

P.6.f.013 Varenicline suicidal ideation in psychiatric patients – a case report and systematic review

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Introduction: Varenicline, a partial agonist selective for $\alpha 4\beta 2$ nicotinic acetylcholine receptor subtypes, was approved in 2006 by the FDA as an aid for smoking cessation in association to counselling.

Since its commercialization, many individual cases reported psychiatric adverse effects on patients prescribed with varenicline – such as depressive mood, anxiety, suicidal ideation or even suicidal attempt. Subsequently, the FDA required the addition of a Boxed Warning to this drug. It is believed this reports led to some apprehension on its prescription [1].

However, many of the published studies focusing on varenicline and these adverse effects showed no association between them, stating the safety of this drug.

Therefore, the case of 48-years-old man, diagnosed with an affective disorder, and presenting to our emergency room after a suicidal attempt on the first month after having been prescribed with varenicline, and his subsequent remission following the drug discontinuation, triggered our review.

Knowing that tobacco use is highest among people with a psychiatric diagnosis and the leading preventable cause of death on this group, it was intriguing to realize the lack of studies linking varenicline psychiatric side effects on stable psychiatric patients.

Aim: To assess evidence showing an association between the prescription of varenicline on psychiatric patients and induced worsening of psychiatric symptoms or de novo adverse symptomatology, particularly suicidal behaviour.

Methods: A search on MEDLINE database was performed, on March 2016, for articles focusing on the use of varenicline in patients diagnosed with a psychiatric condition. We used the following key-words: varenicline; suicidal ideation; psychiatric history.

Many of the articles were selected by its title or abstract. Though some ambiguous information required reading the full text. Criteria for inclusion were: the use of varenicline for smoking cessation (excluding off-label use) and the presence of a differentiated group of patients with an Axis-I Psychiatric Diagnosis. A subsequent systematic review was performed on the selected articles.

Results: Sixteen articles were found but only 5 studies were included, for matching inclusion criteria.

We found four Randomized, Double-Blinded, Controlled Trials and one simple Randomized Trial. These articles included a total of 1457 patients. For mostly of these papers, trials, the main outcome was abstinence related, so the assessment of psychiatric side effects was mostly considered a secondary outcome. Only one article assessed varenicline safety and tolerability among psychiatric patients as a primary outcome. Main limitations founded on these studies were: number of patients included, a lack of differentiated groups with specific diagnosis, the was psychiatric adverse effects were assessed and funding.

Conclusions: More evidence is needed to assess an association between varenicline and suicidal behaviour and other psychiatric adverse effects. More trial involving different groups with a specific diagnosis would probably produce more specific outcomes.

The effects of prescribed drugs, nicotine withdrawal effects and struggling with tobacco abstinence on worsening or inducing psychiatric symptoms isn't clear.

References

- [1] Rütther T. et al., 2013. EPA Guidance on tobacco dependence and strategies for smoking cessation in people with mental illness. *Eur Psychiatry*. 2014 Feb; 29(2): 65–82.

P.7.a. Child and adolescent disorders and treatment – Disorders (basic)

P.7.a.002 Cultural and other aspects of fetal alcohol spectrum disorder prevention and identification in Lithuania

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Introduction: Lithuania is one of the top alcohol consuming countries according to WHO report. In the year 2007 per capita consumption of pure alcohol in Lithuania was 14.3 liters [1]. Unfortunately, women of age 25–34 had the highest levels of problematic alcohol consumption. Meanwhile the Department of Statistics states that most prevalent mother's age during first delivery was 28. Correlation between alcohol consumption during pregnancy and Fetal alcohol spectrum disorder (FASD) has been scientifically proven 40 years ago [2]. Nonetheless, identification of this condition and its treatment still remains a challenge to health care system. One of possible reasons why women consume alcohol during pregnancy could be doctor's obsolete traditions to recommend alcohol for pregnant women as a remedy.

Infant morbidity rate of fetal alcohol syndrome (FAS, heaviest form of FASD) worldwide varies from 0.1:1000 to 1:1000 newborns [3]. This diversity of statistical data suggests both cultural differences of alcohol consumption and diagnostic challenges of the syndrome.

Aims:

1. To investigate family doctors' and obstetricians-gynecologists' behavior in relation to recommendations of alcohol use during pregnancy.
2. Describe available health statistics on FAS cases in the Hospital of Lithuanian University of Health Sciences (Hospital of LUHS) Neonatology clinic.
3. Compare epidemiological data of FAS (FASD) in Lithuania and other countries.

Methods: A pilot questionnaire was given to 74 general practitioners and obstetricians-gynecologists to evaluate attitudes towards alcohol use of pregnant women and to 27 neonatologists to assess frequency of newborns with typical FAS symptoms (not necessarily diagnosing Q86.0) in their clinical practice. Official statistical data was taken from open source European hospital morbidity database of World Health Organization [4] and Department of Statistics to the Government of the Republic of Lithuania [5]. All statistical analysis was performed using SPSSv20.0. Data was presented in mean values: mean \pm SD.

Results: 12% of surveyed physicians do recommend alcoholic beverages as a remedial mean for their pregnant patients. 43%