valencia - Spain

TDAH et addictions

ADHD and addictions

- **ADHD and addictions in adolescents and young adults**

Attention Deficit Hyperactivity Disorder (ADHD) is the most common neurodevelopmental disorder among children, adolescents and adults. It is associated with poor social, academic and overall functioning. It is estimated that in 40–60% of children and adolescents ADHD persists into adulthood, so that the prevalence of this disorder in adults is 2.5–4.2%. Along the lifespan, approximately 80% of individuals with ADHD have other comorbid psychiatric disorders. Oppositional defiant disorder and other conduct disorders, anxiety and mood disorders, including bipolar disorder are the most common mental disorders among children and younger adolescents with ADHD (American Psychiatric Association, 2013). Among older adolescents and adults the rates of affective and anxiety disorders, eating disorders, personality disorders or substance use disorders are much higher than in non-ADHD subjects. Specifically, there is a strong overlap of ADHD and substance use disorders. Indeed, as shown in a large systematic review with meta-analysis and meta-regression analyses, overall, 23% of individuals with an addictive disorder also have a comorbid ADHD. Furthermore, this comorbidity is associated with more severity and chronicity, worse overall clinical outcomes, increased risk of accidents, violent behaviors and suicide, as well as higher rates of legal problems and criminality. The recommended treatment for adolescents and adults with ADHD, with or without a comorbid sub-

stance use disorder is the multimodal approach that includes psychosocial and behavioral interventions in addition to medication. In any case, it is highly recommended in dually-diagnosed patients to combine effective therapeutic strategies for ADHD with those treatment measures that have proven to be effective for addictive disorders. Nonetheless, pharmacotherapies are key in the management of patients with ADHD, as recommended by international treatment guidelines, with an overall high effect size. Furthermore, high-dose stimulant treatment has been suggested to be an effective treatment for adolescents with ADHD and comorbid addictive disorders, whilst cognitive behavior therapy might have a small beneficial effect in these patients, and that alternative treatments are probably not effective. In addition, there is solid evidence suggesting that stimulant treatment in children with ADHD may prevent the development of substance use disorders in adolescence or young adulthood. Finally, considering the marked and persisting functional consequences of symptoms of ADHD and other concurrent disorders on the adolescent brain, as well as the profound changes that experiment any individual during adolescence, it is crucial to reinforce the transition and improve the coordination from child and adolescent to adult mental health services, particularly for more vulnerable patients.

Session parrainée par l'AESP

Découvertes dans le multivers sémiologique de l'addictologie

• Nicotine la journée et dormir la nuit : faut-il choisir ? Le sevrage peut-il aider ?

INTRODUCTION - The interaction between smoking and sleep seems to be bidirectional, but few studies evaluate the impact of smoking and its withdrawal on objective sleep parameters.

The primary objective of our study was to assess the impact of nicotine on ventilatory sleep parameters and particularly on the presence of sleep apnea syndrome (apnea-hypopnea index (AHI) ≥ 15). The secondary objective was to assess the impact of smoking and cessation on sleep architecture.

METHODS - We included patients hospitalized for polysomnographic sleep exploration and compared them according to smoking status: active smokers (AS), former smokers (FS), non-smokers (NoNi) and participants on nicotine replacement therapy (NS). Psychiatric and non-psychiatric co-morbidities and treat-

ment or substance use were taken into account in the analyses.

RESULTS - A total of 170 participants were included (N= 37 FS, 39 AS, 86 NoNi and 8 NS). There was no difference between the groups regarding AHI, but we observed a decrease in mean saturation for FS (92.5(+/-2.24)) and AS (93.4(+/-2.53)) compared to NoNi (94.3(+/-1.47)); $p=0.016$ and 0.015 respectively). Also, we observed a decrease in the N3 stage of sleep duration for AS (89.3(+/-71.1)) compared to NoNi (97.1(+/-43.3); $p=0.049$).

CONCLUSION - This study found a persistent impact despite smoking cessation on ventilatory sleep parameters, as well as changes in sleep architecture in current smokers.

Opioids & Prevention

• Implementation of a community-based psychiatric intervention among people who inject drugs in the City of Haiphong, Vietnam: the DRIVE-Mind project

OBJECTIVES - The objective of the DRIVE-Mind project was to assess the feasibility and impact of a psychiatric intervention implemented in the community (community-based organizations - CBO) in the city of Haiphong, Vietnam, for a population of people who inject drugs (PWID) presenting with a psychiatric diagnosis.

METHODS - PWID (injection marks, positive urine test for opiates/methamphetamine) under follow-up and diagnosed with a depression, psychosis or suicide risk (MINI semi-structured interview) were invited to enroll in a 12 month psychiatric cohort. Psychiatric intervention included free psychiatric consultations and treatments at two community-based organization offices, along with strong support of CBO members/peers for information on mental health, mental disorders and their treatments, recall of appointments with psychiatrists, linkage with family at home and support groups. Peers also offered linkage to care (methadone, ART), harm reduction services and administrative support.

RESULTS AND CONCLUSIONS - 233 PWID were enrolled in the cohort; 90% were male, mean age 44 (± 8.8), 71% were still injecting heroin, 46% were smoking methamphetamine, and 41% were HIV positive. At cohort initiation, 82% were diagnosed with depression, 48% with a psychotic disorder and 45% with a suicide risk; 42% had been treated with methadone. During the 12 month follow-up, 12 died, 197 came back at M6 visit (85%) and 170 at the M12 visit (73%). At M12 visit, 154 (90%) were clinically improved, 9 (5%) had stable symptoms and 7 (4%) worsened (Clinical Global Impression Scale). Their Quality of Life (EQ-5D-5L) was significantly improved between M0 and M12 visits ($p<0.001$). 72/73 (99%) and 90/96 (94%) were on ART, and 66/69 (96%) and 86/96 (90%) had VL <1000 copies/mL at M12 follow up (viral load data missing for 4) and baseline respectively. Implementing a community-based psychiatric intervention is feasible and appeared successful in terms of psychiatric, Quality of Life and HIV-related outcomes.

Covid-19 and Dual Disorders

• Mindfulness state and tobacco consumption during the COVID-19 lockdown among hospital workers

INTRODUCTION - Since 2014 in France, tobacco control has been stepped up with the establishment of national plans. In 2019, 30.4% of French people aged 18-75 reported smoking and 24% with daily consumption. Mindfulness has been theoretically and empirically associated with psychological well-being. Structural and functional brain changes have been observed in the brains of people with a long-term traditional mindfulness practice. Unfortunately mindfulness is not a common practice among health care professionals.

OBJECTIF - This poster studies the associations between the state of mindfulness and changes in certain health behaviors such as smoking during the period of the COVID-19 health crisis. The aim of this work is to develop new strategies for the fight against smoking.

METHODES - An online anonymous survey was proposed by mail to the staff of the University Hospital of Nice and Sainte-Marie psychiatric hospital in France from May 18 to June 6, 2020 assess-

ing changes in daily habits, state of mindfulness, psychological distress and changes in substance use, including smoking.

RESULTATS - A total of 702 respondents (80.3% female) filled out the survey. 20.7% of participants use tobacco and 16.1% associate multiple use with alcohol. Overall, most of the tobacco users reported increased nicotine dependence with an increased fagerstrom score of 24.4% after the beginning of the COVID-19 lockdown. Significant results of a lower mindfulness score were found in the population of smokers. We have identified a low state of mindfulness as a risk factor for increased tobacco consumption among hospital staff. Since the COVID-19 crisis, hospital staff expressed more psychological distress, tobacco craving and showed lower state of mindfulness.

CONCLUSION - In the face of this pandemic, health promotion strategies adopting new physio-relaxing methods and promoting the practice of mindfulness are shown to decrease tobacco consumption.

Irresponsabilité Pénale et Addiction : Enjeux et Perspectives

Criminal non-liability and addiction, where do we go now?

- **General context and role of forensic psychiatry** - Cyril Azif
- **Good use of substances in expert matters** - Cyril Manzanera
- **Legislative evolution: regression or progress?** Mathieu Lacambre

Since the Revolution, criminals in a “state of dementia” are not punished in France. These individuals, although identified as guilty of the charges assigned to them and condemned by the civil court, are not deemed legally responsible secondary to a mental disorder since ‘their judgment and control of their actions were abolished at the time of their acts’ (article 122-1 a.1 of the French Penal Code).

For patients suffering from psychiatric disorders, fluctuations in the level of consciousness, perceptual alterations, judgment alteration or abolition, are frequent, fluctuating and worsened by substance use. This makes us question the liability of the vulnerable individual, who uses substances and commits a crime: Did he intentionally use substances? Was he not aware of the risks related to substance use and to non-compliance to treatment? Is he responsible of a mistake (substance use) preceding a crime, committed in a substance-induced psychotic state, thereby completely abolishing judgment?

The court of cassation reports, on one hand, that “the use of cannabis, carried out without awareness of the possible consequences of the effect of this drug, cannot justify the criminal liability of the accused” (decree n°10-80279 of the 12th of May 2010). On the other hand, the court of cassation reports that “the provisions of article 122-1, paragraph 1, of the penal code, do not differentiate based on the origin of the mental disorder that led to the abolition of judgment” (decree n°404 of the 14th of April 2021).

Nevertheless, our penal legislation might have become inadequate since, in the course of a new decision of criminal non-liability of a delusional murderer, who was under the effect of substances, the French society and the political power expressed their wish for a legislative evolution...In a key moment of a new legislative era of criminal liability, we propose to highlight the stakes and the basis of the upcoming changes.

Mehdi PAES - Rabat - Morocco

Tour du monde du cannabis médical

Around the world in medical cannabis

- **Sur le chemin du cannabis médical au Maroc**
Morocco on the road to medical cannabis

The Moroccan Parliament recently approved the Act 13-21 regulating the cultivation and medical use of cannabis. This initiative is the result of a long reflection period on the cannabis' problem in the country. Cultivated for centuries in a very limited area of the Rif region, its production has experienced an extremely significant increase in recent decades, mainly due to strong external demand. The governmental authorities have devoted enormous human and material resources to tackle this problem and the result is rather disappointing. The Government plans to set up a specific agency for

the regulation of the cultivation and the promotion of the medical use of cannabis with the hope of limiting and regulating the extension of crops, improving the income and living conditions of small farmers, create new economic opportunities and cut off the criminal organizations that currently operate in the black market. The objective of the conference is to present the articles and the spirit of this Act and above all to question its relevance and especially its purpose. What repercussions for the populations concerned? What about cannabis' recreational use and addiction prevention?

Margaux POIREAU - Paris - France

Predicting Patient Outcomes

- **Is the length of inpatient stay the best predictor of maintained abstinence after cocaine detoxification?**

BACKGROUND - Today, no pharmacological treatment is approved for cocaine use disorder. Thus, the treatment is based on behavioral and cognitive relapse prevention interventions. Still, patients with the more severe forms of the disorders require an initial inpatient detoxification to be able to engage in the first days of cocaine abstinence. Specific research to evaluate the most effective modalities of such inpatient cocaine detoxification stays are needed. Here we conducted an observational prospective study trying to determine the factors associated with maintained abstinence after inpatient cocaine detoxification.

METHOD - The design is an observational study with a 3-months follow-up of unselected consecutive severe cocaine use disorders patients willing to engage in an inpatient detoxification. Clinical characteristics of the addictive disorders were recorded at entry, neuropsychological testing and a brain MRI were performed in the first week of the inpatient stay, and the follow-up was proposed until 3 months post-discharge. The length of the inpatient stay

was described as: premature (< 7 days), normal (7-14 days), prolonged (>14 days in the acute ward) or consolidated (followed by a convalescence).

RESULTS - Eighty-seven patients were included. They were mostly males (78%) and aged 40 years-old (± 8). They used cocaine 19(± 9) days per month at entry, and 42% used a rapid route of administration, either smoked or intravenous. The mean abstinence after discharge was 18 days(± 21), and was associated with the mean duration of the hospital stay (16 days ± 10 , spearman's $\rho=0.247$, $p=0.047$) and duration category (Jonckheere-Terpstra tendency test=2.47, $p=0.013$).

DISCUSSION - In multivariate models including the several socio-economic and clinical variables associated with relapse, the duration of stay should be studied to produce evidence-based guidelines for treatment.

Session « The Voice Of Addiction »

Parrainée par l'AJPJA et l'AFEP

• The retina as an early marker of brain functional alteration for young alcohol users

The study is about the retina as an early marker of brain functional alteration for young alcohol users. This is a major public health problem as this population is particularly vulnerable to the effects of alcohol on the brain. At present, there is no marker easy to use in clinical practice to assess the effects of alcohol on the brain. The electroretinogram is a well-known tool already used to highlight the neurotransmission alteration among cannabis and

tobacco users. The results are an alteration of the glutamatergic retinal ganglion cells and the dopaminergic amacrine cells among young alcohol users compare to controls.

Yolaine RABAT - Bordeaux - France

Gaming, Food and Sex

• Food addiction among stroke patients: an hospital-based study

BACKGROUND AND OBJECTIVES - Poor diet is a vascular risk factor; it contributes to dyslipidemia, diabetes and metabolic syndrome. Addictive-like eating behaviors are increasingly incriminated in these stroke risk factors. However, their severity and the prevalence of a condition known as food addiction (FA) diagnosis has never been investigated among stroke patients. Moreover, knowing the food-mood connection, FA could influence post-stroke mood status.

MATERIAL AND METHODS - Inclusion criteria of this hospital-based study were: age 18-85; first-ever non-severe stroke with no severe aphasia or dementia. FA prevalence and symptoms' severity were assessed using the YFAS2.0 during hospitalization. Post-stroke mood status was assessed at the 3months standard care follow-up visit using the Hospital and Anxiety Depression scale. Univariate (Mann-Witney, Chi2, Fisher tests) and multivariate (regressions) analyses were conducted.

RESULTS AND CONCLUSION - A total of 101 patients (62.8±13.7yo; women: 39.6%) were recruited in a comprehensive stroke unit. Five patients endorsed a FA diagnosis: one of mild and four of severe types. Overall, 38.6% of the sample screened positive for at least one of the symptom criteria. Impaired control was the most frequent symptoms' domain (25.7%) and Inability to cut down the most frequent symptom (16.8%). FA diagnosis was associated with Dyslipidemia but not the other stroke vascular risk factors. The severity of the addictive-like eating profile predicted dyslipidemia independently ($p=0.05$; $OR=1.67$; $95\%CI=1.00-2.78$). Regression models showed that FA diagnosis and the severity of the addictive-like eating profile were significant independent predictors of post-stroke levels of anxiety ($p=0.05$ and $p=0.01$, respectively) and depression ($p=0.02$ and $p=0.01$, respectively). This study suggests that, besides chronic tobacco and alcohol use, addictive-like eating behaviors are part of factors that should be addressed in the primary and secondary prevention of stroke.

Sharon RABINOVITZ - Haifa - Israel

Trauma-Anxiety Dual Disorders and Mindfulness

• Child Maltreatment, Sexual Risk Behaviors and Victimization Among Female Adolescents Seeking Detoxification Treatment for Substance Use Disorders: an Israeli Case Study

OBJECTIVES - Childhood maltreatment trauma (CT; i.e., sexual, physical, and emotional abuse and physical and emotional neglect) is associated with subsequent adverse psychological, somatic and social consequences, including increased susceptibility to substance use disorders (SUDs). It is also increasingly becoming apparent that CT is closely related to adult sexual risk behavior. The present study examines the relationship between the severity of CT and the prevalence of sexual risk behaviors and sexual victimization in 194 randomly selected female adolescents and emerging-adults seeking treatment for SUDs in an inpatient detoxification unit.

METHODS - Clinical characteristics and sexual experience were assessed using standardized, in-depth interviews and self-reports. Childhood maltreatment trauma was assessed based on the Childhood Trauma Questionnaire – Short Form (CTQ-SF) and a modified version of the HIV Risk-taking Behavior Scale (HRBS) was used to assess risky sexual behavior. The treatment site under study provided the only inpatient detoxification treatment program for young women in the country thus reflecting a general estimation of this population.

RESULTS - CT severity was significantly associated with a greater likelihood of risky sexual behaviors, sexual victimization and sexual assaults with either the perpetrator, the victim or both consuming drugs/alcohol shortly before or during the assault. In total it was found that 88.7% of the participants experienced sexual assaults and 61.3% were involved in trading/exchanging sex. Drug use severity was associated with riskier sexual behaviors.

CONCLUSIONS - This is the first study on sexual behavior, sexual victimization and childhood maltreatment trauma among Israeli young females seeking inpatient detoxification treatment for SUDs. Results replicate prior work on associations between CT, SUDs and sexual risk behaviors found in adults in other countries. Findings imply that female adolescents and emerging adults with SUDs may benefit from screenings for CT and integrating trauma-informed interventions to reduce sexual victimization.

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NOS RÉFÉRENCES

- Congrès International d'Addictologie de l'ALBATROS
- Journées de la Société Française d'Alcoologie
- Audition Publique de la FFA
- Assises de la FFA (Fédération Française d'Addictologie)
- Congrès de la Société Francophone de Tabacologie
- Journée Nationale de Rhumatologie «PR & Organes»
- Rencontres scientifiques ARCAGY-GINECO
- Journées Régionales « l'EHPAD une entreprise humaine »
- POLEPHARMA Meetings
- Colloque des Acheteurs de l'Industrie Pharmaceutique
- The Wallace Collection Symposium
- Rencontres de Cardiologie de Marrakech
- Congrès Franco-Maghrébien de Psychiatrie

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Jürgen REHM - Toronto - Canada

Épidémiologie des pathologies duelles

Epidemiology of Dual Disorders

- **Alcool et dépression : que savons-nous sur leur réciprocity ?**

Alcohol use and depression: what do we know about reciprocal causation?

Alcohol use, especially heavy alcohol use and alcohol use disorders, is strongly associated with depression. Likely, alcohol use causes depression, depression may cause alcohol use, and genetic and other vulnerabilities may cause both heavy alcohol use and depressive disorders.

Based on a systematic reviews and recent key evidence, this presentation tries to estimate the fraction of depressive disorders which are attributable to alcohol use. Implications for comparative risk assessments and burden of disease estimates are lined out.

Brigitte REILLER - Bordeaux - France

Opioids & Prevention

- **Overview of hepatitis C testing and treatment in France**

On the occasion of the national day of mobilization against hepatitis, in September 2019, Federation Addiction has solicited its network to respond to a first survey, which the objective was to make an assessment of testing and treatment prescriptions, and actions implemented by professionals, from May 2019, date of the extension of prescription of HCV treatments to all doctors. The purpose of this study was also to value involvement of actors on this public health issue. A second network survey was launched in June 2020, using the same reference period (May 2019) in order to see the evolution in the network.

METHOD - Creation of a questionnaire, in a participatory approach with resource persons / Formalization of online questionnaire (Survey Monkey) / Dissemination of the online questionnaire on our social networks (website, newsletter, twitter, etc.) / Processing and

formalization of results on an infographic document via Photoshop software.

Same method for the second survey

RESULTS -These surveys enabled us to identify the number of testings carried out by network as well as the number of treatments prescribed against hepatitis C, since the extension of prescription to doctors. It is not exhaustive, since not all the structures responded to the questionnaire, but many actors were involved. It also highlighted the obstacles that still persist and identify levers and concrete actions for the support and care of people who have hepatitis C. And we saw the evolution of the structures that responded to the two surveys (new partnerships, deployment of TRODS, more experience, test and treat, etc.).

Poí ROVIRA - Barcelona - Spain

Pathologies duelles et cancer

Dual Disorders and Cancer

- **Alcool et cancer : quelles implications de la taxation**

Alcohol and cancer: what are the implications for taxation?

After tobacco smoking, alcohol use has been responsible to more cancers than any other risk factor in WHO European Region. However, the excise taxes for alcoholic beverages are minimal compared to taxes for cigarettes and other tobacco products. Accordingly, increasing excise taxes on alcoholic beverages is one of the three “best-buys” recommended by the World Health Organization; and it is also one of its priorities of WHO European Region.

By modelling different scenarios of increasing alcohol excise taxes, we could model potential impact on cancer cases and cancer mortality. As an example, increasing current taxes by 100% in a diverse group of countries in the WHO European Region (Germany, Italy, Kazakhstan, Lithuania and Sweden)

would avoid between 3 and 7% of new cancer cases due to alcohol consumption. In Germany alone, one of the countries in Europe where alcohol is most affordable, more than 1,600 cancers per year could be avoided if this scenario was applied, and the resulting tax share on the final price for alcoholic beverages would be considerably lower than the tax share for tobacco.

This presentation will give an overview on the potential of increasing excise taxes for alcohol in the WHO European Region, by estimation of different scenarios, thus deriving recommendations for optimal taxation structure.

John RYAN - Melbourne - Australia

Tour du monde du cannabis médical

Around the world in medical cannabis

- **Medicinal cannabis in Australia: a story of fast but partial success**

Medicinal cannabis has been legal in Australia since 2016. In the intervening five years, both demand and supply of medicinal cannabis have grown considerably, with the medicinal cannabis industry emerging as a significant force in the medical products sector. This presentation will examine the current state of the medicinal cannabis industry in Australia – the regulatory framework

within which it operates, the scale of supply and demand, and public and practitioner perceptions about the scheme. Finally, the presentation will consider opportunities for the future growth of Australia's medicinal cannabis industry.

Covid-19 and Dual Disorders

• Impact of disturbances related to COVID-19 crisis on: alcohol consumption, alcohol craving, and relapse of alcohol dependent patients

BACKGROUND - The mental health impact of COVID-19 pandemic is significant. Psychosocial distress is challenging for patients with alcohol use disorders (AUD), since quarantine increases loneliness and stress. It has led to more alcohol consumption and more relapses. Craving is a predictor of relapse. Stressors caused by the pandemic contribute to increased craving. This study had for main objective to assess the impact of the crisis on patients with AUD ; and to observe its effects on alcohol craving, alcohol consumption and relapse at one month.

METHODS - All subjects (n=80) presented with AUD (DSM-V) and were recruited from two addictologic outpatient treatment centers: CSAPA of Saint-Malo and Dinan; and from the addictologic day hospital of Saint-Malo. They completed: AUQ, VAS and OCDS for alcohol craving; the HADS, the SF-36, and four scales of impact of the crisis on life domains. Each patient was called at 14 days and at one-month to state if he had relapsed.

RESULTS - At one-month, 43.8% of patients had relapsed. 43.8 % of patients reported a high or severe impact of COVID-19 on their AUD. We searched determinants of relapse by doing logistics regressions analysis. In univariate analysis, there was a relation between psychological vulnerability indicators (anxiety symptoms (1.18 [1.06-1.31]), depressive symptoms (1.24 [1.05-1.45]), impact of COVID-19 on AUD (1.68 [1.25-2.25])) and risk of relapse; and between AUQ's scores (1.87 [1.48-2.35]) and risk of relapse. In multivariate analysis, there was only a relation between AUQ's scores (1.90 [1.55-2.32]) and relapse.

CONCLUSION - Disturbances related to COVID-19 (anxiety and depressive symptoms, and impact of COVID-19 on AUD) increased alcohol craving, which increased the risk of relapse. There was a mediating effect. Thus, craving is a relevant factor to prevent relapses and could be a help to intervene early and help patients during similar future pandemics.

Covid-19 and Dual Disorders

• Mise en évidence de la corrélation entre état psychique et alimentation à travers une étude de la population durant le confinement

The role of the close correlation between psychic state and diet through a study of the population during lockdown

OBJECTIVE - Nutrition is an issue of major public health and the concept of food addiction is accepted today. Lockdown of the French population entailed negative psychological effects on people. Our main objective is to study the correlation between psychic state and food thanks to the analysis of the behaviour of the population during lockdown.

METHOD - We have made a transversal descriptive study as a connected inquiry from April 21 to May 13 2020 together with Nice University Hospital and Nice EDHEC Business School. The signs of physical psychic impact such as anxiety and depression have been studied before and during the lockdown. We have assessed the level of craving concerning healthy food products and non healthy products. We have then studied the links between the score of food craving and quality of life. Then, the variables with a p-value<0.1 in univariate analysis have been kept to build a linear regression in multivariate analysis.

RESULTS - The sample includes 939 usable questionnaires (73.6%). In univariate analysis, there is a significant increase of the craving for non healthy products ($p < 0.01$) but also for healthy products ($p < 0.01$) during the lockdown. We acknowledge a correlation between healthy food consumption and symptoms of anxiety as well as food consumption of non healthy products and symptoms of depression. In multivariate analysis, we note that the more the symptoms of depression increase; the more the tendency to consume non healthy food increases. Conversely, the more the symptoms of depression decrease, the more the craving for healthy food products increases.

CONCLUSION - Lockdown has allowed us to validate our hypothesis concerning the correlation between people's psychic state and their diet. This puts forward an interest in therapeutic perspectives on people's way of feeding themselves. So we can think that by treating the psyche, we'll be able to control people's diet.



Gaming, Food and Sex

• Frequency and factors associated with Attention Deficit Hyperactivity Disorder in patients with Sex Addiction

INTRODUCTION - Sex addiction (SA) is excessive, uncontrolled sexual behavior that produces pleasure and/or relieves internal discomfort. Attention deficit disorder with or without hyperactivity (ADHD) is a neurodevelopmental disorder that begins in childhood and can lead to substance use disorders and behavioral addictions like gambling or gaming disorders. Little is known about the link between ADHD and SA. The objectives of our study were to determine the frequency of history of ADHD in a population of patients with AS, to explore factors associated with the presence of ADHD in this population and to compare patients with persistent ADHD in adulthood with those in whom ADHD was present only during childhood.

METHODS - Sociodemographic, clinical, and SA data were collected in the EVALADD cohort through structured interviews and self-administered questionnaires. The sample used for the present study included 185 patients with SA. The presence of SA was assessed by the Sexual Addiction Screening Test and the presence

of ADHD by the Wender-Utah Rating Scale Child and the Adult ADHD Self-report Scale.

RESULTS - More than 35% of patients had a history of ADHD (66/185). Having an anxiety disorder, another addictive disorder, a high negative urgency score, a high novelty-seeking score, a high harm avoidance score, a low age of onset of SA, and a low education level were factors associated with a history of ADHD. Patients with persistent ADHD in adulthood had lower levels of self-directedness and perseverance.

CONCLUSION - The association between ADHD and SA is frequent. Factors associated with ADHD could alert the clinician on the presence of a dual disorder and prompt a search for ADHD when the patient initiates treatment for SA. Moreover, treatment strategies focused on the psychopathological characteristics associated with ADHD may also improve the symptomatology of SA, in the perspective of patient's recovery.

Erica SCHULTE - *Philadelphia - USA*

La faim des pathologies duelles ?

An appetite for dual disorders?

• L'addiction alimentaire : état actuel de la science

The State of the Science on Ultra-Processed Food Addiction

Ultra-processed foods have become increasingly available in our food environment in the past several decades and have been cited as a key factor contributing to the rising rates of obesity and diet-related diseases. An emerging body of literature supports the idea that some individuals can experience addictive-like biological and behavioral responses to ultra-processed foods, such as withdrawal and continued use despite negative physical and social consequences. The ultra-processed food addiction phenotype is operationalized by the Yale Food Addiction Scale,

and elevated symptoms of ultra-processed food addiction have been associated with higher body weight, disordered eating, and co-morbid psychopathology. However, the construct of ultra-processed food addiction remains controversial and is not yet recognized as a clinical diagnostic category. The focus of this talk will be to discuss the strength of the scientific evidence for ultra-processed food addiction to date and outline key next steps for determining its clinical utility as a distinct psychiatric disorder.

Linda SCORIELS - *Paris - France*

SESSION SPÉCIALE « YOUNG INVESTIGATORS » EN PARTENARIAT AVEC EISAI Schizophrénie, Cancer & Addiction

• Influence of cannabis on the risk of transition in young people at ultra-high risk of psychosis (ICAAR study): a longitudinal study

OBJECTIVES - THERE IS EVIDENCE OF AN ASSOCIATION BETWEEN exposure to cannabis and the emergence of schizophrenia. However, little is known about longitudinal effects of cannabis exposure and the influence of genetic factors and neurodevelopment on the transition to psychosis. We designed a study on the Influence of Cannabis in Adolescents and Adults at Risk mental state (ICAAR) in order to fulfill these gaps.

METHODS - 312 individuals characterized as Ultra-High Risk (UHR, n=170), First Episode Psychosis (FEP, n=54) and non-at-risk Help-Seeking Controls (HSC, n=88) were included in ICAAR using the Comprehensive Assessment of At Risk Mental States (CAARMS). Participants responded to questionnaires of cannabis consumption, neurodevelopment at baseline and after 6- and 12-months follow-ups, and a blood sample was collected for genetic assessment. We compared the three groups at baseline and UHR versus HSC according to whether they had converted to psychosis or not at follow-up. We examined the influence of cannabis, neurodevelopment and genetic factors in the conversion to psychosis using univariate comparisons.

RESULTS - The three groups did not present sociodemographic or non-psychotic clinical characteristics differences. We found no association between conversion and neurodevelopment or polygenic risk scores of schizophrenia. At baseline, FEP consumed significantly more cannabis compared to UHR and HSC. After 12 months, we observed that 37 out of 100 UHR and 5 out of 31 HSC converted to psychosis and conversion rates were positively correlated with persistent or increased consumption of cannabis, regardless of mental state risk.

CONCLUSION - This prospective study is the first to consider the influence of cannabis in the progression of psychotic illness, associated with neurodevelopment and genetic measures. It shows that, while there is no major impact of cannabis exposure at baseline, continuing cannabis appears to be associated with exacerbated conversion to psychosis. These results strongly support the emphasis to actively limit cannabis consumption in UHR.

Virtual Therapies

- **Craving-Manager application designed to manage craving and individual predictors of substance use / addictive behavior among individuals with addictive disorders: study protocol for a randomized controlled trial**

CONTEXT - Craving, the irrepressible and involuntary desire to use, is a strong predictor of relapse and a key-target for addiction treatments. Studies using Ecological Momentary Assessment method (EMA) have revealed that person-specific cues could precipitate craving, that in turn, is associated with a higher probability to report substance use and relapse in the following hours. Assessment and management of these specific situations in daily life are important to decrease use and avoid relapse. Moreover, rate of individuals with addiction in treatment is low (<10%). Barriers such as stigma, desire to cope alone, lack of knowledge about treatments, could be overcome by mobile technologies. EMI (Ecological Momentary Intervention) is treatment procedure characterized by the delivery of interventions (messages on smartphones) to people in their daily lives. EMI presents opportunities for treatments to be available to people during times and in situations when they are most needed. Craving-Manager app has been developed to assess and manage craving and individual predictors of use. App delivers specific and personalized interventions (counseling messages), based

on traditional addiction treatment. Craving-Manager can be used for any addiction, evaluates all concurrent substances use and addictive behaviors to identify and prevent risk of addiction transfers.

OBJECTIVE - To evaluate the efficacy of using Craving-Manager app to initiate decrease of use of main problematic substance /addictive behavior over 4 weeks, among subjects requesting treatment for addiction and waiting for starting a treatment program in addiction treatment centers.

METHOD - This randomized controlled trial will compare two parallel groups: experimental group (full interventional version of the application, 4 weeks, EMA + EMI), versus control group (restricted version of the application, 4 weeks, only EMA).

DISCUSSION - This new therapeutic tool will offer the possibility of an easy to-use and personalized intervention accessible to the greatest number of subjects.

A variety of approaches to mental disorders

- **Temporalité et addiction, quelle fabrique du temps ?**

BACKGROUND - How time allows us to impact on our modern or postmodern society? In the addictions, this acceleration of time and the dictatorship of the supposed «real time», seem to lead to a cognitive distortion with a temporal loop of a sterile and/or sterilizing action that blocks the subject in a repeated present, driven often by a traumatophilic impulse, taking place of thought and introspection.

OBJECTIVE - We aim to analyze this fact and to propose how “time” can be a tool to build a co-constructive project of therapy, especially, with adolescents.

MATERIAL AND MÉTHOD - The temporal shocks (subject, family and so on) are building lines of forces. If we work together in the same direction, we can hope healing these particularly

wounded persons but not without them. They, instead, will rely secondarily on this emerging confidence in their abilities to get through. We draw, with a review, some clues to understand the importance of temporality in the approach to addictive subjects and how it is a useful therapeutic tool if we understand the ins and outs of it.

RÉSULTS AND CONCLUSION - We are “flabbergasted” by the adolescents’ destructiveness perceived as a mirror of the frames of transmission “destroyed”, at least “very damaged” by the speed of social and societal changes. These multiple time approaches make innovative results in this complex medical field who can benefit in interactive treatments.

Session « The Voice Of Addiction » Parrainée par l’AJPPA et l’AFFEP

- **From CBT to the development of risk reduction in outpatient hospital**

Combating alcohol misuse is a public health issue. Fears related to abstinence can limit entry into care, proposing a return to controlled consumption is an effective and relevant alternative. Although the addiction outpatient hospital has demonstrated its effectiveness, the offer of care specific to risk reduction is generally limited to outpatient consultations. In a desire for innovation, our team has decided to integrate patients seeking a return to a controlled alcohol consumption. In order to overcome apprehensions, a specific therapeutic program has been established to conduct a first experiment between March and May 2019. This program was developed following the good results obtained with the CBT program “L’envol” which was presented at the Albatros congress in 2019. Self-questionnaires given out during the

program made it possible to prospectively evaluate the evolution of the patients. This experience was satisfactory for the patients included and the healthcare team. Alcohol consumption decreased significantly (-51.6% for average consumption, -71.4% for occasional consumption) during the programme. No patients presented with alcohol and no negative impact was noted on patients who were abstinent from the addiction outpatient hospital. These results encourage us to integrate this objective into our care offer in a sustainable way.

Buprénorphine à longue durée d'action : quand l'innovation thérapeutique fait débat dans les métiers

Long-acting Buprenorphine: when innovation sparks debate

The term "dual disorder" (DD) refers to the coexistence or concurrence of at least one substance use disorder (SUD) and another mental disorder in the same person. Among all, "dual depression" is the most frequent dual disorder in all SUD, including opioid use disorder.

At present, opioids misuse is an increasing area of concern worldwide because its high morbidity and mortality. The current standard of care for opioid use disorder includes treatment with methadone or sublingual (SL) buprenorphine or buprenorphine-naloxone combined with psychosocial and behavioural support.

Buprenorphine is a partial μ -opioid receptor agonist. However, SL formulations of buprenorphine are prone to nonmedical use (eg, injecting, diversion), prompting models of care, particularly in the early phases of treatment, requiring regular attendance at clinics or pharmacies for administration of doses. In recent years, long-acting injectable depot buprenorphine formulations have been developed to mitigate some of the concerns of daily dosing.

In this presentation we will focus in the role of long-acting buprenorphine in dual depression, mainly in patients with Opioid Use Disorder.

Dépression, auto-médication et troubles addictifs

Depression, self-medication and addictive disorders

• Dual depression. A gender perspective

Major Depression Disorder (MDD) is the most frequent psychiatric comorbidity among people with substance use disorders (SUD), and is also called Dual Depression. The prevalence is about 30-60% in patients seeking treatment. These patients have greater

psychopathological, medical and social severity than patients with only MDD or SUD. Diagnosis and treatment is a priority to improve prognosis. After a review of the state of the art in Dual Depression, we will focus in a gender perspective.

Simona TRIFU - Bucharest - Romania

Trauma-Anxiety Dual Disorders and Mindfulness

• Childhood adverse events and attachment style as inadequate predictors of ADHD pathology in adult psychiatry

OBJECTIVES - Childhood adverse experiences is a term used to refer to certain potentially traumatic exposures that an individual between the ages of 0 and 18 may experience, which may negatively influence internal work patterns because of early interactions with primary caregivers. establish the style of attachment. The feeling of inadequacy consists of five primary factors subordinate to self-esteem: self-respect, social confidence, academic skills, physical abilities and physical appearance. The present research aimed to study the extent to which childhood adverse events (ACE) and attachment style predict the feeling of inadequacy and to analyze the moderation relationship between ACE and the feeling of inadequacy by the insecure attachment style.

MATERIALS AND METHODS - The study involved 103 subjects, of which 77 female and 26 males, diagnosed with ADHD in childhood, currently aged between 24 and 32 years. Adverse Childhood Experiences were used to measure the ACE variable,

Relationship Style Questionnaire was used to identify attachment style, and Janis - Field Feelings of Inadequacy scale were used to measure the feeling of inadequacy. The study was non-experimental, correlational.

RESULTS AND CONCLUSIONS - The results showed that the regression model with three predictors (ACE, avoidant attachment, anxious attachment) is statistically significant in terms of ex-children and ADHD and their functioning in adulthood and explains 30% of the feeling of inadequacy, the most important predictor. being the anxious attachment. Regarding the moderation analysis, the avoidant attachment proved to be the only significant moderator.

Conclusions: Although anxious attachment has a significant effect on the feeling of inadequacy, it fails to moderate the relationship between predictor and criterion. Attachment style mediates the relationship between abuse and depressive symptoms.

• Impact of attachment pathology on personality development in subjects with ADHD and comorbid affective pathology

OBJECTIVES - This research highlights the relationship between the Anxiety and Avoidance dimensions of attachment and the five factors included in the Big Five model: Extraversion, Pleasantness, Conscientiousness, Emotional Stability and Intellect. The research was conducted using the Adult Attachment Questionnaire (Simpson, Rholes & Phillips) and five different scales for the five Big Five factors (Romanian adaptation of the IPIP-Ro International Set of Personality Items).

MATERIALS AND METHODS - We assume that anxiety attachment has an effect on all factors in the Big Five model in subjects with ADHD and comorbid affective pathology. We assume that the avoidant attachment has an effect on all factors in the Big Five model. We assume that there is a significant correlation between Avoidant Attachment and all Big Five factors. We assume that there is a significant correlation between Anxiety Attachment and all Big Five factors.

RESULTS AND CONCLUSIONS - The sample included 128 participants (87.7% urban, 13.3% rural), of which 72 completed only high school, 45 completed higher education (bachelor level), young people aged 18-30, diagnosed with ADHD in childhood and which overlapped a diagnosis of a laterally developed affective disorder. Both anxiety and avoidance of attachment correlated negatively with emotional stability, with the strongest relationship between anxiety attachment and emotional stability. Important negative correlations were observed between avoidant attachment, agreeableness, extraversion and conscientiousness, the strongest correlation being between avoidance and extraversion.

Conclusions: The results revealed significant negative correlations between the size of the attachment and four of the five Big Five factors, concluding that the attachment has an effect on these factors in the case of comorbid pathology ADHD - affective diseases.

Trauma-Anxiety Dual Disorders and Mindfulness

• Mindfulness-based relapse prevention and individual functions of substance abuse

We investigated the individual functions of substance abuse and the effect of a mindfulness-based relapse prevention program (MBRP, Marlatt) specifically on these functions. We also observed possible side effects and contraindications of MBRP. Our study population consisted of 73 male and 74 female patients mostly addicted to alcohol but also to cocaine, cannabis or heroine who participated in outpatient MBRP program in Brugmann University Hospital or Enaden addiction center between 2015 and 2019. We developed a questionnaire about the individual functions of substance abuse in the categories of pleasure, emotion regulation, stress, relationship problems with others and oneself. In a second part patients were asked to score the effect of the completed training on the same items. 32 completely filled in questionnaires

were included. Patients gave high scores for the function of substance abuse in all of the proposed categories. We also found high scores of the effect of mindfulness in all of them. The different functions of substance abuse as well as the effect of mindfulness showed strong individual variance. Side effects and contraindications were observed and described.

CONCLUSION - Mindfulness training can have a positive impact on many of the core functions of substance abuse and therefore may help patients to overcome the deeper reasons behind their addictions. Indications, side effects and contraindications are to be taken into account when using mindfulness-based treatment with psychiatric patients.

Psychoactives Substances in real life

• Psychedelic consumption: the reality beyond the myth

INTRODUCTION - Psychedelics have been used in a ritual and then medical and festive context over time in search of introspection and dissociative effects. Today, substance use among young people is high, with a proliferation of available substances. What is the place of psychedelics in the reshaping of the drug scene? With the arrival of new synthetic drugs, some of which have hallucinogenic properties, what is the current use of historical substances such as magic mushrooms, ketamine and LSD among young people? The objective of this work is to quantify and characterize psychedelic use in the youth.

MATERIAL AND METHODS - OCTOPUS observatory enables us to describe and to characterize profiles of substance use in music festivals attendees. Subjects were included in 13 music festivals (electronic, dub and eclectic music) in Loire-Atlantique from July 2017 to July 2018. Data collected by trained interviewers using a questionnaire include individual characteristics, tobacco, alcohol and illicit psychoactive substances use. We analyzed here the use of psychedelic drugs in the last 12 months.

RESULTS AND CONCLUSION - Of the 483 subjects included, 314 were substance users excluding tobacco and alcohol. Within these consumers, 110 subjects (35%) reported use of psychedelics. These were young, mainly male, socially integrated subjects with a high education level and few comorbidities.

A total of 43 mushroom, 37 ketamine and 74 LSD consumptions were reported. The effects sought were mainly comparable for mushrooms and LSD ("euphoria" and "derealisation") and differed for ketamine ("high" and "release" in addition). Consumption was at least monthly in about 1/6 for mushrooms consumptions and 1/3 for ketamine and LSD consumptions. Number of dependent subjects varies according to the substance (quantitative aspect) as does the repartition of positive DSM items (qualitative aspect). Addictologists should be aware of the frequency of use, regularity and potential substance use disorders associated with psychedelics.

Neurobiologie, neuro-imagerie : qu'est-ce qu'il y a dans le crâne ?

Neurobiology, neuroimaging: what's in the box?

• Remédiation cognitive dans le traitement des addictions: actualités et nouveautés

Training cognitive processes in the treatment of addiction: state of the art and new developments

In recent years, much research has been dedicated to investigating the effectiveness of various forms of cognitive training to improve the treatment of addictions. Broadly speaking, two forms of training can be distinguished: training of general functions (e.g. working memory or cognitive control) and re-training automatically activated cognitive motivational processes, or cognitive bias modification (CBM, Wiers, 2018). While the first form of training has shown some positive effects, no study has yet shown a clear effect on treatment outcomes. CBM has since shown an effect in several large studies when added to treatment, relapse one year after treatment is reduced by about 10% (Wiers et al., 2011; Eberl et al., 2013; Rinck et al., 2018; Saleemink et al., 2021; meta-analysis of clinical studies: Boffo et al., 2019, see also Manning et al., 2021).

The theoretical background of CBM was originally based on dual process models, with the idea that CBM would change automatic associations, while regular therapy (i.e., cognitive behavioral therapy, CBT) would change explicit beliefs. Recently, dual process models have been criticized in general (e.g., Keren & Schul, 2009;

Hommel & Wiers, 2017), and as applied to addiction (Gladwin et al., 2011). A recent alternative is that of automatically activated inferences (e.g., Van Dessel et al., 2019), which argues that human cognition is primarily concerned with predicting effects of actions, involving mental representations of the world that are constantly updated. From this perspective, CBM should be seen as a tool that supports CBT: it can facilitate the automatization of important inferences. Specifically, when applied to addiction, we propose that CBM can be changed to ABC training (Wiers, Van Dessel & Köpetz, 2020), where A stands for relevant Antecedents (personally relevant risk situations, typically assessed in CBT for addiction), B for relevant Behavioral Choices, where it is important to choose personally relevant alternative behaviors and C for consequences (activation of personally relevant positive health goals). I will outline how ABC-training works and share initial results in preclinical samples, where we found that it better helped volunteers to remain abstinent for a month in an abstinence challenge compared with original CBM and sham-training.

SESSION SPÉCIALE « YOUNG INVESTIGATORS » EN PARTENARIAT AVEC EISAI Schizophrénie, Cancer & Addiction

• Cocaine-Induced Hallucinations occurrence and severity: two distinct phenotypes with shared and specific risk factors

Cocaine induced transient Hallucinations (CIH) are a frequent complication following cocaine intake associated with cocaine addiction severity. Methods: Two hundred and forty-two non-psychotic and Caucasian lifetime cocaine users were included from a French multicentric study. Clinical variables and Dopamine pathway genotype data were extracted and tested with CIH scores using a zero inflated binomial model which allows to explore factors associated with occurrence and severity separately. Results: Cocaine dependence ($p_{\text{occurrence}} = 4.5 \times 10^{-4}$, $p_{\text{severity}} = 0.03$) and frequency of intake during the worst period of misuse ($p_{\text{occurrence}} = 3.5 \times 10^{-4}$, $p_{\text{severity}} = 0.047$) were associated with more occurrence and higher severity of CIH. Daily cocaine dose during the worst period of misuse ($p_{\text{occurrence}} = 0.02$, $p_{\text{severity}} = 0.15$), a lower age of cocaine initiation ($p_{\text{occurrence}} = 0.008$, $p_{\text{severity}} = 0.81$), and

lifetime alcohol dependence ($p_{\text{occurrence}} = 0.03$, $p_{\text{severity}} = 0.56$) were only associated with more occurrence but not with severity of CIH. Genetic associations did not yield significant results after correction for multiple testing. However, some nominal associations of SNPs mapping on VMAT2, DBH, DRD1 and DRD2 genes were significant. In the multivariate model the number of cocaine dependence criteria, lifetime alcohol dependence and nominal associated SNPs remained significant.

CONCLUSION - Our study shows that CIH occurrence and severity are two distinct phenotypes, with common and specific risk factors. Moreover, our results suggested that occurrence and severity may probably do not share the same genetic background.



Amine BENYAMINA - President of ALBATROS



Amine Benyamina is an addiction psychiatrist at the Paul Brousse University Hospital in Villejuif, France. He is also Professor at the Paris Saclay Faculty of Medicine and in charge of several national and international University Diplomas.

Pr. Benyamina is the head of the Research Center for the Treatment of Addictions.

He is the Editor-in-Chief of the French medical journal "Alcoolologie et Addictologie" (Alcohol and addiction science) and the administrator of the French Society for the Study of Alcohol (SFA), and of the French biological psychiatry and neuropharmacology Association (AFPBN).

He is also the President of FFA (French Federation of Addictology), President of Fonds Addict'Aide, President of CNU (National University College) on Addictology and President of Collegiate of Addictology of the APHP (Assistance Publique Hôpitaux de Paris).

Pr. Benyamina is the author of about hundred referenced scientific publications, dealing primarily with issues of therapeutics, biomarkers and psychiatric and addictive comorbidities. He has authored many academic books, and has coordinated several collective educational works. He has also written books for the general public, on questions of addictions, especially with regards to cannabis and alcohol.

Finally, he is the founder of the international addictology congress "Albatros," which takes place every year in Paris.

Pedro RUIZ - President of WADD



Dr Pedro Ruiz is currently President of the World Association on Dual Disorders. He was professor & Executive Vice Chair as well as Director of Clinical Programs at the Department of Psychiatry and Behavioral Sciences of the University of Miami Miller School of Medicine. Born in Cuba, Dr Ruiz completed his medical school education at the University of Paris in France. Subsequently, he conducted his graduate training in general psychiatry at the University of Miami Miller School of Medicine. Thereafter, he joined the faculty at the Albert Einstein College of Medicine in New York City where he rose from instructor to Professor of Psychiatry. In this academic institution he occupied a series of administrative and academic positions, such as, Director of the Lincoln Hospital Community Mental Health Center (1969-1977), Assistant Dean (1977-1979), Director of Bronx Psychiatric Center (1979-1981) and Vice Chair of the Department of Psychiatry (1979-1981).

Dr Ruiz was also tenured Professor of Psychiatry at Baylor College of Medicine (1981-1993) and at the University of Texas at Houston (1993-2010), where he also was Interim Chair of the Department of Psychiatry and Behavioral Sciences. Dr Ruiz has also been President of the American Psychiatric

Association (2006-2007), the American College of Psychiatrists (2000-2001), the American Board of Psychiatry and Neurology (2002-2003) and the American Association of Social Psychiatry (2000-2002). Dr Ruiz has also served in more than 40 editorial boards in the United States and abroad and has also authored more than 600 publications; among them, "Substance Abuse: A Comprehensive Textbook" and the Ninth Edition of "Kaplan & Sadock's Comprehensive Textbook of Psychiatry".

Nestor SZERMAN - Vice President of WADD



Dr Szerman received his medical degree from the Complutense University of Madrid, Spain and completed residency in psychiatry at the Clinical University Hospital San Carlos, Madrid.

Currently, he is Head of the "Retiro" Mental Health Service at the Gregorio Marañón University Hospital in Madrid, Spain.

He is a member of the Spanish State Council for Addictions and also the Advising Psychiatrist for the fields of Alcoholism and Dual Disorders for the Madrid Public Mental Health Administration.

Dr Szerman is an Associate Professor for the MSc Drug-Dependence course at the Complutense University of Madrid.

Dr Szerman is a member of numerous societies including an "international fellow of the American Psychiatric Association", the Spanish Society of Psychiatry and he was the President of the Spanish Society

of Dual Disorders – Addiction and other mental disorders (SEPD) for more than ten years (2005-2016).

He is the current president of the Dual Disorders Foundation (2016). In 2017 the Dual Disorders Foundation received two awards: firstly for the «Best Digital Awareness Campaign» at the annual Global Health PR awards- an international network of independent health communication agencies, and the second prize for the «Best Intervention Program for Patients and/or Families with dual disorders» at the Albert Jovell Awards.

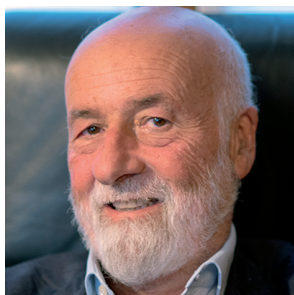
Dr Szerman has been the Chair of the WPA Section of Dual Disorders (World Psychiatric Association) since 2014. He was one of the Chairs of the Pan-American Health Organization Consensus of Dual Disorders (World Health Organization) in 2016.

Dr. Szerman has been a member of various consensus panels that have drawn up extensive guidelines regarding the treatment of addictive disorders and other psychiatric illnesses.

His principal research interests include addiction and dual disorders such as personality disorders, ADHD and psychosis, and he was involved in creating the treatment guidelines for Bipolar Disorders which are associated with substance abuse and the development of the newest advances in the European guidelines on opioid use disorder.

Dr. Szerman has published a number of papers in international journals, as well as numerous book chapters, and he has edited many different scientific and educational books regarding his field of research.

Icro MAREMMANI - Secretary of WADD

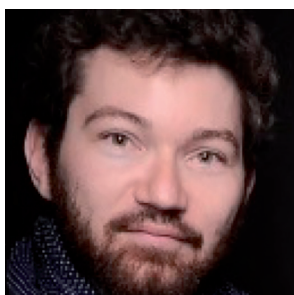


Icro Maremmanni, MD graduated at the Medical School of the University of Pisa and specialized in Psychiatry cum laude at the University of Pisa. At present he is “Qualified full professor of Psychiatry”, Professor of Addiction Medicine at the University of Pisa, and Director of the II Level Master in Addiction Medicine at Saint Camillus International University of Health and Medical Sciences (UniCamillus), in Rome, Italy, EU

His expertise field is agonist opioid treatment of heroin addicts, especially patients with dual disorders. He is founding member and Past President of Italian Society of Addiction Medicine (SITD) and Founding member and President of the European Opiate Addiction Treatment Association - EUROPAD. He is Founding President of World Federation for the Treatment of Opioid Dependence (WFTOD), NGO with Special Consultative Status with United Nations Economic and Social Council (ECOSOC), based in New York, NY, USA. He is founding member and secretary of World Association on Dual Disorders

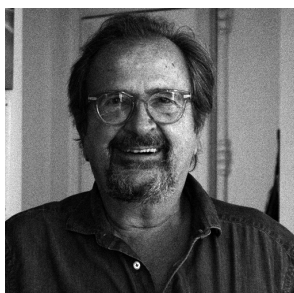
(WADD). He received Dole and Nyswander Award in 1994; Chimera Career Award in 2004, SEPD Award in 2015, and ISAM fellowship award in 2016, Dole and Nyswander Award chair in 2019. He serves also as editor in chief of Heroin Addiction and Related Clinical Problems, Journal of Clinical Medicine, section of Psychiatry and Italian Journal of Addiction. Up to present has published more than 600 scientific and professional papers and 20 books. Presently taking part, as active member, more than 500 scientific meetings.

Guillaume AIRAGNES



Ancien Chef de Clinique-Assistant, Praticien Hospitalier dans le Département Médico-Universitaire de Psychiatrie et Addictologie à l'Assistance Publique-Hôpitaux de Paris.Centre – Université de Paris. Coordination de l'Equipe de Liaison et de Soins en Addictologie à l'Hôpital Européen Georges Pompidou. Activité de recherche clinique centrée sur l'évaluation de stratégies thérapeutiques et la facilitation de l'accès aux soins et activité de recherche en santé publique et en épidémiologie des conduites addictives au sein de l'UMS011, Inserm. Enseignements de Psychiatrie et d'Addictologie à la Faculté de Médecine Paris Descartes – Université de Paris.

Patrick AEBERHARD



Cardiologue
Ancien Président de Médecins du monde
Ancien Professeur associé Paris 8
Co-fondateur de Harm Reduction International HRI

Bernard ANGERVILLE



Bernard Angerville (MD PhD student) is a Psychiatrist and Addiction Medicine physician at University of Amiens (France) and in the Psychiatry and Addiction Medicine Department at Amiens University Hospital. His department offers treatments for individuals presenting with substance use disorders and behavioral addictions especially with somatic comorbidities.

His personal work is focusing on innovative assessment and treatment of cognitive impairments related to substance use disorders (Pharmacotherapies , neurostimulation..).

Member of the research Group on alcohol use disorder and substance use disorders (GRAP) in Amiens, INSERM U-1247, his team's research focuses on neurobiology mechanisms and new therapies of addictive behaviors with a translational approach.

Mathilde AUCLAIN



Mathilde AUCLAIN works as a clinician psychologist and a therapist at the ambulatory facility for addiction treatment (“CSAPA”) of the Psychiatry and Addictology Service at Versailles Hospital (southern-western area of Paris, France). Her workplace offers medical, social and psychological help to adults and adolescents for substance use disorders and behavioral addictions (screens, gambling and sex addiction). She is particularly in charge of offering integrative therapies for all patients (with some particular interest in behavioral addictions) and receiving adolescents, young adults and families and conducting local preventive actions and therapeutic groups (cognitive remediation, emotional regulation). Besides, she shows interest and involvement in research in the fields of clinical psychopathology, neuropsychology and neuroscience, especially about addictive behaviors, high intellectual potential, ADHD, cognitive remediation, quality of life and phenomena in teen age.

Marc AURIACOMBE



Marc Auriacombe psychiatre-addictologue est Professeur à l'Université de Bordeaux et à l'Université de Pennsylvanie (Philadelphie, USA), directeur de l'équipe « Phénoménologie et déterminants des comportements appétitifs » du Laboratoire Sanpsy (CNRS USR 3413), il est chef du Pôle Addictologie (CH Ch. Perrens et CHU Bordeaux) qui regroupe un ensemble de services sanitaires et médico-sociaux de prise en charge et de prévention des addictions.

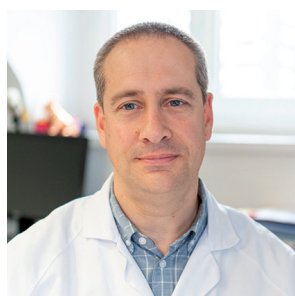
Nicolas AUTHIER



Inserm 1107, Université Clermont Auvergne, CHU Clermont-Ferrand, Observatoire Français des Médicaments Antalgiques, Fondation Institut Analgesia. Professeur des universités et praticien hospitalier, chef du Service de Pharmacologie Médicale et du Centre d'Evaluation et de Traitement de la Douleur du CHU de Clermont-Ferrand. Médecin psychiatre de formation spécialisée en pharmacologie et addictologie, il s'occupe d'une consultation pharmacodépendance destinée aux patients présentant un trouble de l'usage d'un traitement antalgique, notamment opioïde, ainsi que de la prescription de cannabis à usage médical. Ses travaux de recherche, au sein de l'UMR INSERM 1107 NEURO-DOL, se focalisent actuellement sur les liens entre douleur et addiction mais aussi sur l'optimisation du bénéfice-risque des antalgiques et plus particulièrement sur le mésusage des médicaments opioïdes chez les patients douloureux et les patients dépendants ainsi que sur les stratégies de sevrage en opioïdes.

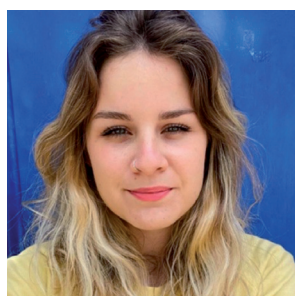
Il développe notamment pour cela des études cliniques et pharmaco-épidémiologiques sur bases de données. Il préside depuis septembre 2018 le comité scientifique de l'ANSM pour l'accès au cannabis médical en France et depuis 2020 le groupe de travail de la HAS pour l'élaboration de recommandations sur le bon usage des médicaments opioïdes.

Alexandre BAGUET



Le Docteur Alexandre BAGUET est Psychiatre et Addictologue, responsable du service d'Addictologie du CHU de ROUEN. Son service, centre de recours régional, animé par une équipe multidisciplinaire, est composé d'une unité de soins complexes résidentielle, d'un hôpital de jour, d'une unité de tabacologie et d'une équipe territoriale de liaison. Il comprend également un CSAPA polyvalent où est individualisé un centre Méthadone. Il est par ailleurs partenaire de la FHU A2M2P (Améliorer le pronostic des troubles Addictifs et Mentaux par une Médecine Personnalisée) portée par le CHU de CAEN. Il est impliqué dans l'enseignement, en particulier dans le Diplôme Universitaire d'Addictologie, mais aussi d'Ethique, Soins et Santé, dispensés par l'UFR Santé - Université de ROUEN NORMANDIE. Etudiant de l'école doctorale NBISE Normande de Biologie Intégrative, Santé, Environnement, il est accueilli dans le groupe INSERM UMR 1073 du Pr Pierre DECHELOTTE. Il travaille ainsi sur l'axe intestin - cerveau, plus particulièrement sur le rôle du microbiote intestinal dans la triade alcool - benzodiazépines - anxiété.

Emmanuelle BAILLET



Emmanuelle Baillet is a PhD student in the Neuroscience program at the University of Bordeaux, France. She graduated with a double Bachelor's degree in Psychology and Health Sciences with honors (2017) and received a Master's degree in Neuroscience with honors (2020). She is doing a PhD in SANPSY Laboratory (CNRS USR 3413) under the supervision of Pr Marc Auriacombe. Emmanuelle Baillet's Doctoral project examines the precocity of craving in the development of addiction (use disorder) through a prospective study in general population and on the identification of biomarkers of craving through a coupling of a natural life assessment method (Ecological Momentary Assessment - EMA) and a portable sensor that records physiologic parameters (skin conductance, heart rate, temperature...). In a previous study, she examined the trajectory of craving at the onset of addiction treatment and its relationship with long-term (5+ years) relapse. Emmanuelle Baillet is funded by the French National Cancer Institute and the French Public Health Research Institute.

Camille BALLESTER



BALLESTER Camille est médecin généraliste au sein de l'unité sanitaire en milieu pénitentiaire (USMP) de la maison d'arrêt de Villeneuve Lès Maguelone depuis novembre 2017.

Titulaire du DIU d'addictologie générale depuis 2020, elle est en charge des évaluations et des suivi des personnes placées sous main de justice présentant des problématiques addictologiques. Elle est également responsable au sein de l'USMP des prises en charges vaccinales, dermatologiques et des patients atteints de BPCO.

Le travail présenté « Modifications liées au premier confinement des consommations de substances psychoactives chez les personnes placées sous-main de justice à la maison d'arrêt de Villeneuve-Lès-Maguelone. » a été réalisé dans le cadre du mémoire du DIU d'addictologie en cotravail avec Aurélie MIEUSET (médecin généraliste-tabacologue au sein de l'USMP depuis 2017).

Bernard BASSET



Médecin spécialiste en santé publique
Président de l'association Addictions France
Secrétaire général de la Fédération Française d'Addictologie
Ancien haut fonctionnaire au ministère de la santé

David BELIN



David Belin is professor in Behavioural Neuroscience at the Department of psychology of the University of Cambridge. His laboratory studies the psychological, neural and cellular basis of the individual vulnerability to Impulsive/Compulsive Spectrum Disorders, with a particular interest in drug addiction. David Belin studied the Cellular and molecular physiology of the cell at the University of Bordeaux. He then did a Master in Neuroscience and then in 2002, started a PhD under the supervision of Dr Véronique Deroche-Gamonet during which he established the first multidimensional preclinical model of addiction that enabled him to identify differential behavioural markers of the tendency to acquire drug use and that to switch to addiction. Immediately after his PhD, completed in December 2005, he moved to Cambridge in January 2006 to work as a post-doctoral fellow under the supervision of Professor Barry Everitt on the intrastriatal mechanisms that support the development of drug seeking habits and the transition from impulsivity to compulsivity that takes place over the course of the development of

drug addiction. In 2009 he established his laboratory at INSERM in France, but returned to Cambridge in 2013, initially as a Lecturer in Neuroscience at the Department of Pharmacology. In October 2016, he moved back to the Department of Psychology where he has since become a professor in Behavioural Neuroscience.

Patrick BENDIMERAD



Le Dr Patrick Bendimerad est praticien hospitalier, il est responsable d'un secteur de psychiatrie à La Rochelle. Il est formé à l'addictologie depuis plus de quinze ans et a participé à plusieurs protocoles de recherche scientifique concernant les addictions.

Il s'intéresse tout particulièrement au concept de réduction des risques et aux stratégies relationnelles visant à favoriser le renforcement des liens thérapeutiques avec les patients souffrant d'addictions. Il a publié plusieurs articles concernant les troubles de l'usage de l'alcool, ainsi que les problématiques liées aux addictions aux jeux vidéo.

Farid BENZEROUK



Farid Benzerouk est Praticien Hospitalier à Reims et rattaché au laboratoire Cognition Santé Socialisation (C2S) de l'Université de Reims Champagne-Ardenne. Il est psychiatre, addictologue et fait partie de l'Association de l'Enseignement de la Sémiologie Psychiatrique.

Il travaille sur la mise en évidence de facteurs de vulnérabilité aux conduites d'alcoolisations (notamment dans le cadre du binge-drinking), au binge eating disorder (BED) et à l'addiction à l'alimentation. Il travaille également sur les liens entre la régulation émotionnelle et les conduites addictives.

Michaël BISCH



Michaël BISCH (MD) is Hospital Practitioner in Psychiatry and Addiction Medicine; and Head of the Addiction Medicine Department at the University Psychiatric Hospital of Nancy.

His department (CSAPA, ELSA, HDJA, Consultations) manages the care of substance use disorders, gambling, gaming, sexual addictions of adults and young people, and promotes specialized prevention interventions and research, especially in prisons.

He is managing Addiction Medicine teachings at the Lorraine University; administrator of the Learned Alcoholology Society, general secretary of the RESPADD (national hospital network for the prevention of addictions) and leads a regional committee for harm reduction in prisons.

Hagit BONNY-NOACH



Dr. Hagit Bonny-Noach, received her Ph.D in Sociology and Anthropology from the Hebrew University of Jerusalem. She is a senior lecturer in the Department of Criminology -Ariel University and a board member of the Israeli Society of Addiction Medicine (ILSAM), and the editor of the ILSAM Professional Journal «Addiction in Israel». She was a Consultant of the Israel Anti-Drug Authority (IADA) since 1996 until 2018 and a board member of the Israel National Anti-Doping Organization (INADO). Until 2016 she was head of the Department for Youth Care Work, at Beit Berl Academic College and a lecturer in the Department of Social-Work, in the Hebrew University of Jerusalem and in Law School at Netanya Academic College. Her research and teaching areas include substances use, drug policy, gambling, addiction focusing on young adults, backpackers, injecting drug users and women.

Noomane BOUAZIZ



Noomane Bouaziz is a psychiatrist and has the responsibilities of the neuromodulation unit of EPS Evrard (ECT, rTMS, tDCS) and the Bipolar Disorders Expert Center (Fondamental Foundation) of EPS Ville Evrard.

Mathieu BOUDARD



Le docteur Mathieu BOUDARD est psychiatre addictologue, assistant spécialiste des Hôpitaux à l'hôpital Charles Perrens de Bordeaux. Il intervient au sein du pôle inter établissement d'addictologie (PIEA) commun à l'hôpital Charles Perrens et au CHU de Bordeaux où il est le médecin référent des consultations spécialisées d'addictologie dans la filière de recours. Le Dr Mathieu Boudard intervient aussi au centre d'évaluation et de traitement de la douleur (CETD) du CHU de Bordeaux. À l'occasion de sa thèse de médecine soutenue en 2020 Mathieu Boudard travaille dans l'équipe addiction du Laboratoire SANPSY CNRS USR 3413 (Pr Marc Auriacombe) où il a étudié la validité des critères diagnostiques d'un possible trouble de l'usage des écrans. Pour son mémoire de DESC d'addictologie il poursuit ses travaux initiaux pour examiner la place du craving.

May BOUMENDJEL



May Boumendjel is psychiatrist since 2014 and addictologist since 2015. She is hospital practitioner at CSAPA of the Versailles hospital. She has worked on attention-deficit hyperactivity disorder (ADHD) and its comorbidities for his thesis. She is national coordinator and participate in the working group of addictology for an association of young psychiatrists and addictologists (AJPJA).

Georges BROUSSE



Professeur d'Addictologie et de Psychiatrie Service d'Addictologie et Pathologies Duettes CHU de Clermont Ferrand- Université Clermont Auvergne.

Membre des conseils d'administration de la Société Française d'Alcoologie, de la Société Française de Psycho traumatologie et de l'Association Addiction France. Membre de l'International Society of Addiction Médecine co-Chair du *Philosophy, Anthropology and Human Sciences Interest Group*.

Le service est composé d'unités de soins complexes résidentielles et ambulatoires, d'une unité d'addictologie de liaison, d'un hôpital de jour, d'une consultation hospitalière d'addictologie et d'un service de soin de suite et de réadaptation en addictologie. Il comprend par ailleurs une unité d'intervention et de recherche en prévention des addictions ainsi qu'une antenne de lutte contre le dopage. Le Centre Interdisciplinaire de Recherche de Coordination des Soins et d'Enseignement en Addictologie (CIRCE-A-SATISFRA) adossé au service conduit des travaux de recherches au sein de l'UMR

6602 UCA/CNRS/SIGMA de l'Université Clermont Auvergne. Ces travaux portent sur la prévention et le dépistage des conduites addictives en particulier chez les jeunes, la métrologie des phénomènes cliniques intrinsèques et associés aux addictions (Duals Disorders) et leurs traitements (neurostimulation, psychothérapie 3D...).

Julien CABÉ



Le Dr Julien Cabé travaille au CHU de Clermont Ferrand. Il est praticien hospitalier en addictologie et en psychiatrie dans un service de soin ambulatoire pour les patients souffrants d'addictions. Il est actuellement en thèse de doctorat et travaille au sein de l'institut Pascal, UMR 6602 UCA - CNRS, dans l'axe Thérapies Guidées par l'Image. Son travail de recherche porte notamment sur les pathologies duelles, et plus spécifiquement sur les particularités cliniques et psychopathologiques des troubles psychiatriques dans le cadre de l'usage de substances psychoactives, ainsi que sur les aspects de remédiation cognitive dans les addictions et sur le chemsex.

Gema CALERO



Gema Calero, Health Psychologist specialized in clinic and psychoanalytic psychotherapy. Clinical experience in individual intervention of adults and teenagers, center of social support for people diagnosed with serious mental disorders and multifamiliar groups. Currently part of OAPSIS PSICOTE-RAPIA, a team of psychologists, where learning from patients, students and the other members of the team.

Albert CAPOROSSI



58 ans, demeurant à Paris.

Ex-usager de drogues devenu Patient-expert en addictologie.

A validé un DU en addictologie générale et est certifié Patient-expert en addictologie par France Patients Experts Addictions, association créée en 2019 par le Pr Michel Reynaud.

Matthew CARPENTER



Dr. Carpenter received his Ph.D. in Clinical Psychology from the University of Vermont in 2003, and relocated to the Medical University of South Carolina (MUSC) in Charleston SC, for internship and postdoctoral training. He joined the MUSC faculty in 2006 and is currently a Professor, jointly affiliated with the Addiction Sciences Division within the Department of Psychiatry, and also the Hollings Cancer Center, where he serves as Co-Leader of the Cancer Control Program and Co-Director of the Tobacco Research Program. His primary research interests relate to tobacco use across a broad methodological continuum: from lab-based studies of craving and nicotine dependence, to small and large scale clinical trials for smoking cessation, to public health policy for effective tobacco control. He has led a number of large national cessation trials, including a large cluster randomized trial in primary care. He leads a robust program of research on alternative products, including clinical trials of e-cigarettes. He is an innovator of methods for remote clinical trials. Dr. Carpenter has had continuous funding from

NIH since 2007. Prior/current funding includes a Career Development Award (K23), multiple R01s and R21s (NCI & NIDA), and foundation grants, all as Principal Investigator. Dr. Carpenter has served on a wide number of NIH study sections, including Chair of both Addiction Risks and Mechanisms (ARM), and for Fellowship (F31/F32) Review Panels. He serves on the editorial board of both CNS Drugs and the Journal of Behavioral Medicine. Dr. Carpenter has mentored a number of junior investigators across various NIH grant mechanisms (T32, F32, K07, K12, K23). He regularly speaks to community and school groups on the science of smoking cessation, vaping, and health. Honored with several state and federal awards, Dr. Carpenter was most recently awarded with the South Carolina Governor's Award for Research Excellence.

Louise CARTON



Louise Carton est psychiatre, addictologue et pharmacologue. Elle travaille comme Praticien Hospitalo-Universitaire en Pharmacologie Médicale au CHU de Lille (Inserm U 1172), fait partie du service d'addictovigilance et est également médecin attaché dans le service d'addictologie du CHU. Ses intérêts cliniques et de recherche portent de manière générale sur la psychopharmacologie translationnelle, et plus spécifiquement sur les effets cognitifs de l'alcool et des benzodiazépines, la prescription de méthylphénidate dans le TDAH de l'adulte, la prise en charge médicamenteuse des addictions et l'addictovigilance.

Miguel CASAS



Miguel Casas MD. PhD.

Director of Neuropsychodevelopmental Disorders Program and Addictions along the life cycle (from 2015 at present). Institut Català de la Salut. Barcelona. Spain.

Full Professor of Psychiatry (from 1996 at present). Department of Psychiatry and Legal Medicine. School of Medicine. Universitat Autònoma de Barcelona. Spain.

President of the International Dual Disorders Foundation (from 2013 at present).

Miguel Casas is developing his professional work in Adolescent and Adult psychiatry over 25 years, focusing his research on the neuropsychodevelopmental disorders (ADHD along life span, Borderline Personality Disorders, etc.) inducing vulnerability for academic failure, addictions, behavioural problems, traffic accidents, violence and criminality, etc. He is also involved in e-Health and m-Health projects in Barcelona.

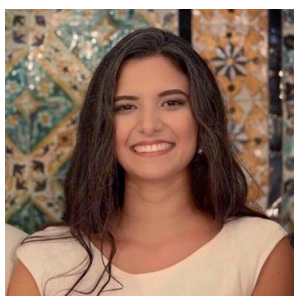
Dorian CESSA



Major coordinator of the study « Sea, Sex and Chems », co-organized by the Addiction Care Center of Croix-Rousse in Lyon (CSAPA de la Croix-Rousse – Lyon), Dorian CESSA is a medical resident at University Hospital of Marseille (Assistance Publique des Hôpitaux de Marseille) & Lyon (Hospices Civils de Lyon). Born in Verdun (Meuse, France) and trained as a medical student in Nancy, he decided to become psychiatrist after have working as journalist for the French newspaper “Le Monde” meanwhile he wrote notably an article about LGBTQIA health in french care system. As member of these communities, he's focusing about making medicine more inclusive and adapted to diversity. He's also attending to sexology interuniversity degree since 2020 and working about sexuality implications of Chemsex practice. Since 2019, he's health and arm reduction officer for Plusbellelanuit collective (one of the major french queer collectives outside of Paris, producers of the famous “Garçon Sauvage” party) and for several music festivals.

A way to act and prove that music and party can be a powerful cultural, societal and sanitary medium.

Leïla CHAOUACHI



Le Dr Leïla Chaouachi est pharmacien, diplômée de l'université René Descartes. Dans le cadre de son cursus initial officinal, elle réalise son stage de fin d'étude qui lui permet de mesurer l'étendue des problématiques de pharmacodépendance en pharmacie de ville. Elle consacre alors son travail de thèse à la question de la dépendance aux benzodiazépines et molécules apparentées dans laquelle elle interroge la place du pharmacien d'officine dans l'accompagnement des patients pharmacodépendants. Sa thèse est récompensée par la SFSPPO (Société Française des Sciences Pharmaceutiques Officinales) lors du congrès SPOT PHARMA 2018 où elle obtient le prix « Souffle nouveau ». A l'issue de sa thèse, elle intègre le centre d'Addictovigilance de Paris à l'hôpital Fernand Widal où elle exerce la fonction de praticien attaché. Ses nouvelles missions lui permettent d'élargir son champs de connaissances sur les problématiques psychiatriques et addictologiques par-delà l'usage de médicaments psychoactifs (drogues licites et illi-

cites, plantes psychoactives). Elle s'intéresse tout particulièrement à l'usage criminel des drogues (soumission chimique) et se spécialiser en criminaliste. Elle est nommée experte « soumission chimique » à l'ANSM pour l'année 2020

Faredj CHERIKH



Psychiatre

Praticien hospitalier

Responsable du service addictologie

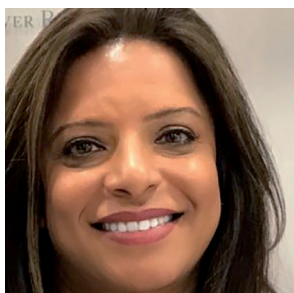
CHU de Nice

Stéphane CHEVALIEZ



Stéphane Chevaliez is Professor of Medicine at the University of Paris-Est Creteil. He is Deputy Director of the French National Reference Center for Viral Hepatitis B, C and delta, member of the department of Virology and of INSERM Unit U955 at the Henri Mondor University hospital. He is also the president of the Concerted Action 43 of the French National Agency for Research on AIDS and viral Hepatitis (ANRS).

Shilpa CHOKSHI



I am a basic translational scientist in hepatology, with a broad range of interests extending from my original area of expertise in viral hepatitis to alcoholic liver disease, immune mechanisms driving cirrhosis and the development of Hepatocellular Carcinoma. I am currently the Acting Director & Chief Scientific Officer for the Institute of Hepatology, London which is affiliated to King's College London. My research programme is focussed on 'Liver Immunology' which aims to delineate the paradoxical immunological landscape that exists in end-stage liver disease, which encompasses a highly activated and damaging systemic immune response that is unable to defend against bacterial and viral pathogens and is unable to maintain anti-tumoral immunity. The aims of these studies are to develop disease-specific host-targeted immunomodulatory strategies to rebalance this skewed equilibrium to restore a state of effective anti-pathogen and anti-cancer immunity and dampen injurious inflammatory processes.

Tom CODERRE



Tom Coderre is the Acting Deputy Assistant Secretary for Mental Health and Substance Use at the Substance Abuse and Mental Health Services Administration (SAMSHA), the federal agency in the United States responsible for advancing the behavioral health of the nation. With decades of public, private, and non-profit service, Mr. Coderre's career has been significantly influenced by his personal journey and a philosophy that acknowledges the essential role peer recovery support services play in helping people with mental and substance use disorders rebuild their lives. Prior to his current leadership role at SAMSHA, Mr. Coderre was the Region 1 Administrator and led the prioritization of prevention, treatment and recovery services under the strain of COVID-19. He reconvened the Federal Interagency Workgroup on Opioids and as overdoses spiked throughout 2020, he brought the region together to identify programmatic and policy solutions to respond. Mr. Coderre is also the former Chief of Staff and Senior Advisor at the

agency. Mr. Coderre led the SAMSHA team that produced "Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health."

A former Senior Advisor to the Governor of Rhode Island, Mr. Coderre co-chaired a task force that coordinated a multi-layered strategy to address the opioid crisis. Mr. Coderre also worked on mental health policy and helped draft an Executive Order to improve access to treatment by enforcing parity laws. He also worked with the State Police to establish the Hope Initiative, the first statewide program that engages law enforcement personnel in a proactive outreach strategy to combat the opioid overdose epidemic.

Arkaitz COLINA



Neuropsychologue-addictologue au CSAPA Bizia et au Centre Médico Psycho Pédagogique (CMPP) de Bayonne

Thérapeute TCC en cabinet libéral

Directeur adjoint des colloques internationaux AHS de Biarritz

Secrétaire Général Adjoint de la Société Européenne Toxicomanies Hépatites et SIDA (SETHS)

Membre de la World Association on Dual Disorders (WADD)

Membre de la Coordination Nationale TDA/H Adulte

Membre de l'équipe de recherche du Pr Auriacombe à Bordeaux

Domaines de recherche:

- TDA/H et addiction

- Pathologies duelles

- Neurobiologie des addictions

Michael COMPTON



Michael T. Compton, M.D., M.P.H. is Professor of Psychiatry at the Columbia University Vagelos College of Physicians & Surgeons, in the Division of Behavioral Health Services and Policy Research. He is also a Research Psychiatrist at the New York State Psychiatric Institute.

After completing medical school at the University of Virginia, Dr. Compton trained in general psychiatry, preventive medicine, public health, and community psychiatry, all at Emory University in Atlanta, Georgia. He served on faculty as an Assistant Professor, and then tenured Associate Professor, at Emory from 2003 to 2010.

He then served as Professor and Director of Research Initiatives in the Department of Psychiatry and Behavioral Sciences at The George Washington University School of Medicine, in Washington, D.C., from 2011 to 2013. Upon relocating to New York, he was Chairman of Psychiatry at Lenox Hill Hospital in the Upper East Side - and Professor of Psychiatry at Hofstra Northwell School of

Medicine - from 2013 until the fall of 2016 when he joined Columbia and New York State.

Dr. Compton has maintained continuous National Institute of Mental Health (NIMH) research funding for more than 15 years, conducting research on first- episode psychosis, the Crisis linguistic abnormalities in persons with schizophrenia, a linkage system between police officers and the local mental health system, and the effectiveness of a new form of recovery-oriented community navigation for persons with serious mental illnesses and repeated hospitalizations.

Patricia CONROD



Conrod is a Clinical Psychologist, Full Professor of Psychiatry, Université de Montréal and Visiting Senior Clinical Fellow in the Addictions Department, King's College London. She is based at the CHU Sainte-Justine Mother and Child Hospital Centre in Montreal, where she holds a Research Chair in Social and Community Pediatrics funded by Fondation Julien/Jean & Marcelle Coutu and a Senior Research Fellowship from the Fondation de Recherche du Québec en Santé (FRSQ). Her research focuses on cognitive, personality and biological risk factors for the development and maintenance of drug abuse and the factors that mediate the co-occurrence of addictive behaviours with other mental disorders. Her experimental research focuses on factors that make people more susceptible to seek out behavioral reinforcement from drugs of abuse. More recently, her research findings have led to the development of new approaches to substance abuse treatment and prevention that target personality risk factors and the underlying motivational determinants of drug use in subtypes

of substance misusers. Dr. Conrod was a member of the King's College London Research Ethics Committee (2005-2010) and Associate Editor of Current Reviews in Drug Abuse. She is consultant to the UN and the European Commission on guidelines for drug and alcohol prevention and has published extensively on this issue. Her research is funded by Canadian Institutes of Health Research, Fondation de Recherche en Santé du Québec, European Commission (Health and Humanities and Social Sciences), Alcoholic Beverages Medical Research Foundation, European Research Advisory Board, Action on Addiction, Medical Research Council-UK, National Health and Medical Research Council - Australia.

Olivier COTTENCIN



Olivier Cottencin (MD PhD) is Professor of Psychiatry and Addiction Medicine at University of Lille (France) and Head of the Psychiatry and Addiction Medicine Department (Lille University Hospital). His department offers treatments for individuals presenting with substance abuse disorders and behavioral addictions (gaming, gambling, sex addict) as well as eating disorders (anorexia & bulimia). He leads a multidisciplinary consultation for off label treatments in addiction medicine in collaboration with Pharmacology Department (Lille University Hospital).

Member of the Plasticity & Subjectivity (PSY) team in Lille Neuroscience & Cognition Centre (LiNC), INSERM U-1172, his team's research focuses on vulnerability and protection factors in initiation and self-maintenance of addictive behaviors.

Pinhas DANNON



Pinhas Dannon MD, MHA; is a psychiatrist and a professor of psychiatry at the Sackler Faculty of Medicine at Tel Aviv University. He is the Director of Psychiatry Ward, at Herzog Medical Center, Jerusalem. A graduate of the School of Medicine of Istanbul University, he completed training at Wolfson Medical Center and specialized training at Sheba Medical Center-Tel Has homer. Previously, Prof. Dannon served as specialist at the anxiety & depression outpatient clinics, Sheba Medical Center, the head of Rehovot Community Mental Health and Rehabilitation Clinic, the director of research and inpatient rehabilitation department at Beer Yaakov MHC and the head of dual disorders treatment department at Ness Ziona MHC.

Prof. Dannon is internationally recognized for his research and publications in the treatment of depression, OCD, alcohol, cannabis, prescription drugs and behavioral addictions, including kleptomania, internet addiction, shopping addiction and pathological gambling. He published more than

hundred peer per view articles, chapters, and two books «We are all addicted» and «Chronicle of Addiction in the 21st Century: From Pleasure to Dependence and Addiction» in the field of addictions.

Jean-Pierre DAULOUÈDE



Le Dr Jean-Pierre DAULOUÈDE est psychiatre addictologue, directeur du CSAPA CAARUD Bizia à Bayonne depuis 1994. Il a également une activité libérale depuis 1982. Il a développé une solide expérience dans la prise en charge des conduites addictives et notamment des traitements de substitution aux opiacés. L'un de ses thèmes d'étude a également été l'électrothérapie transcérébrale (courant de Limoges) dans le traitement de l'addiction aux opiacés. Il travaille depuis de nombreuses années avec l'université de Bordeaux (Sanpsy CNRS USR3413). Il est co auteur de nombreux articles dans des revues médicales et scientifiques.

En 2009, le Dr Daulouède a reçu le prix du citoyen Européen, en reconnaissance de ses actions dans le champ des conduites addictives et de la réduction des risques liés à l'usage de drogues dans la zone transfrontalière France/Espagne. Il est par ailleurs impliqué dans l'association Médecins du Monde depuis de nombreuses années, en particulier dans le groupe de Réduction des Risques. Il

est actuellement responsable de la mission RDR Bayonne et membre du collège régional Médecin du Monde Nouvelle Aquitaine. Il est également directeur général des congrès Addictions Toxicomanies Hépatites SIDA ATHS) depuis 2007.

Yavor DELCHEV



Yavor Delchev is a Doctor of Medicine specialized in psychiatry and addictology. He is a resident in psychiatry-addictology, Center for Addictology at Georges Pompidou European Hospital (Paris). In 2017 he founded the Cabinet of Psychiatry, Addictology and Psychotherapy «T8», where he is a private practitioner.

Maurice DEMATTEIS



Neurologue de formation, Professeur d'Addictologie et de Pharmacologie, fondateur et chef du Service Universitaire de Pharmaco-Addictologie au CHU Grenoble Alpes, il a contribué à développer et à structurer l'enseignement de l'Addictologie dans sa Faculté et son interrégion. Il a participé aux différents groupes de travail nationaux (alcool, analgésiques opioïdes, substitution opioïde, nouveaux produits de synthèse / nouvelles substances psychoactives), à la rédaction des recommandations dans les troubles de l'usage d'alcool et des opioïdes, et à différentes études multicentriques. De par sa formation, il s'intéresse particulièrement aux addictions médicamenteuses, à leur caractérisation et à leur prise en charge. Enfin, il a développé le programme ETAPE, programme novateur inspiré de l'éducation thérapeutique pour les entourages de consommateurs.

Simon DENIEL



Simon DENIEL est psychologue spécialisé en neuropsychologie et doctorant en psychologie à l'Université de Caen Normandie (Laboratoire de Psychologie Caen Normandie, LPCN – EA 7452). Il s'intéresse à la neuropsychologie des addictions à travers son projet de thèse NeuroAddiCT (Neuropsychologie des Addictions en Communautés Thérapeutiques) et particulièrement à un dispositif de soin résidentiel : les Communautés Thérapeutiques (CT). NeuroAddiCT est un protocole de recherche interventionnel mis en place dans trois CT spécialisées en addictologie (CT d'Aubervilliers – 93 | CT du Fleuve – Barsac, 33 | CT de la Sauvegarde du Nord – Le Cateau-Cambrésis, 59), en collaboration avec la Fédération Addiction. Un des objectifs du projet est d'évaluer, pour la première fois en CT, l'efficacité de l'approche neuropsychologique (alliant évaluation et remédiation cognitive) sur le taux de rechute et l'insertion sociale et professionnelle des résidents 6 mois après leur sortie de l'établissement.

Alain DERVAUX



Alain Dervaux est professeur de psychiatrie au CHU d'Amiens. Il est chercheur dans le Groupe de Recherche sur l'Alcool et les Pharmaco- dépendances (GRAP, Unité INSERM 1247) à Amiens (Pr. M. Naassila) et chercheur associé au Centre de Psychiatrie et Neurosciences (CPN), Unité INSERM U-1266, Laboratoire de Physiopathologie des Maladies Psychiatriques (Pr. MO Krebs), à l'Université Paris Descartes. Il travaille depuis une vingtaine d'années sur les comorbidités addictions/ troubles psychiatriques et a publié de très nombreux articles sur le sujet. Il est rédacteur en chef adjoint du *Courier des Addictions*, Associate Editor de *Frontiers in Psychiatry*, membre du comité de rédaction de *Perspectives Psychiatriques* et du Site Internet du Congrès Français de Psychiatrie.

François DESTOMBE



Enseignant à l'Institut d'Etudes Politiques de Lille, fondateur de Kb+

François est un créateur passionné par la recherche de solutions dans le domaine de la réduction des risques (RdR), en particulier ceux liés à la consommation de substances psychoactives inhalées. En collaboration avec les usagers, il recherche la manière de concilier sécurité d'usage, santé, économie, écologie et insertion des plus fragiles tout en respectant son ancrage lillois. Il anime pour cela un réseau informel de professionnels de l'addictologie, d'industriels et d'universitaires; les échanges avec les usagers valident les solutions développées, qui sont mises en œuvre par Kb+, l'entreprise d'insertion créée dans cet esprit.

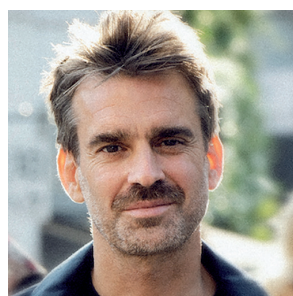
François enseigne à l'IEP de Lille (SciencesPo) et siège au tribunal pour enfants de Lille.

Hélène DONNADIEU RIGOLE



Hélène Donnadiou-Rigole est hépatologue et addictologue. Elle dirige le Département d'addictologie du CHRU de Montpellier. Ce département est composé d'un service d'addictologie (sevrages simples et complexes) et de gestion des complications somatiques des addictions, d'une hospitalisation de jour d'addictologie, d'une équipe de liaison et d'un CSAPA. Au quotidien, ses consultations s'intéressent plus spécifiquement aux jeunes consommateurs et au Chemsex. Elle est responsable SIDE-S de l'enseignement d'addictologie à la faculté de Médecine de Montpellier-Nîmes. Ses travaux cliniques s'intéressent plus particulièrement aux complications somatiques associées aux addictions, telles que les hépatites virales chez les usagers de drogues et la gestion addictologique des patients transplantés du foie. Elle effectue des travaux de recherche sur les mécanismes inflammatoires liés à la consommation d'alcool dans l'équipe INSERM U1183.

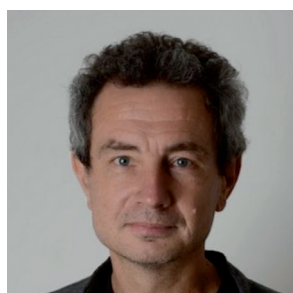
David ERRITZOE



David Erritzoe is Clinical Senior Lecturer and Consultant Psychiatrist at Imperial College London and in CNWL Mental Health NHS Foundation Trust. David conducts psychopharmacological research, using brain-imaging techniques such as PET and MRI. He was trained in PET imaging at Columbia University in New York and later undertook a PhD at University Hospital Rigshospitalet in Copenhagen. Since 2009 he has been involved in post-doc imaging research in the neurobiology of addictions and major depression at Imperial.

As clinical director in the Centre for Psychedelic Research, he investigates mechanisms and therapeutic potential of MDMA, ketamine and classic psychedelics [trials in depression, ocd, anorexia nervosa], and in early 2021 David set up a new NHS-based psychopharmacology & psychedelic research clinic at St Charles Hospital in London, named the CIPPRes Clinic.

Bruno FALISSARD



Après des études à l'école Polytechnique, Bruno Falissard a poursuivi des études médicales et s'est spécialisé en pédopsychiatrie en 1991. Il a été chef de clinique en pédopsychiatrie en 1996-97, maître de conférences en biostatistique à la faculté de médecine Paris-Sud en 1997-2002 puis professeur en 2002 dans la même faculté. Il est responsable du master de santé publique de la faculté de médecine Paris-Sud et directeur du CESP (centre de recherche en épidémiologie et santé des populations). Ses activités de recherche portent sur la méthodologie et l'épidémiologie de la recherche en psychiatrie. En 2015 il a été élu président de la IACAPAP (International association of child and adolescent psychiatry and allied professions, fin du mandat en 2018) et membre de l'Académie Nationale de Médecine (en France). En 2019 il a reçu le prix international de l'AACAP (American Academy of Child and Adolescent Psychiatry).

Daniel FEINGOLD



Dr. Feingold is a clinical-rehabilitation psychologist and a senior lecturer at the department of psychology, Ariel University, Israel. His main area of interest as a scientist-practitioner is the psychological aspects of substance use and addiction, particularly among cannabis and alcohol users.

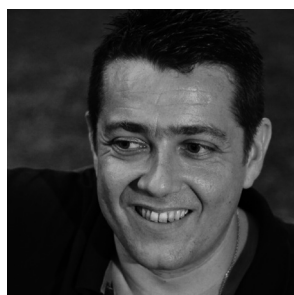
Jérôme FOUCAUD



Jérôme Foucaud est titulaire d'un doc-torat en sciences humaines. Il a débu-té sa carrière dans le champ de la san-té et de la prévention en tant que chargé d'expertise scientifique à l'Institut National de Prévention et d'Education pour la Santé (Santé Pu-blique France) ou il a piloté de nom-breux projets d'envergure internatio-nal. Il a rejoint ensuite l'assurance Ma-ladie en tant que directeur de la Pré-vention puis directeur de l'offre de service ou il a dirigé pendant plus de cinq ans les cinq services de presta-tions : maladie, vieillesse, la relation assurés, action sanitaire et sociale et prévention. Depuis plus de 3 ans il est chef du département recherche en sciences humaines et sociales, épidé-miologie et santé publique à l'Institut national du cancer. Dans cette Agence natio-nale d'expertise sanitaire et scientifique dédié à la lutte contre le cancer, il est chargé de développer la recherche et de diriger des études sur le cancer dans les sciences humaines et sociales. Auteur d'une cinquantaine de publications scientifiques et profes-sionnels, il est également chercheur

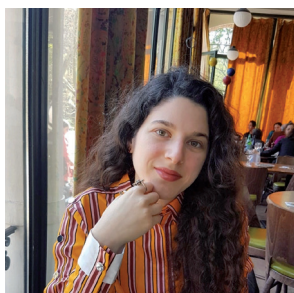
associé à Université Sorbonne Paris Nord, dans le laboratoire Édu-cations et Pratiques de Santé (UR 3412). En parallèle de ces activités, il enseigne les sciences humaines et les préven-tions dans différentes universités en France.

Nicolas FRANCHITTO



Professeur d'Addictologie au CHU de Toulouse, il a créé le service Hospitalo-universitaire d'Addictologie. Il a su rassembler toutes les équipes médicales du CHU qui étaient impliquées dans la prise en charge des patients addicts au sein d'une Fédération Universitaire de laquelle il est le coordinateur universitaire. Médecin légiste de formation, il s'intéresse spécifiquement aux morts subites d'origines toxiques. Membre du groupe « Toxicovigilance des médicaments » au sein de l'ANSM, il est le coordonnateur national des intoxications médicamenteuses volontaires par le baclofène chez le patient alcoolo-dépendant.

Yasmina FREM



Yasmina Frem est psychologue diplômée de Londres, formée au Thérapies Cognitives et Comportementales (TCC) à l'association française de thérapie cognitive comportementale de Paris (AFTCC). Elle a travaillé sur les comorbidités psychiatriques chez les usagers de substances, au sein du département d'addictologie du Kings Collège de Londres, et notamment sur les différences entre hommes et femmes dans cette population.

Elle a exercée au sein de l'APHP et occupe actuellement un poste au Centre Hospitalier des Quatre Villes (CH4V) de Sèvres en Hôpital de jour d'addictologie, et en libéral sur Paris pour des suivis en TCC. Elle a participé à la mise en place d'un HDJA virtuel au CH4V de Sèvres pendant la période du Covid et a été investigatrice principale sur l'étude de l'impact d'un tel dispositif.

Michael FROST



Dr. Michael Frost is an internationally recognized specialist in treatment of addictive diseases and is board certified in both Addiction Medicine and Internal Medicine. He is a fellow of both The American College of Physicians and The American Society of Addiction Medicine and is a member of the Canadian Society of Addiction Medicine. He has been a medical director for several addiction treatment facilities. He currently serves as Chief Medical Officer for Longbridge Health Solutions is also President and Medical Director of The Frost Medical Group. Dr. Frost is also heavily involved in new treatment development and clinical research, and consults with numerous companies regarding clinical development and healthcare policy. He is widely published and his work has been presented across the United States, Canada, and Europe.

Raphaël GAILLARD



Professeur de psychiatrie, chef de pôle à Sainte Anne, chercheur en neurosciences cognitives Normalien et médecin, Raphaël Gaillard est professeur de psychiatrie à l'Université Paris Descartes et chef de pôle à Sainte Anne, pôle comprenant 5 services dont un service d'addictologie. En 2011, il a rendu à la Ministre de l'Enseignement Supérieur et de la Recherche un rapport sur l'évolution des statuts hospitalo-universitaires. Il est membre du directoire du Centre Hospitalier Sainte Anne et du directoire de la Communauté Hospitalière de Territoire pour la Psychiatrie Parisienne. Après une thèse de sciences sur les bases cérébrales de la conscience et un post-doctorat à l'université de Cambridge, il anime à l'Inserm des recherches visant à mieux comprendre l'émergence des idées délirantes et leur fixité ainsi qu'à l'institut Pasteur des recherches concernant les mécanismes inflammatoires et infectieux liés aux pathologies cérébrales.

Daniel GARCIA-FUENTES



« I'm Daniel Garcia-Fuentes, i studied Medicine at Facultat de Medicina de la Universitat Autònoma de Barcelona (UAB) in H. Vall d'Hebrón from 2007 to 2013. I made one year of studies at Università degli Studi di Firenze (Italia) in an Erasmus programme. I made specialization in psychiatry at Hospital de Mataró, with specific formation in Dual Pathology and Drug-dependance in Hospital de la Santa Creu i Sant Pau, in the hospitalization area. Later i worked on Dual Pathology hospitalization at Hospital del Mar for a year. Now i'm in Hospital de Mataró managing hospitalized patients with Dual Pathology and the inter-consult of drug-dependance. I make the Drug-dependance Master in the Universitat de Barcelona, at this time in the 2nd year. »

Orane GAUMONT



Psychologue clinicienne, Orane GAUMONT est titulaire du Master Psychologie Clinique et Psychopathologie Intégrative de l'Université de Paris. Durant sa formation, elle s'est spécialisée dans le domaine de l'addictologie. Elle a réalisé son stage de fin d'études au sein de l'Unité d'Addictologie de l'hôpital Corentin-Celton (Issy-les-Moulineaux), où elle a mené une recherche sur l'addiction à l'alcool, le trouble de la personnalité borderline, l'intolérance à l'incertitude et la dissociation. Formée à l'Entretien Motivationnel et au programme de Mindfulness-Based Relapse Prevention, elle est investigatrice dans un protocole de recherche sur l'efficacité de la MBRP dans le trouble de l'usage de l'alcool depuis septembre 2021, notamment à l'hôpital Corentin-Celton.

Ashley GEARHARDT



Dr. Ashley Gearhardt is an Associate Professor of Psychology in the Clinical Science area at the University of Michigan. She received her Ph.D. in clinical psychology at Yale University with training on the underpinnings of both excess food and alcohol consumption. Dr. Gearhardt currently investigates the contribution of reward dysfunction (e.g., craving, liking) to eating-related problems across the lifespan. She uses a multi-method approach to explore the neurobiological, psychological, and behavioral factors that contribute to problematic eating behavior. Dr. Gearhardt also investigates the role of addictive processes in compulsive overeating and is the Director of the Food Addiction Science and Treatment Laboratory. Her research has received funding from the National Institute of Health and the American Heart Association. She has published over 100 peer-reviewed articles and her research has been featured on media outlets including the New York Times, ABC News, the Today Show, and Time Magazine. Website: <https://fastlab.psych.isa.umich.edu/>

Pierre Alexis GEOFFROY



MD, PhD (Paris). Maître de Conférences des Universités-Praticien Hospitalier (MCU-PH) à l'Université de Paris et à l'Assistance Publique Hôpitaux de Paris (AP-HP) au sein de l'hôpital Bichat – Claude-Bernard dans le département de psychiatrie et d'addictologie du Pr Lejoyeux. Docteur en Neurosciences, dans l'Unité Inserm U1141 équipe NeoPhen, avec un axe de recherche porté sur les biomarqueurs du sommeil et des rythmes biologiques dans les troubles de l'humeur et addictions. Co-Directeur du GDR CNRS Sommeil et responsable de l'axe Psychiatrie. Fondateur et président d'honneur de l'Association pour l'Enseignement de la Sémiologie Psychiatrique (AESP). Membre du comité d'administration de l'Association Française de Psychiatrie Biologique et de Neuropsychopharmacologie (AFPBN), coordination de la section Sommeil et Psychiatrie (SoPsy), et membre du comité scientifique de la Société Française de Recherche et Médecine du Sommeil (SFRMS). Membre élu du Collège National Universitaire de Psychiatrie (CNUP).

Colette GERBAUD



Addictologue
Praticien hospitalier
CHU de Nice

Gail GILCHRIST



Gail Gilchrist is a mixed-methods researcher with over 25 years addiction research experience in the UK, Europe and Australia. She is a Professor in Addictions Healthcare Research at the National Addiction Centre, King's College London. Her research focuses on substance use and its relationship with mental health, domestic violence and blood borne viruses; and developing and testing interventions to address these co-occurring issues. Gail currently leads an NIHR programme grant on developing and testing an intervention to reduce intimate partner abuse by men in substance use treatment. <https://www.kcl.ac.uk/research/advance>

Romain GOMET



Romain Gomet is an addictologist practicing in the addictology department of the Albert Chenevier hospital within the GHU Henri Mondor. He is responsible for the addiction outpatient hospital for consolidation of abstinence and risk reduction which takes care of patients mainly with substance dependence.

He teaches addictology to students of the UPEC-Paris XII faculty (faculty of medicine and law) and for several specialized training (FMC, IPA, DU, etc.). He is deputy secretary general of the APHP college of addictology and addictology coordinator of an association of young psychiatrists and addictologists (AJPJA).

He is trained in CBT, is particularly interested in risk reduction strategies and is the author of « Je maitrise ma consommation d'alcool » for Ellipses editions. He coordinates various clinical research in his unit and is particularly interested in new technologies as virtual reality.

Jorge GONZALEZ



Dr Jorge González Espinoza.

M.D., Psychiatrist. Universidad de Chile.

Magister public health. Universidad de Chile.

Ex past chair of dual disorder pathology service . El Peral Hospital. Chile.

Forensic expert. Justice ministry, Chile.

President of the Chilean Society of Dual Pathology.

Member of SEPD.

Member of WADD.

Philip GORWOOD



Prof. Gorwood studied medicine from 1982-1988, and specialised in psychiatry in 1988. He is currently full Professor of Psychiatry at GHU Paris Psychiatrie et Neurosciences, in Sainte-Anne Hospital and Head of the CMME department [60 beds], teaching at the University of Paris. He is also Head of one team research at INSERM (the French national institution for medical research), unit 1266-IPNP (Institute of Psychiatry and Neuroscience of Paris) devoted to the genetic vulnerability of psychiatric and addictive disorders. Prof. Gorwood has published over 280 scientific articles (h-index=45) and has been quoted as the presently “most frequently quoted French psychiatrist” (Ioannidis et al., 2019). He has served on 16 editorial boards for journals in psychiatry, neuroscience and genetics, and was editor-in-chief of the journal European Psychiatry (IF=3.9), from 2005 to 2017. He is the president (2019-2021) of the European Psychiatric Association (EPA). In 1992, Prof. Gorwood received the Lilly ‘First Communication’ award and later in 1997, the French Association for Biological Psychiatry ‘Best Communication of the Year’

award. In 1999, he received the Association of European Psychiatry ‘Young Researcher’ award; in 2000 the French National Academy of Medicine for the best research on addiction, and in 2016 the FONDAMENTAL award as the best researcher of the year in psychiatry.

Vincent GOUTTEBARGE



Prof. Vincent Gouttebarga is a former professional footballer who played 14 seasons in France and The Netherlands (232 games; twice ACLR; twice concussion). He is Extraordinary Professor at the Section Sports Medicine of the University of Pretoria but based at the Orthopaedic Surgery department of the Amsterdam University Medical Centers. He is also working as Chief Medical Officer at FIFPRO (Football Players Worldwide). Prof. Gouttebarga's work focusses on a wide range of sports medicine domains being relevant in professional sports (emphasis on football), striving to protect and promote the physical, mental and social health of active and former professional athletes. He is Chair of the International Olympic Committee (IOC) Mental Health Working Group, co-Director of the IOC Programs on Mental Health in Elite Sport, member of the Concussion Expert Group of the International Football Association Board (The IFAB), and member of the Medical Expert Group of the French Professional Football League (LFP). Prof. Gouttebarga is also member of the Editorial Board

of the South African Journal of Sports Medicine and Injury Epidemiology.

Marie GRALL-BRONNEC



Marie Grall-Bronnec est psychiatre-addictologue.

Elle est praticien hospitalier dans le service universitaire d'Addictologie et de Psychiatrie de Liaison du CHU de Nantes et Professeur d'Addictologie à la faculté de Médecine de Nantes.

Elle est membre titulaire de l'équipe SPHERE depuis 2009 (d'abord au sein de l'EA 4275, qui s'est transformée en UMR 1246). Ses travaux de recherche portent sur l'évaluation des sujets addicts et du risque addictif, l'innovation thérapeutique pour les sujets addicts, la prévention des risques liés aux addictions. Elle s'intéresse également au rétablissement en santé mentale.

Elle a intégré un groupe de travail de l'OMS portant sur le Gaming Disorder et a mené pour cette instance un field testing en France concernant la catégorie des troubles addictifs de la prochaine version de la Classification Internationale des Maladies.

Rita HADDAD



Rita El Haddad, MPH, is a PhD student in the Population-based Epidemiological Cohorts Unit UMS11 at Inserm (the French Institute of Health and Medical Research), Villejuif, France and at Université de Versailles Saint-Quentin-en-Yvelines. She is currently working on addictive behaviors such as alcohol, tobacco and cannabis use and difficulties of job entry and return to work. She earned a Bachelor degree in Nutrition and Dietetics from Université Saint Joseph de Beyrouth in 2016. In 2018, she completed a master degree in Clinical Nutrition and Public Health at the Lebanese University and in 2020, a master degree in Epidemiology and Biostatistics at the Lebanese University in co-diplomation with Université Paris-Saclay.

Nadine HAMIEH



Nadine Hamieh, MPH, PhD (BS'12, MPH'14, PhD'20) is a postdoctoral research fellow in the Population-based Epidemiological Cohorts Unit at the French Institute of Health and Medical Research. She is currently working on difficult working conditions and their associations with addictive behaviors such as cannabis, tobacco, and alcohol use as well as sugar and fat consumption. In 2012, she earned her bachelor's degree in Environmental Health with a minor of Public Health from AUB. Afterwards, she completed her master's degree in Public Health with a concentration in Epidemiology and Biostatistics in 2014 from AUB. She worked as a research assistant at AUB and AUBMC for one year and a half and then she moved to Boston for three months to pursue her internship in cancer epidemiology at the Harvard T.H. Chan School of Public Health. Then, she pursued her PhD in Epidemiology and Biomedical Information Sciences at Sorbonne University in Paris which she completed in 2020.

Matthew HICKMAN



Prof Matt Hickman is Head of Population Health Sciences (PHS) and Deputy Head of Bristol Medical School, NIHR Senior Investigator, Honorary Public Health Consultant at Bristol City Council and Public Health England, and Honorary Professor at National Drug and Alcohol Research Centre UNSW Sydney. Professor Hickman is an internationally-recognised psychiatric epidemiologist and public health specialist working on addiction and infectious disease. He is Regional Editor of Addiction, on Executive Board of International Network on Hepatitis among Substance Users (INHSU), a Trustee on Society for Study of Addiction (SSA), and until recently on the Scientific Committee of European Monitoring Centre on Drugs and Drug Addiction.

Romain ICICK



Romain Icick est psychiatre titulaire du DESC d'addictologie, Docteur en Neurosciences. Il travaille au Département de Psychiatrie et de Médecine Addictologique au GHU APHP.Nord (Pr Frank Bellivier) en tant que consultant ambulatoire en addictologie et au centre expert des troubles bipolaires de la fondation fondaMental. Ses travaux de recherche sont conduits dans l'unité INSERM UMR-S1144 et à l'Institut Pasteur. Il étudie en priorité les comorbidités entre addiction et troubles psychiatriques (« double diagnostic / pathologie duelle ») au plan clinique et génétique, sur la base de consultations de recours dédiées au diagnostic de trouble de déficit attentionnel avec/sans hyperactivité (TDA/H) et du trouble bipolaire en contexte d'addictions. A ce titre, il est affilié à la fondation fondaMental, à la Coordination Nationale TDA/H (Etienne Kammerer) et au réseau ICASA (Arnt Schellenkens).

Louise-Adélaïde JAKUBIEC



Louise-Adélaïde JAKUBIEC, Praticien Hospitalier au Pôle Inter-Etablissement d'Addictologie du CH Charles Perrens et CHU de Bordeaux
Diplômes : Docteur en médecine, Master 2 neurosciences, DES de psychiatre et DESC addictologie

Jérôme JEANBLANC



Le Dr Jérôme Jeanblanc est chercheur au sein du Groupe de Recherche sur l'Alcool et les Pharmacodépéances – INSERM U1247 depuis 2010. Après un post-doctorat de 6 ans à UCSF (Laboratoire du Pr Dorit Ron) ayant pour objectif l'identification de la voie homéostatique du BDNF striatal comme voie de régulation de la consommation d'alcool, il a rejoint le laboratoire du Pr Naassila à Amiens. Aujourd'hui, son travail porte sur l'identification des bases neurobiologiques des troubles de la consommation d'alcool avec un intérêt particulier sur la perturbation du système dopaminergique dans différents modèles de binge drinking. Ses travaux s'intéressent également à la vulnérabilité individuelle d'une part aux troubles de la consommation d'alcool et aux traitements mais également dans le contexte de la comorbidité « schizophrénie – troubles de la consommation d'alcool ».

Guillermo Nicolas JEMAR



Specialist Physician in Psychiatry with Subspecialty in Neuropsychiatry and Cognitive Neurology - Legal and Forensic Psychiatrist
Master in Neuroscience
Head of Day of Emergency and Emergency Guard in Psychiatry of the Jose T. Borda Hospital, of the Autonomous City of Buenos Aires, Argentina
Expert Technical Consultant of the Public Prosecutor's Office of the Argentine Nation
Medical Director of TREMA Mental Health and Neurosciences
Professor at the University of Buenos Aires, the Barceló University, the Maimónides University and the Argentine Neuropsychiatric Association
International Fellow of the American Psychiatric Association (APA)
International Member of the European Psychiatric Association (EPA)

Active Partner WADD and SEPD / Founding Partner of the Argentine Society of Personality Disorders and Psychopathies SATP

Matthew JOHNSON



Matthew W. Johnson, Ph.D., is The Susan Hill Ward Endowed Professor of Psychedelics and Consciousness Research at Johns Hopkins.

Working with psychedelics for 17 years, he is one of the world's most widely published experts on psychedelics.

Matt published psychedelic safety guidelines in 2008, helping to resurrect psychedelic research. He developed the first research on psychedelic treatment of tobacco addiction and published initial result in 2014, and with colleagues he conducted the largest study of psilocybin in cancer distress (2016).

His 2018 psilocybin review recommended Schedule IV upon medical approval. Matt also conducts behavioral economic research on addiction and sexual risk.

He's been Interviewed by Anderson Cooper on 60 Minutes, the New York Times, the Washington Post, the Wall Street Journal, the BBC and was featured in Michael Pollan's book How to Change Your Mind.

Christopher JONES



Christopher Jones, PharmD, DrPH, MPH (CAPT U.S. Public Health Service), currently serves as the acting director of the National Center for Injury Prevention and Control. When not serving as the acting director, Dr. Jones is the deputy director of NCIPC. In this role, he is the primary scientific advisor to the NCIPC director and other senior staff on science issues in public health, clinical care implementation, epidemiology, biostatistics, economics, and behavioral science. In addition, he provides scientific leadership and drives NCIPC's strategic direction by overseeing the refinement of the scientific research agenda and the coordination on the NCIPC strategic priorities of drug overdose, suicide prevention, and adverse childhood experiences. As deputy director, he also oversees and enhances collaboration among NCIPC's Office of Science, Office of Informatics, Office of Strategy and Innovation, and Overdose Response Coordinating Unit. Prior to becoming deputy director, Dr. Jones served as associate director of the NCIPC Office of Strategy and Innovation.

In addition, he was detailed to the White House Office of National Drug Control Policy as the senior public health advisor, led the FDA's Drug Safety and Risk Communication team, and served on the Science Team in the CDC's Strategic National Stockpile.

Yifrah KAMINER



Dr. Kaminer main interest has been focusing on clinical research of the assessment, treatment and continuity of care of high-risk behaviors particularly substance use disorders (SUD) in youth. He has special interest in comorbid depressive disorders and suicidal behavior. He has been mentoring psychiatric residents at UConn and Yale on adolescent SUD.

Dr. Kaminer has received funding for research from NIAAA, NIDA, CSAT and the Donaghy Foundation in CT. He has been on the editorial board of several peer review journals and served as a guest editor of special Issues/Sections on adolescent substance abuse including: American Journal of Addictions (2006), Substance Abuse Journal (2008; 2014), The Child & Adolescent Psych Clinics of North America (2010); European Journal of Child & Adolescent Psychiatry (In Press).

Laurent KARILA



Le Professeur Laurent KARILA est psychiatre, spécialisé en addictologie (cocaïne, nouveaux produits de synthèse, sexualité et tout ce qui a attiré à ce que génère les écrans...). Il exerce à l'hôpital Universitaire Paul Brousse et à l'Université Paris Saclay. Affilié à l'Unité de Recherches PSYCOMADD, ses domaines de recherche sont centrés sur les neurosciences, notamment l'imagerie cérébrale en addictologie, les traitements pharmacologiques dans l'addiction à la cocaïne, les addictions comportementales. Responsable du Service Sanitaire à l'Université Paris Saclay, il enseigne également dans les premier, second et troisième cycle des études médicales. Laurent Karila est également conférencier et auteur d'articles et d'ouvrages scientifiques et grand public.

Mathieu LACAMBRE



Mathieu Lacambre est psychiatre hospitalier au CHU de Montpellier depuis 2004 ; il exerce la psychiatrie légale dans des espaces complexes aux interfaces Santé-justice (prison, unités spécialisées d'accueil et d'évaluation...) au sein de la Filière de Psychiatrie Légale qu'il coordonne. D'abord engagé auprès des victimes (consultation de demandeurs d'asiles victimes de tortures) il s'est tourné vers les auteurs afin de traiter les violences dès leurs origines. Responsable du diplôme universitaire de psychopathologie légale, chargé d'enseignements dans plusieurs Facultés (Montpellier, Toulouse, Paris, Strasbourg...), il est l'auteur de nombreux articles sur la violence et la dangerosité et a coordonné plusieurs ouvrages : Psychothérapie et éducation (Ed. Dunod, 2016), Sexualités et transgressions (Ed. Dunod, 2019), Les Violences Sexuelles : nouvelles expressions, nouvelles interventions (Lavoisier Médecine Sciences, 2019). Et parce qu'une prévention efficace est possible, avec son équipe il est à l'origine de la création d'une Boîte à Outil de prévention (BOAT) des

violences à caractère sexuel et sexiste, destinée à tous les intervenants auprès de mineurs âgé de 5 à 18 ans.

Laurence LALANNE



Psychiatre-Addictologue, MD, PhD, HDR.

Cheffe de service d'addictologie aux Hôpitaux Universitaires de Strasbourg.

En tant que professeur de psychiatrie et d'addictologie et cheffe du service d'addictologie aux Hôpitaux Universitaires de Strasbourg, je développe les offres de prise en charge en addictologie avec une spécificité dans la prise en charge des troubles neurocognitifs et des troubles de la régulation des émotions qui jouent un rôle très important dans la rechute des troubles addictifs. J'ai la responsabilité de nombreux enseignements en addictologie à la faculté de médecine (capacité, DIU, enseignements en médecine, pilote FST) et j'enseigne aussi en master de psychologie cognitive et en master neurosciences. Mon domaine de recherche en neurosciences porte sur les mécanismes cognitifs des troubles addictifs avec pour objectif de mieux comprendre les déterminants de la mise en place et de la persistance des troubles addictifs. Je développe aussi des approches translationnelles concernant l'addiction aux opiacés en lien avec la Professeure Brigitte Kieffer et le Docteur Emmanuel Darcq.

Laura LAMBERT



Laura Lambert is a PhD student in Neurosciences at the University of Bordeaux, France. She earned a Bachelor's degree in biology (2015) and graduated with a master's degree in neuroscience (2017), both with honors. Laura Lambert's research training curriculum is in human addiction research in the team of Marc Auriacombe at University of Bordeaux (SANPSY CNRS USR 3413) where she acquired expertise in Addiction Severity Index (ASI) and Ecological Momentary Assessment (EMA). Her PhD thesis project, supervised by Dr. Fuschia Serre, examines how clinical insight level (recognition of one's addiction) could interfere with the etiological/prognostic role of craving on use and relapse. Laura Lambert is actively involved in scientific mediation with Bordeaux Neurosciences Association, the international festival Pint of Sciences, "Thèse et vous" podcast. In 2020, she won the People's Choice Award in the "Ma thèse en 180 secondes" competition at the University of Bordeaux final. She also received the ALBATROS

«Spécial Addictologue Junior» award in 2020 for her presentation at «The voice of addiction» session. Laura Lambert is funded by a grant from the Aquitaine Regional Council.

Sophie LECLERCQ



Sophie Leclercq obtained her PhD in biomedical sciences at the Catholic University of Louvain (UCLouvain, Brussels, Belgium) in 2014. Her thesis was dedicated to the investigation of the link between the intestinal microbiota, the leaky gut, the inflammatory response and the psychological symptoms associated with alcohol use disorders. She then moved to McMaster University (Hamilton, Canada) to study the effect of early life antibiotic and probiotic exposure on brain functions and behavior, in rodent models. She is now research associate at UCLouvain and is in charge of clinical and preclinical studies aiming at investigating the communication pathways underlying gut-brain interactions in alcohol use disorders. She is also Professor of nutrition in the faculty of motor sciences at Université Libre de Bruxelles.

Kun-Hua LEE



Current affiliation: Assistant Professor, Department of Educational Psychology and Counseling, National Tsing Hua University. (2018.8-)

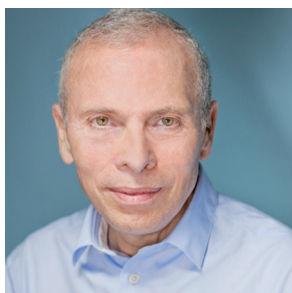
Education Background: Clinical Psychology PhD. Institute of Allied Health Science, College of Medicine, National Cheng Kung University

Professional Specialty: Clinical Psychology, Etiology and treatment of Addiction, Health and Stress, Mindfulness-based Treatment

Licensure and Certification: Licensed Clinical Psychologist, Taiwan (2002.9-present), Mindfulness-based Relapse Prevention Therapist (2009.10-present)

Professional and Club Membership: The Coordinator of Taiwan Scientific Committee, World Association on Dual Disorders. (2018.9 -current), Member, World Association on Dual Disorders, Member, Taiwan Association of Clinical Psychology, Taiwan.

Michel LEJOYEUX



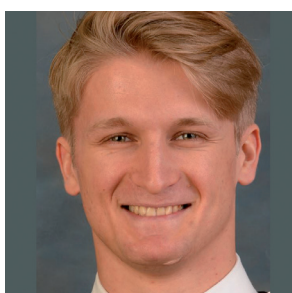
Professeur de psychiatrie et d'addictologie à l'université Paris Diderot

Responsable du département d'addictologie Bichat Beaujon (AP-HP)

Président d'honneur de la Société Française d'Alcoologie

Auteur d'un livre récent à l'intention des spécialistes et du grand public « Tout déprimé est un bien portant qui s'ignore » Editions Jean-Claude Lattès

Thomas LEHOUX



Thomas Lehoux est psychologue spécialisé en thérapies comportementales et cognitives, moniteur d'enseignement et doctorant en psychologie à l'Université de Strasbourg depuis 2021 (Laboratoire de Psychologie des Cognitions & Laboratoire ICube – Equipe IGG). Diplômé de l'Université de Montréal, il est également auteur de publications scientifiques illustrant l'apport des nouvelles technologies dans le développement des prises en charge clinique des troubles psychiatriques. Au travers de son projet de thèse, financé par l'Institut National du Cancer et l'Institut de Recherche en Santé Publique (SPADOC 21-009), Thomas Lehoux s'intéresse plus particulièrement à l'usage de la réalité virtuelle en thérapie comportementale et cognitive du trouble d'usage de cocaïne.

Shaul LEV-RAN



Shaul Lev-Ran, MD is Professor of Psychiatry at the Sackler Faculty of Medicine at Tel Aviv University and Co-Founder of the Israel Center on Addiction.

Prof. Lev-Ran completed his M.D. at Tel Aviv University, his residency in psychiatry at the Shalvata Mental Health Center, and his fellowship in Addiction Psychiatry at the Centre for Addiction and Mental Health at the University of Toronto. He is a graduate of the Psychoanalytic Psychotherapy program at Tel Aviv University, holds an MHA degree from the University of Haifa, and is a member of the Motivational Interviewing International Network of Trainers (MINT). Prof. Lev-Ran has previously held several key positions in the field of mental health and addiction treatment in Israel, including Chair of the Israeli Society of Addiction Medicine (ILSAM) and member of the National Council on Mental Health. Prof. Lev-Ran's research focuses on the association between cannabis use and psychiatric disorders, as well as addiction among chronic pain patients. He is a popular spokesperson in the

Israeli media promoting nationwide effective addiction treatment.

Pierre-Michel LLORCA



Pr Llorca is Professor of Psychiatry at the University Clermont Auvergne (UCA) in Clermont-Ferrand, France. He is at the head of the Psychiatric department in the University Medical Center in Clermont-Ferrand. He is Project manager in the Health Domain at UCA. He is the Past President of the Ethics Committee of Auvergne and serves on various national committees. He is member of the French Society for Biological Psychiatry and Neuropsychopharmacology, of the European Psychiatric Association and of the World Federation for Biological Psychiatry. He is the coordinator of the French Network of Schizophrenia, Bipolar, Asperger and Resistant Depression Expert Centers and member of the executive committee of the French Foundation for Mental Health "FondaMental". Pr Llorca attended medical school at the University Medical Center in Clermont-Ferrand. He did his residency training in psychiatry at the University Medical Center in Marseilles and a fellowship in Neuro-psychopharmacology at the Robert-Giffard Hospital in Quebec, Canada. He obtained a PhD in Pharmacology at the

University of Auvergne. His research interests include pharmacodynamic and pharmacokinetic approaches of psychotropics - and more specifically antipsychotics and antidepressants - determinants of adherence to treatment.

Amandine LUQUIENS



Amandine Luquiens is a psychiatrist and Addiction Specialist, hospital practitioner in the Addiction Department of Pr Perney at the Nîmes University Hospital since 2019, after having worked 8 years at the APHP (University Hospitals of Paris Sud). She holds a Master's degree in Public Health (University Paris Sud), a PhD in Sciences, specializing in cognitive sciences at the University Paris Descartes (2015), and an HDR (2017, University Paris Sud, «Conceiving patient-centered addictology in addictions to a licit product: from the objective of care to empowering strategies»). Her research work focuses on subjective measures in addiction, and in particular on quality of life, early detection and innovative non-drug interventions, particularly online, in the fields of gambling, gaming and alcohol use disorders. She also works on account-based gambling data. Her work aims to develop the patient-centered approach and to reduce treatment gap in addiction by adapting the care offer to the needs of people with addiction. She is a member of the CESP-Inserm U1018. She is an administrator

of the French Society of Alcoholology since 2017, and is vice-president of the National University College of Addictology Teachers (CUNEA), of the National Network for the Prevention and Care of Pathological Gambling (RNPSJP) and of the Association for the Dissemination of Mindfulness-Based Therapies in Addiction (APCA-MBRP). She coordinates the University Diploma "Pathologie duelle: la comorbidité psychiatrique et addictologique » at the University of Montpellier.

Angéline MAILLARD



Maillard est psychologue spécialisée en neuropsychologie, et actuellement en post-doctorat au sein du département de psychiatrie et de médecine addictologique de l'hôpital Fernand Widal (Assistance Publique – Hôpitaux de Paris). Elle est membre de l'unité Inserm UMR-S 1144 dans l'équipe 1 « Biomarqueurs de Rechute et Réponse Thérapeutique dans les Pathologies Neuropsychiatriques ». Elle s'intéresse aux atteintes cérébrales et cognitives liées aux troubles de l'usage d'alcool et de cocaïne, et à leur implication dans le phénomène de rechute et dans la prise en charge des patients.

Rafael MALDONADO



Researcher in Pharmacology for 11 years in France and the USA. From year 2000, I am a Full Professor of Pharmacology at the University Pompeu Fabra (Barcelona, Spain), where I founded the Laboratory of Neuropharmacology and currently direct its 35 members. My research focuses on the neurochemical basis of drug addiction, affective, pain, and eating disorders, with a particular focus on the development of novel behavioral models. I published over 300 scientific articles in prestigious international journals (Nature, Science, Nat Genet, Nat Neurosci, Nat Commun, Nat Rev Neurosci, Mol Psychiat, Biol Psychiat, among others) and for 30 years, I was Principal Investigator of research grants funded by the leading Spanish, European, and USA agencies. I act as an external advisor for several health and scientific organizations and member of the Editorial Board of several prestigious scientific journals. I am also a collaborator of public authorities and private companies in developing research policy and pharmaceuticals for novel treatments for

drug addiction, pain, cognitive deficits, and other neurological disorders.

Cyril MANZANERA



Après des études médicales menées à Montpellier puis une spécialisation en psychiatrie à Poitiers, il est nommé praticien hospitalier en 2002. Il intègre l'équipe du CRIAVS de Montpellier et le dispositif de soins psychiatriques de l'unité sanitaire de Villeneuve-lès-Maguelone en 2011. Titulaire d'un master 2 de droit privé et sciences criminelles, il soutient et obtient sa thèse de droit privé et sciences criminelles en 2014 à la faculté de droit et de sciences criminelles de Poitiers. Membre de la section de psychiatrie légale de l'AFPN depuis sa création, il garde un intérêt fort pour la psychiatrie légale, ses différents champs d'application, ses enjeux sanitaire, judiciaires et sociétaux.

José MARTÍNEZ-RAGA



José Martínez Raga is Head of the Psychiatry Department at the University Hospital Doctor Peset, in Valencia (Spain), and Associate Professor at the University of Valencia Medical School. After completing his Medical Degree, he completed an M.Sc. Degree in Drug Addiction his Ph.D. at the University of Valencia, with a study previously conducted as a Research Fellow in Psychiatry at McLean Hospital and Harvard Medical School (Massachusetts, USA). He completed his specialist psychiatric training at the Maudsley and Royal Bethlem Hospitals in London (UK). Since September 2000 he has been working as a Psychiatrist within the Spanish National Health Service, since 2012 at the Psychiatry Department of the University Hospital Doctor Peset. He has participated in various research projects and co-authored in over 100 peer-reviewed national and international scientific journals, as well as in over 40 book chapters and 12 books and monographs. In addition, he has presented more than 100 invited presentations and to national

or international psychiatry conferences or meetings, and as invited lecturer in national and international CME courses. He is currently vice-President of the Sociedad Española de Patología Dual (Spanish Society of Dual Disorders or SEPD).

Jean-Luc MARTINOT



Jean-Luc Martinot is a Director of Research at INSERM, and a child and adolescent psychiatrist. He is a pioneer in brain imaging research in psychiatry in France and Europe, co-authored >150 articles in high impact journals. He leads the lab INSERM U1299 «Developmental trajectories & Psychiatry» within the Mathematics center at Ecole Normale Supérieure Paris - Saclay. His research highlights the vulnerability of neuro-affective systems in early adolescence, and fueled the rationale to stratify the age of protection in a law adopted by the French parliament. His neuroimaging research further revealed the brain alterations in depressive or anxious states, in schizophrenia, and the early brain damage of addictions. He has also investigated psychopharmacological or brain stimulation treatments on their clinical and brain targets. He coordinates a translational ERANET-Neuron consortium in the EU and Canada on new neurocognitive targets for early intervention in adolescents. Recently, his research has suggested protective factors.

Sibylle MAURIES



Sibylle Mauriès est psychiatre, addictologue, assistante spécialiste à l'hôpital Bichat, dans le service de psychiatrie-addictologie du Pr Lejoyeux. Elle a travaillé au cours de son année de Master 2, en neurosciences, sur les intrications entre tabagisme et sommeil.

Fadi MEROUEH



Dr. Fadi Meroueh is currently a Hospital Practitioner, addictologist and Head of the Health Unit of the Villeneuve-les-Maguelone prison, which is a part of Montpellier University Hospital. In 2018 he was elected president of Health Without Barriers (HWB), the European Federation for Prison Health, which represents prison health professionals, supports evidence-based healthcare practices and advocates for prisoners' rights to health. The Health Unit in Prison is administrated by the French Ministry of Health. This reform came with the official duty of providing healthcare services in prison equal to those provided outside. Special attention is paid to the addiction and management of infectious diseases (HCV) among prisoners. An author and researcher with several peer-reviewed articles to his credit, and 23 years working on prevention and treatment programmes inside prisons in Europe, North Africa and West Africa, Meroueh is a member of numerous prison health expert panels including those convened by the World Health Organization, EMCDDA, ECDC, UNODC... Dr.

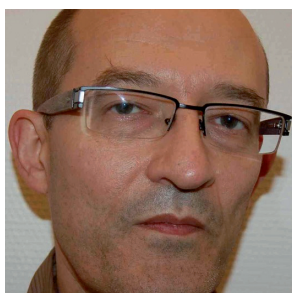
Meroueh also has a weekly activity in an associative addiction center called "Arc-en-Ciel" in Montpellier.

Sophie METIVIER



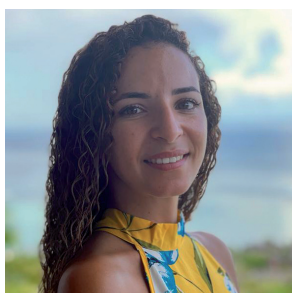
Hépatogastro-Entérologue
Centre expert hépatites virales
CHU de Toulouse

Laurent MICHEL



Laurent MICHEL est médecin, spécialiste en psychiatrie et en médecine des addictions, titulaire d'une thèse de Sciences. Il dirige actuellement le Centre Pierre Nicole qui est un Centre de Soins, d'Accompagnement et de Prévention en Addictologie (CSAPA) de la Croix-Rouge française situé à Paris (<http://www.pierre-nicole.com/>). Il est également chercheur au Centre de Recherche en Épidémiologie et Santé des Populations (CESP/Inserm UMRS 1018). Il participe ou coordonne des travaux portant sur la réduction des risques et l'accès aux soins chez les personnes présentant des conduites addictives, en particulier en prison, l'amélioration de l'accès aux traitements agonistes opioïdes, la prévention et le traitement des comorbidités psychiatriques et addictives chez les sujets atteints par le VIH/VHC. Il est aussi impliqué dans différents projets au Vietnam portant sur la réduction des risques et l'accès aux soins, notamment en santé mentale, pour les sujets injecteurs de drogues ou usagers de méthamphétamines.

Izza MOUNIR



Docteur Izza MOUNIR est médecin interne de psychiatrie et d'addictologie et exerce ses fonctions hospitalières au sein du Centre Hospitalier Universitaire de Nice.

Thérapeute en thérapie cognitive et comportementale (TCC) et formée à la thérapie d'acceptation de l'engagement (ACT); Mindfulness.

Membre de la World Association on Dual Disorders (WADD) et de l'association nationale des internes de psychiatrie en France (AFFEP).

Mickaël NAASSILA



Mickaël Naassila, Professeur de physiologie à l'université de Picardie Jules Verne et directeur de l'unité INSERM U1247 (Groupe de Recherche sur l'Alcool & les Pharmacodépendances - GRAP - <https://grap.u-picardie.fr>). Président de la Société Française d'alcoologie SFA - <https://www.sfalcoologie.asso.fr> et vice-président de la Fédération Française d'Addictologie FFA - <http://www.addictologie.org>. Président du Meeting 2019 de la Société Européenne de Recherche Biomédicale sur l'Alcoolisme ESBRA (<https://www.esbra.com>) (meeting ESBRA 2019 à Lille Grand Palais 21-24 Septembre - <http://esbra2019.org>). Responsable du DU d'addictologie d'Amiens. Partenaire du Projet PsiAlc ANR ERA-NET Neuron 2019-2022 - <https://www.psialc.org>, Preclinical Phase II Testing of Psilocybin in Alcohol Addiction and Epigenetic and Neuroimaging Studies on the Mode of Action.

Nidal NABHAN ABOU



Le Dr Nidal Nabhan Abou est psychiatre des hôpitaux exerçant au centre hospitalier Guillaume Rénier de Rennes. Elle est experte auprès de la cour d'appel de Rennes. Elle co-préside la section psychiatrie légale de l'AFPBN.

Surnommée la 'wonder woman' de la psychiatrie légale, elle sensibilise sans relâche la discipline sur cette exercice.

Elle enseigne dans plusieurs universités sur le territoire. Très active sur les réseaux sociaux, elle est engagée pour les droits des patients et la défense de l'éthique de soins.

Philippe NUBUKPO



Professeur des Universités-Praticien des hôpitaux, Psychiatre, Addictologue, Chef du Service Hospitalo Universitaire d'Addictologie en Limousin (SUAL) et responsable de la Fédération Recherche au Centre Hospitalier Esquirol (Limoges, France). Chercheur au sein de l'UMR/INSERM1094-Neuroépidémiologie Tropicale (Faculté de Médecine de Limoges), ses travaux portent sur l'épidémiologie psychiatrique comparée, le stigma et les représentations socioculturelles des maladies mentales, les liens entre addictions et vieillissement et les facteurs pronostiques du sevrage à l'alcool. Il est psychiatre expert judiciaire et Psychothérapeute en Training Autogène Progressif (TAP), membre de la Société Française de Relaxation Psychothérapique, membre de la Fondation Addiction et de la Société Française d'Alcoologie.

Mehdi PAES



Dr. Mehdi Paes, former Professor and Chairman of the Neuropsychiatric Department of the Rabat Medical School, University Mohamed V Rabat-Morocco, has contributed in an important way to the development of Psychiatry in Morocco and has been a founding member and President for years of the Moroccan Psychiatric Society. Pioneer in drug assessment and prevention in the Maghreb countries he has collaborated in the field of drug prevention with numerous national and international official and non-governmental organizations. (WHO, UNODC, Mentor Foundation, ICAA...) Currently he is a Senior Consultant mainly in liberal practice, he participates in the University training of specialists in addiction in various Moroccan Medical Schools. He is Vice-President of the Moroccan Private Psychiatrists Association, Honorary President of the Moroccan Society of Addictology and member of the WPA Section of Dual Disorders.

Lucie PENNEL



Lucie Pennel est médecin addictologue psychiatre, légiste, adjoint dans le service de Pharmacologie Addictologie - CSAPA du CHU Grenoble Alpes. Elle a participé à des études multicentriques, à la rédaction d'articles et de chapitres d'ouvrages, à des groupes de travail sur le développement du dispositif « Un Chez-soi d'abord » à Grenoble et sur les recommandations HAS de bonne pratique concernant la prévention et la réduction des risques et des dommages en CSAPA. Elle est coordinatrice des programmes ETAPE Patient et Entourage (programmes inspirés des recommandations pour l'éducation thérapeutique et de l'entretien motivationnel, destinés aux entourages et patients souffrant d'addiction). Elle a reçu pour le programme ETAPE Entourage le 1er prix des posters du Congrès Français de Psychiatrie en 2017 et a été Lauréat du prix Galien en 2019.

Elle participe à de nombreux enseignements universitaires et formations en Addictologie, ainsi qu'en communication et compétences psychosociales. Elle a animé et coordonné l'UE Santé et Relations

Soignants Soignés intégrant 6 filières en santé, développée en 2019 à l'Université Grenoble Alpes, qui est un programme novateur de prévention des risques psychosociaux spécifiques aux professionnels de la santé en formation.

Margaux POIREAU



Margaux Poireau est doctorante en 2^e année de neurosciences à l'école doctorale MTCI (Médicaments Toxicologie Chimie Imagerie), au sein de l'équipe INSERM URM-S 1144 (Optimisation Thérapeutique en Neuropsychopharmacologie) à l'hôpital Fernand Widal, Paris.

Son projet de thèse porte sur l'identification de biomarqueurs de rechute après un sevrage hospitalier en cocaïne.

Elle est également cheffe de projet pour la FHU NOR-SUD (Fédération Hospitalo-Universitaire Network Of Research in Substance Use Disorder).

Gilles PIALOUX



Gilles PIALOUX est médecin des Hôpitaux et Professeur de Maladies Infectieuses et Tropicales à SORBONNE UNIVERSITE. Il est Chef de service à l'Hôpital Tenon (AP-HP) de Paris depuis 2004. Il est impliqué dans la recherche anti-VIH, la co-infection VIH-VHC-VHB et les études de prévention et de RdR vis-à-vis du VIH. Il a contribué à plus de 340 publications scientifiques.

Il est rédacteur en chef de www.vih.org et de la revue Swaps. Par ailleurs, il est membre du CA de la Société Française de Lutte contre le Sida (SFLS).

Il vient de publier « Nous n'étions pas prêts : carnet de bord par temps de Coronavirus » aux Editions JCLATTES

Ludovic POLLI



Ludovic Polli is a psychiatrist and addictologist working at the Centre Psychothérapique of Nancy, France. He supervised an addictology day hospital unit. He is invested in teaching medical students at Lorraine University and through a YouTube channel called "Psycho'tips". He has a master's degree in cognitive and behavioral neurosciences from Sorbonne University and an inter-university diploma in sleep pathologies. His research domain concerns the new biomarker in addictology using the retina.

Yolaine RABAT



Doctorante en dernière année de thèse de Neurosciences à l'Institut des Neurosciences Cognitives et Intégratives d'Aquitaine (INICIA, Univ. Bordeaux), j'ai été initiée à la recherche fondamentale sur les addictions dans le cadre de mon Master en travaillant sur un modèle murin du sevrage à l'alcool et sur l'impact d'un traitement pharmacologique lors de celui-ci sur l'activité glucocorticoïde hippocampique et la mémoire. J'ai fait le choix de poursuivre en thèse chez l'homme et plus particulièrement sur la problématique des troubles psychiatriques (humeur, anxieux, addictions) chez les personnes victimes d'un Accident Vasculaire Cérébral (AVC). Parallèlement à la mise en place d'une étude interventionnelle sur la réduction des troubles de l'humeur post-AVC par un outil de e-santé (MotivPos-Dep), j'ai conduit une étude d'épidémiologie clinique sur la prévalence des comportements addictifs (alcool, tabac, cannabis et alimentation) chez des patients victimes d'un premier AVC, et l'impact de ces comportements sur le statut émotionnel à 3 mois post-AVC.

Sharon RABINOVITZ



Sharon Rabinovitz is an associate professor in the Faculty of Law School of Criminology at the University of Haifa, Israel. She is a licensed psychologist and a psychopharmacologist. Prof. Rabinovitz is the founder and chair of the Graduate Program in Crime & Addiction Studies, the director of the Unit for Excellence in Research & Study of Addiction (ERSA) at The Center for Rehabilitation Research and a board member of the Israeli Society of Criminology. She has been involved in psychosocial and psychopharmacological studies in the field of substance use disorder and non-substance related addictions, including the topic of co-morbidities and trauma. Her special research interest includes aspects of risk behaviors in special populations focusing on prevention, treatment and rehabilitation.

Hassan RAHIOUI



Le Dr Hassan RAHIOUI est psychiatre et addictologue.

Il est praticien hospitalier, chef de pôle, chef du service de santé mentale du 7ème arrondissement de Paris. Hôpital Henri Ey (Paris).

Il est également praticien attaché à l'hôpital Paul Brousse (Villejuif) service d'addictologie.

Il est par ailleurs, président de l'association française de thérapie interpersonnelle (www.aftip.fr).

Ses domaines de recherche sont notamment orientés vers la théorie de l'attachement et son application à la thérapie interpersonnelle - aussi bien en psychiatrie qu'en addictologie - et la psycho-addictologie.

Jürgen REHM



Senior Scientist, Institute for Mental Health Policy Research (IMHPR), Centre for Addiction and Mental Health (CAMH), Toronto, Canada / Prof. Dalla Lana School of Public Health and Institute of Health Policy, Management and Evaluation, University of Toronto (UofT), Canada / Prof. Dept. of Psychiatry, Faculty of Medicine, UofT, Canada / Senior Scientist, Campbell Family Mental Health Research Institute; Head, Ontario Data Laboratory, CAMH, Canada / Senior Scientist, PAHO/WHO Collaborating Centre for Mental Health & Addiction / Head, Epidemiological Research Unit, Technische Universität (TU) Dresden, Klinische Psychologie & Psychotherapie, Dresden, Germany / Prof. Department of International Health Projects, Institute for Leadership and Health Management, I.M. Sechenov First Moscow State Medical University, Moscow, Russian Federation.

Current research priorities: Development of epidemiological models for population health measurement (especially for non-communicable disease and injury) / Comparative Risk Assessment for alcohol and il-

legal drugs within the Global Burden of Disease Study and the WHO Global Status Report on Alcohol and Health / Improving population mental health (including substance-related health) via policy and personalized preventive interventions including secondary prevention (e.g., screening and brief interventions for heavy alcohol consumption) / Implementation science.

Dr. Rehm has published more than 750 peer-reviewed articles and co-authored more than 10 monographs.

Brigitte REILLER



Médecin généraliste addictologue au sein du CSAPA Maurice SERISE (association CEID Addiction) directrice du CAARUD Planterose à Bordeaux. Administratrice de la Fédération Addiction en tant que déléguée régionale Nouvelle Aquitaine.

Hépatite C chez les usagers de drogues ; alcoologie addictologie T 30 n°4 (2008 /12)

- Réduction des risques et prévention des complications sanitaires (196-213); L'Aide-mémoire de réduction des risques en addictologie, Dunod (2012 /09)

- Femmes psychotraumatisées et addictions : une approche intégrée en centres de soins (191-210) ; Sortir des sentiers battus, PUL (2013/10) mise à jour en cours

- Réduction des risques et prévention des hépatites B et C chez les usagers de drogues (77-80); Prise en charge des personnes infectées par les virus de l'hépatite B ou l'hépatite C (2014/05) Rapport de recommandations sous la direction du Pf Dhumeaux (2014/5) actualisation (2016)

Benjamin ROLLAND



Benjamin ROLLAND is professor of psychiatry and addiction medicine. He is the head of the academic departments of addiction medicine of Lyon, at the University Hospital of Lyon (Hospices Civils de Lyon), and Le Vinatier Psychiatric Hospital. Is also part of the PSYR2 CRNL INSERM CNRS UCBL1 Lyon research unit. Benjamin ROLLAND conducts many studies in the field of addiction, in particular on pharmacology, neuroscience, and epidemiology topics related to addictive disorders. He belongs to several national or international scientific consortiums. He is elected member of the executive board, and secretary general of the European Federation of Addiction Societies (EUFAS), of the executive board of the French Alcohol Society (SFA), and he is also the co-president of the scientific commission of Addictions-France.

Carlos RONCERO



Carlos Roncero MD. Ph D. graduated as a doctor from the University of Valladolid and as a psychologist from the UNED (Madrid). He did his doctorate in psychiatry at the Rovira i Virgili University of Tarragona. He is a psychiatrist specializing in drug dependence and dual diagnosis, as well as professor in the Department of Psychiatry and Forensic Medicine of the Universitat Autònoma de Barcelona (Spain) since 2005, where he teaches psychiatry in the position of Associate Lecturer. He has taught numerous courses and lectures for pre- and post-graduate university students, doctors in training, psychiatrists, psychologists and general practitioners in Europe, Latin America, the USA and Africa. He has also collaborated with international agencies, task forces, committees and societies such as the WPA, WFSBP, APAL, OEA and CELAD. Dr. Roncero works in the Psychiatry Department of the Hospital Universitari Vall d'Hebron in Barcelona (Spain), where he has been the Head of the Addiction and Dual Diagnosis Unit since 2015. His work includes a clinical position and a training residency and he is involved in research

trials of new medications for drug-dependent/dual-diagnosis patients, as well as the study of the neurobiological and clinical markers of addiction. He has received grants from ICIII and from PND for the study of the comorbidities and cocaine dependence, and was the principal investigator in clinical trials for treatment of alcohol dependence, cocaine dependence and schizophrenia.

Dr. Roncero has authored 134 articles (in Spanish and English) and 79 book chapters, in addition to co-editing 10 books on the psychopharmacology of drug dependence, treatment of dual-bipolar/dual-schizophrenic patients, cannabis dependence, opiate dependence, personality disorders and schizophrenia.

Since May 2002, he has been a board member of the Spanish Society of Dual Diagnosis (Sociedad Española de Patología Dual), becoming vice-secretary in May 2008. He has been a board member of the Dual Pathology/Dual disorders section of the World Psychiatric Association (WPA) since December 2012 and of the World Dual Diagnosis Association since April 2015 (WDDA). He has been a patron and secretary of the Dual Pathology Foundation since May 2014.

Laurent ROUDIERE



son algorithme de résistance -

Médecin généraliste impliqué dans la prise en charge des maladies infectieuses, activité libérale et hospitalière (APHP). Attaché Service d'Immunologie Clinique, Pr BOITARD - Hôpital Necker, puis Service des Maladies Infectieuses et Tropicales, Pr DUPONT puis Pr LORTHOLARY - Hôpital Necker Praticien Attaché Service de Médecine Interne, Pr HERSON puis Pr BENVENISTE - Hôpital Pitié Salpêtrière. Praticien Attaché Service de Maladies Infectieuses, Pr CAUMES Hôpital Pitié Salpêtrière
TRAVAUX EN COURS : Co-investigateur de l'étude EVITA (Etude randomisée évaluant le remplacement de l'inhibiteur de la protéase par la nevirapine comparée au maintien de l'inhibiteur de la protéase.) - Co-investigateur de l'étude VIZYR (Etude comparative randomisée en double aveugle contre placebo évaluant l'intérêt de la ceterizine dans la prévention des toxidermies sous névirapine.) - Suivi scannographique des anomalies de répartition des graisses lors des modifications de combinaisons d'antirétroviraux - Intérêt de la zalcitabine après échappement thérapeutique, et détermination de

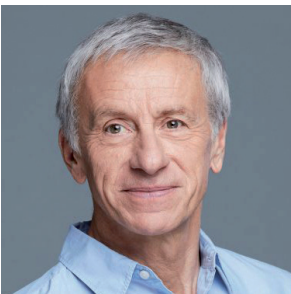
PoI ROVIRA



«I am a Physicist and Statistical modeler working as a researcher in the Public Health Agency of Barcelona, in a center currently being designated as a Collaborating Center of the World Health Organization European Region.

I have been working in the quantification of incidence and mortality of diseases caused by alcohol consumption, mainly applied to countries of the WHO European Region. My last applications specially focused on the relationship between alcohol and different cancer types, estimating how the changes in alcohol control policies such as increases in taxation would affect cancer incidence and mortality.»

Jean-Christophe RUFIN



Jean-Christophe RUFIN est écrivain, médecin et diplomate français.

Il a été élu en 2008 à l'Académie française dont il devient alors le plus jeune membre.

Il a été ambassadeur de France au Sénégal et en Gambie.

Engagé dans l'humanitaire pour Médecins sans frontières, il a mené de nombreuses missions en Afrique, en Amérique Latine, dans les Balkans en Europe, avant de devenir président d'Action contre la faim (ACF) dont il est resté président d'honneur.

Ecrivain, il est l'auteur de nombreux ouvrages dont « *Les Causes perdues* » prix Interallié en 1999 et « *Rouge Brésil* » prix Goncourt en 2001. « *Le Collier rouge* » est adapté au cinéma en 2018 par Jean Becker avec François Cluzet, Nicolas Duvauchelle et Sophie Verbeeck. Son oeuvre constituée de romans historiques mais aussi d'intrigues contemporaines (« *Katiba* », « *Le Parfum d'Adam* » ou la série « *Les énigmes d'Aurel le Consul* ») est fortement marquée par son expérience internationale.

John RYAN



John is a leader in public health and safety and the inaugural CEO of Penington Institute.

John actively works to promote sensible approaches to drug use in the community including with media and by providing expert advice including to governments.

He is a member of the Victorian Government's Medically Supervised Injecting Room Review Panel, an innovative trial conducted in North Richmond.

Having previously worked as a university researcher, government policy-maker, and in frontline service delivery as a needle and syringe program worker, John is immediate past President of London-based Harm Reduction International.

John holds a Bachelor of Arts and a Bachelor of Laws from Monash University. In 2012, he received a Churchill Fellowship to study ways to enhance public health approaches to drug policy.

Didier SAMUEL



Le Professeur Didier SAMUEL est Doyen de la Faculté de Médecine Paris-Saclay (ex Paris-Sud) depuis 2017, il est par ailleurs Professeur d'Hépatologie et de Gastroentérologie à l'Université Paris-Saclay et à l'Hôpital Paul Brousse. Il est depuis 1999 chef du service d'Hépatologie et de Réanimation hépatique et directeur médical du centre de transplantation hépatique au Centre Hépatobiliaire à l'Hôpital Paul Brousse à Villejuif. Il a été de 2007 à 2017 Chef de Pôle dans le groupe hospitalier Paris-Saclay. Il est depuis 2005 directeur de l'unité de recherche Inserm Paris-Saclay U785 devenue 1193 : Physiopathogénèse et Traitements des Maladies du Foie, au sein de laquelle il dirige l'équipe 1 (4 équipes) : "Innovations Thérapeutiques et Recherche Translationnelle en Maladies Hépatiques et en Transplantation du Foie". Ses thématiques de recherche concernent la transplantation hépatique, les hépatites virales, l'insuffisance hépatique aiguë et chronique, et plus généralement l'ensemble des maladies du foie. Il a été membre du Conseil de la Société Internationale de Transplantation

Hépatique (ILTS) de 2007 à 2015 et en a été le Président de 2013 à 2014.

Marlène SANZ



Thèse en médecine passée octobre 2019, spécialité Psychiatrie. Publication du travail de thèse: « Constant A, Sanz M, Moirand R. French Validation of the Alcohol Urge Questionnaire: Psychometric Properties and Relationship with Alcohol Dependence and Drinking Behavior. Alcohol Alcohol. 2021 Apr 29;56(3):251-257 ». Poste d'assistante spécialisée en Addictologie au CH de Saint-Malo de novembre 2019 à novembre 2021. Poste partagé entre le CSAPA de Saint-Malo (30%), le CSAPA de Dinan (20%), et l'Hôpital de Jour d'addictologie de Saint-Malo (50%). Responsable de l'Hôpital de jour d'addictologie depuis l'été 2021. Animation du groupe Santé Justice du CSAPA de Saint-Malo. Praticien contractuel à partir de novembre 2021 en Addictologie au CH de Saint-Malo (même poste). DU addictologie passé à Rennes en 2018. DESC d'addictologie obtenu en septembre 2021. Etude dans le cadre du DESC « Impact of disturbances related to COVID-19 crisis on: alcohol consumption, alcohol craving, and relapse of alcohol dependent patients ».

Gabrielle SAUVIN



Le Dr Gabrielle Sauvin est chef de service du CSAPA du Centre Hospitalier de Grasse. Elle a travaillé pendant plusieurs années en tant qu'urgentiste en région parisienne au sein du Service d'Accueil des Urgences du CHU Pitié Salpêtrière et de l'hôpital Foch. Formée à l'addictologie par le Dr Cherikh, responsable du service d'addictologie du CHU de Nice, elle s'intéresse plus particulièrement aux traitements de l'addiction aux opioïdes et s'occupe de l'équipe de liaison et de soin en addictologie au sein de l'hôpital. Son expérience du somatique lui permet de réaliser une prise en charge globale de ses patients, l'addictologue étant souvent le seul médecin de recours pour les patients consultant en CSAPA.

Benoît SCHRECK



Dr. Benoît Schreck (MD, PhD) is a psychiatrist specialized in addiction medicine. He works at the Nantes University Hospital and is a teacher at the Nantes Faculty of Medicine. He is a post-doctoral fellow in the INSERM UMR 1246 unit (methodS in Patient-centered outcomes & HEalth ResEarch - SPHERE). He obtained his PhD in Science at the Nantes University in 2021. His thesis was dedicated to the slam practice, a particular form of chemsex, which corresponds to the intravenous injection of psychostimulants in a sexual context.

His research also focuses on sex addiction and synthetic cathinones.

Erica SCHULTE



Erica Schulte, Ph.D, is an Assistant Research Professor at the Drexel University Center for Weight, Eating, and Lifestyle Science. She earned her Bachelor's degree in psychology from the University of Kansas and her doctoral degree in clinical psychology from the University of Michigan. Dr. Schulte completed a predoctoral internship at the Medical University of South Carolina and a two-year postdoctoral research fellowship with the Center for Weight and Eating Disorders at the University of Pennsylvania. Her program of research applies a cutting-edge perspective to understanding overeating and obesity by examining 1) which foods or food attributes (e.g., sugar) may be reinforcing in a manner that directly drives overeating, 2) whether core mechanisms of addictive disorders (e.g., withdrawal) may contribute to eating-related problems for vulnerable individuals, and 3) how food addiction may be a useful construct for individualized interventions. Dr. Schulte has investigated these empirical questions using a multi-method approach, including

neuroimaging, scale development, food consumption paradigms, and self-report.

Linda SCORIELS



Dr Linda Scoriels is a Cognitive Neuroscientist who has completed her PhD at the University of Cambridge and postdoctoral studies at the Universities of Cambridge, Rio de Janeiro and Paris (Institute of Psychiatry and Neurosciences of Paris - INSERM U1266). Her research focuses on the biological and environmental causes of psychotic disorders and their relationship with cognitive and emotional functioning. She also conducts research on preventive and personalised treatment using pharmacological and neuroscience-informed computerised cognitive training strategies. Dr Scoriels has a publication record of over 20 papers in reputed journals, including The Lancet Psychiatry, PNAS, and Biological Psychiatry.

Fuschia SERRE



Fuschia Serre graduated with a Master degree in Neurosciences and a PhD in Psychology from the University of Bordeaux, France. She is Research Engineer and clinical research coordinator at Addiction research team of Sanpsy CNRS USR 3413 at University of Bordeaux. Her research interests cover issues of assessments of addiction related behavior with a special interest in the Ecological Momentary Assessment (EMA) methods. Her research topic is related to predictors of relapse with a special focus on craving and its behavioral correlates in human models.

Charlotte SOUCHET



Charlotte Souchet is an integrative clinical psychologist exercising in the addictology service within the DMU IMPACT of the GHU Henri Mondor (Créteil). She works in the addiction outpatient hospital for consolidation of abstinence and risk reduction and offers outpatient consultations. She is trained in trauma care and is particularly interested in violence against women.

François SUREAU



François Sureau est un écrivain français né en 1957 à Paris, avocat, énarque, anciennement maître des requêtes au Conseil d'État. Il est également le cofondateur et codirecteur de la Revue française d'économie.

En 2008, il est président fondateur, avec son épouse Ayyam Sureau, de l'association Pierre Claver, aidant les personnes déplacées par force de leur pays d'origine et trouvant refuge en France. Il est l'un des membres du comité de rédaction de la revue Commentaire.

Depuis 2014, il est avocat auprès du Conseil d'État et de la Cour de Cassation.

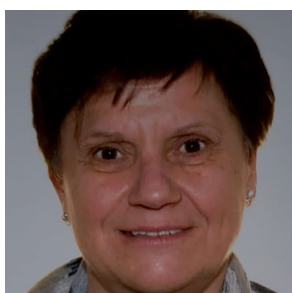
François Sureau a écrit de nombreux ouvrages. Le dernier « L'Or du temps » est paru aux Editions Gallimard en 2020. Il a obtenu le Grand Prix du roman de l'Académie française avec « L'Infortune » en 1991.

Mohamed TALEB



Chef du Pôle de Psychiatrie et d'Addictologie au Nouvel Hôpital de Navarre. Président de la Société Franco-Algérienne de Psychiatrie. Il s'intéresse particulièrement au rôle du stress social dans les affections psychiatriques, aux comorbidités addictives dans les troubles mentaux et à la place des addictions dans les troubles psychotiques émergents.

Marta TORRENS



Marta Torrens MD, PhD., Psychiatrist. Head of Addiction at the Institute of Neuropsychiatry and Addictions-Hospital del Mar in Barcelona. She is Professor of Psychiatry at the Universitat Autònoma de Barcelona and at the Universitat de Vic-CC, Member elected of Scientific Committee of EMCDDA and of the Informal Scientific Network of UNODC-WHO. She is working in the addiction field in clinical, teaching and research. Her main experience in the area of substance use disorders is in diagnosis and treatment (opioid, cocaine, cannabis, alcohol, NPS...), in medical (HIV, VHC) and mental comorbidities (dual diagnosis), and gender perspective. She has participated in many conferences and courses regarding best practices in the treatment of substance use. She participates as consultant with international organizations including: EMCDDA, ECDC, WHO, UNODC in the field of addiction. She has more than 300 publications in the area and has been invited as an expert at many scientific congress and meetings.

Simona TRIFU



Psychiatrist; Assistant Professor - Faculty of Psychology and Social Sciences, University of Bucharest - since 2009; Lecturer - Faculty of Medicine, Neuro-sciences Department, University of Medicine and Pharmacy «Carol Davila»- since 2011; Doctoral Degree in Psychology since 2002; Doctoral Degree in Medicine since 2009; Full member International Psychoanalytical Association; Master Degree in Public Health management since 2001; 16 books published as author in national and international publishing houses and speciality chapters in 4 other author's books; more than 200 articles published or presentations at national and international conferences.

Caroline VIGNEAU



Pr Caroline Victorri-Vigneau is a pharmacologist in charge of the Center of Evaluation and Information on Pharmacodependance - Addictovigilance of Pays de la Loire area. She works at the Nantes University Hospital. Her research work focuses on the evaluation and characterization of drug dependence, especially in specific populations, but also the measurement of the impact of actions aiming at preventing the risk.

Florence VORSPAN



Florence Vorspan is professor of Addictology, tenure (Université de Paris). She is a psychiatrist, specialized in addiction medicine, and holds a PhD in Pharmacology and a research supervision habilitation (HDR). She runs the outpatient addiction program in Fernand Widal hospital (GHU.NORD, APHP University hospital Paris). She is the group leader of the Substance Abuse research group within the "Biomarkers of relapse and treatment response in Mood disorders and Addictions" team of the Inserm Unit 1144. She is also the director of the FHU (fédération hospital-universitaire) NOR-SUD, Network of Research in Substance Use Disorders, a group of 12 medical facilities, 8 Research Units or Research groups from Inserm/CNRS/Institut Pasteur/Sorbonne Université/Université de Paris, and 4 non-profit organization ruling addiction care or harm reduction programs from Paris region. She is the author or co-author of more than 80 pair-reviewed scientific articles, with an h-index at 13.

Reinout WIERS



Prof. Reinout Wiers obtained his Ph.D. in 1998 from the University of Amsterdam (UvA) on cognitive and neuropsychological risk-factors for addiction (cum laude). He was assistant and associate prof. at Maastricht University (1998-2008) and endowed professor at Radboud University Nijmegen (2006-2008), before he returned at UvA to become full professor of developmental psychopathology, where he leads the Addiction, Development and Psychopathology (ADAPT)-lab. He recently became co-director of the UvA center for Urban Mental Health (since 2019). Wiers is primarily known for his work on assessing and changing implicit or relatively automatic processes in addictions and related disorders, for which he received the VIDI and VICI grants from the Netherlands national science foundation. His work is widely cited (h-index 85, google scholar March 2021) and he has given many international keynotes on this topic. In addition to his primary scientific work, he became licensed cognitive behavior therapist (since 2019).

Wanda YEKHLEF



Wanda Yekhlef is a general practitioner at Ville Evrard Mental Health hospital, specialized in somatic disease. She is the head of CRISTALES (coordination for research and information, therapeutic treatments, laboratory analysis and health education) and an active member of the association ANPSSM.

POSTERS EN LIGNE / POSTERS ON LINE

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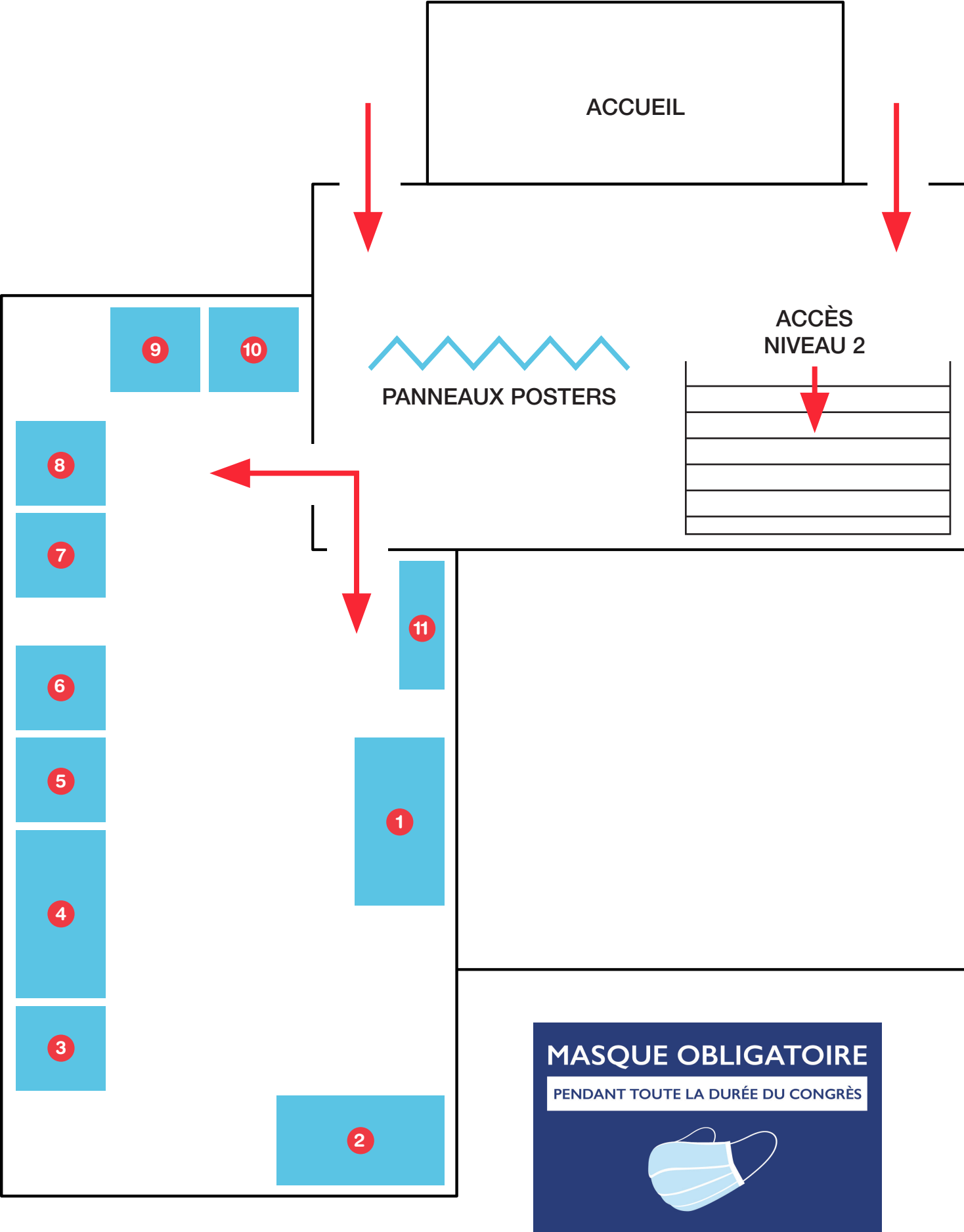
- N 1** Substance use, alcohol, and behavioural addictions in autism: A scoping review of the literature
Betul Aslan - Southampton - UK
- N 2** Improving the quality of life (QOL) of patients in ambulatory addiction treatment facilities (French "CSAPA") thanks to cognitive remediation (CR): an exploratory-study.
Mathilde Auclain - Versailles - France
- N 3** First epidemiological cohort on tobacco and alcohol abuse in Guadeloupe (TOBASCO Study): Opportunity for new and relevant strategies for Cancer prevention in the French West Indies
Aviane Auguste - Pointe-à-Pitre - Guadeloupe - France
- N 4** Effectiveness and acceptance of a smartphone-based virtual agent screening (KANOPEE app) for alcohol and tobacco problems and associated risk factors during COVID-19 pandemic in the general population
Marc Auriacombe - Bordeaux - France
- N 5** Benzodiazepine use and misuse among outpatients with alcohol use disorders
Alexandre Baguet - Rouen - France
- N 6** Two-Week Ambulatory Assessment of Craving as a Predictor of 5-Year Addiction Treatment Outcomes
Emmanuelle Baillet - Bordeaux - France
- N 7** Changes in the consumption of psychoactive substances by people incarcerated at the Villeneuve-Lès-Maguelone prison during first lockdown linked to Covid 19
Camille Ballester - Montpellier - France
- N 8** Smoking in patients hospitalized for schizophrenia: Prevalence and management challenges
Zineb Bencharfa - Salé - Morocco
- N 9** Alcohol use disorder and schizophrenia comorbidity: translational approach to explore common vulnerability
Farid Benzerouk - Reims - France
- N 10** Cannabis tourism destinations: Health risk for vulnerable travellers with current or pre-existing mental disorders
Hagit Bonny-Noach - Ariel - Israel
- N 11** Impact of tDCS on Cannabis Craving in patient with Schizophrenia and a comorbid cannabis use disorder : a randomized multicenter double-blind placebo-controlled study (tCCS)
Noomane Bouaziz - Evrard - France
- N 12** Item Response Theory analyses of DSM-5 criteria for internet gaming disorder adapted to electronic screen use disorder: An exploratory survey in a suburban community sample
Mathieu Boudard - Bordeaux - France
- N 13** Chemsex : comment se repérer quand le sexe se mêle aux drogues?
Julien Cabe - Clermont-Ferrand - France
- N 14** Chemsex in France: a lookout for risks factors & forgotten populations
Dorian Cessa - Lyon - France
- N 15** Nitrous oxide: from trivialization to alert
Leila Chaouachi - Paris - France
- N 16** COVID 19: managing boredom and feelings of emptiness through addictive behaviors
Faredj Cherikh - Nice - France
- N 17** A narrativo-clinical approach to the challenge of the notion of void in addiction clinic
Clément Cimolai - Aix en Provence - France
- N 18** Accessibility to COVID-19 vaccine in two different outpatient addiction care settings
Céline Couton - Paris - France
- N 19** The Influence of Substance Abuse on Inhibition Capacities and Risky Decision in a Group of Outpatient Schizophrenia Patients
Pinhas Dannon - Jérusalem - Israel
- N 20** Neuropsychology of addictions in residential Therapeutic Communities: are addictive and psychiatric comorbidities linked to substance use and cognitive specific profiles?
Simon Deniel - Caen - France
- N 21** Percolation of non-adjacent expertises during pandemic: a case study on the development of harm reduction tools
François Destombe - Lille - France
- N 22** Momentary decrease in cognitive performance as a vulnerability factor for substance use in schizophrenia
Maud Dupuy - Toulouse - France
- N 23** Identifying aberrant use of medical marijuana: Research protocol and preliminary results
Daniel Feingold - Ariel - Israel
- N 24** Implementation of a reactive system for management of physicians suffering from substance use disorder: organizational and institutional concerns with such a sensible subject
Nicolas Franchitto - Toulouse - France

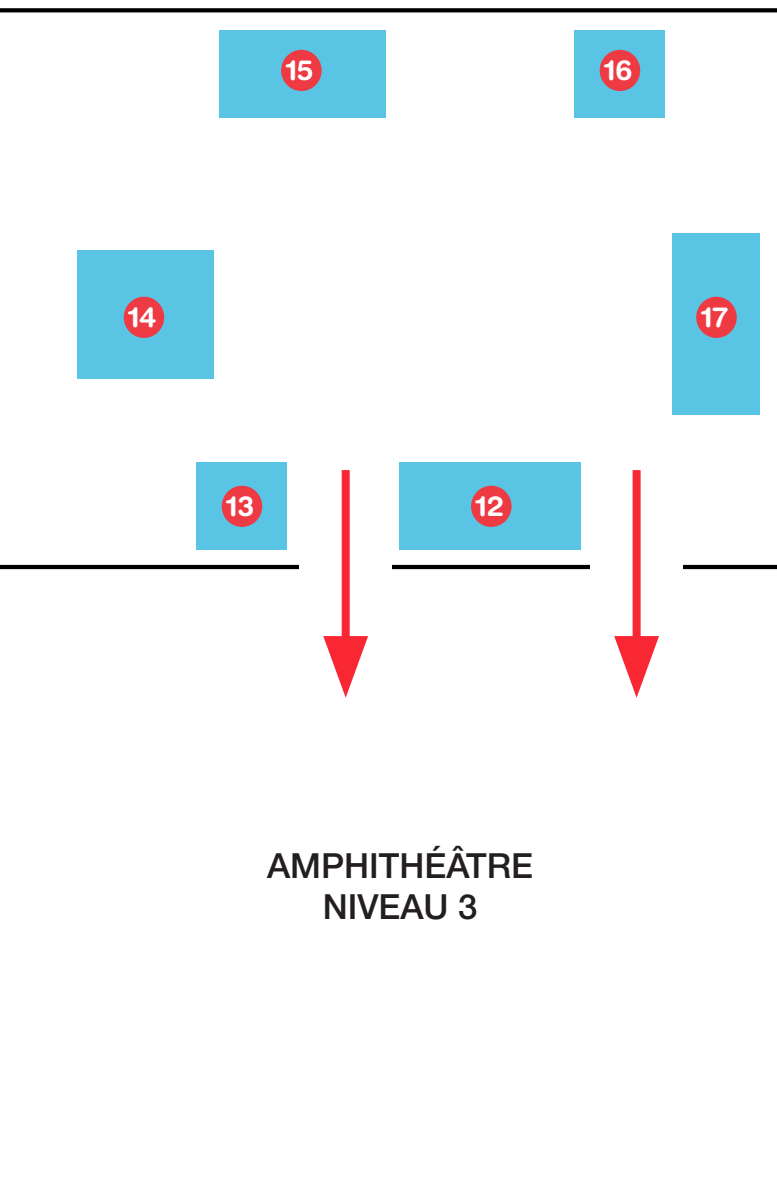
- N 25** Virtual Day care center for patients suffering from addictions during the pandemic
Yasmina Frem - Sèvres - France
- N 26** Dress Syndrome associated to Lamotrigine treatment in a patient with BPD and sever alcoholism
Daniel Garcia-Fuentes - Barcelona - Spain
- N 27** Borderline personality disorder and comorbid alcohol use: association with uncertainty and dissociation
Orane Gaumont - Issy-Les-Moulineaux - France
- N 28** Use of bupropion in adults duals with TDAH
Jorge Gonzalez Espinoza - Santiago - Chile
- N 29** Examining efficacy and safety of extended-release buprenorphine in subgroups of subjects with moderate to severe opioid use disorder
Frank Gray - New York - USA
- N 30** Rapid Initiation of Extended Release Buprenorphine in Patients using Fentanyl and Fentanyl Analogs
Frank Gray - New York - USA
- N 31** The role of substance use in the risk of not getting employed among young people: prospective findings from the CONSTANCES cohort
Rita Haddad - Villejuif - France
- N 32** Physical exertion at work and addictive behaviors: tobacco, cannabis, alcohol, sugar and fat consumption: longitudinal analyses in the CONSTANCES cohort
Nadine Hamieh - Paris - France
- N 33** Updates about the state of care for adult ADHD in France and Europe
Romain Ickick - Paris - France
- N 34** Stroop interference score and craving-use link intensity among patients beginning outpatient treatment for substance use disorder: an EMA study
Louise-Adélaïde Jakubiec - Bordeaux - France
- N 35** Reduction of alcohol consumption by psilocybin: role of serotonin type 2A receptors in the nucleus accumbens and identification of genetic regulations by PCR array
Jérôme Jeanblanc - Amiens - France
- N 36** Interface Personality Disorders - Problematic Substance Use Disorder: New Clinical Conceptions and Proposals for a Multidisciplinary Approach
Guillermo Jemar - Buenos Aires - Argentina
- N 37** Ethanol and phosphatidylethanol, a fantastic story!
Bruno Journe - Paris - France
- N 38** Treatment Outcome of Dually Diagnosed Youth with Substance Use Disorder (SUD) and Depression: State of the Art 2021
Yifrah Kaminer - Farmington - USA
- N 39** Clinical Insight fluctuations and prospective association with craving in addiction: an EMA study
Laura Lambert - Bordeaux - France
- N 40** Does clinical insight level predict successful quit attempts during the first three months of outpatient addiction treatment?
Laura Lambert - Bordeaux - France
- N 41** The reliability and validity of VR (Virtual Reality) based assessment for craving in Taiwan
Kun-Hua Lee - Hsin-chu City - Taiwan
- N 42** Virtual Reality Exposure Effectiveness in Eliciting Cocaine Craving
Thomas Lehoux - Strasbourg - France
- N 43** Transition to a smoking ban in psychiatric hospital of Bohars: current practices, motivations and limits of a possible smoking ban
Loïc Lemain - Brest - France
- N 44** Which are the differences in structural brain alterations between patients with co-occurring cocaine and alcohol use disorders and patients with only cocaine use disorder?
Angeline Maillard - Paris - France
- N 45** Rapid Initiation of Extended Release Buprenorphine in Patients using Fentanyl and Fentanyl Analogs
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- N 49** Albatros Symposium: Criminal non-liability and addiction, where do we go now?
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- N 50** Is the length of inpatient stay the best predictor of maintained abstinence after cocaine detoxification?
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- N 54** Overview of hepatitis C testing and treatment in France
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- N 55** Impact of disturbances related to COVID-19 crisis on: alcohol consumption, alcohol craving, and relapse of alcohol dependent patients
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- N 56** The role of the close correlation between psychic state and diet through a study of the population during lockdown
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- N 57** Frequency and factors associated with Attention Deficit Hyperactivity Disorder in patients with Sex Addiction
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- N 58** Influence of cannabis on the risk of transition in young people at ultra-high risk of psychosis (ICAAR study): a longitudinal study
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- N 59** Craving-Manager application designed to manage craving and individual predictors of substance use / addictive behavior among individuals with addictive disorders: study protocol for a randomized controlled trial
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- N 60** Temporalité et addiction, quelle fabrique du temps ?
Gérard Shadili - Paris - France
- N 61** Autism and Addiction: the forgotten dual disorders
Julia Sinclair - Southampton - UK
- N 62** From CBT to the development of risk reduction in outpatient hospital
Charlotte Souchet - Créteil - France
- N 63** Childhood adverse events and attachment style as inadequate predictors of ADHD pathology in adult psychiatry
Simona Trifu - Bucharest - Romania
- N 64** Impact of attachment pathology on personality development in subjects with ADHD and comorbid affective pathology
Simona Trifu - Bucharest - Romania
- N 65** Mindfulness-based relapse prevention and individual functions of substance abuse
Johannes Veaser - Brussels - Belgium
- N 66** Psychedelic consumption: the reality beyond the myth
Caroline Vigneau - Nantes - France
- N 67** Cocaine-Induced Hallucinations occurrence and severity: two distinct phenotypes with shared and specific risk factors
El-Hadi Zerdazi - Limeil Brévannes - France



PLAN DE L'EXPOSITION / EXHIBITION MAP





LES EXPOSANTS

- 1 GILEAD
- 2 CLINEA PSYCHIATRIE France
- 3 ETHYPHARM
- 4 ABBVIE
- 5 RECORDATI
- 6 INDIVIOR
- 7 ACCORD HEALTHCARE
- 8 ZENTIVA
- 9 CAMURUS
- 10 JANSSEN
- 11 Kb+
- 12 WADD / FFA / SFA
- 13 RESPADD
- 14 CRESUS
- 15 MUTUELLE NATIONALE DES HOSPITALIERS
- 16 CNQSP
- 17 AJPJA & AFFEP

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