Oral

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Oral 2

[O-2-01]

LEVELS OF NEUROACTIVE STEROID HORMONES IN ALCOHOL DEPENDENT PATIENTS OF DIFFERENT ETHNIC ORIGIN

Tamara V. Shushpanova[1], Nikolay A. Bokhan[1], Anna I. Mandel[1], *Svetlana V. Vladimirova[1] (1. Mental Health Research Institute (Russia))

[O-2-02]

Feasibility and efficacy of ASSIST linked Brief Intervention in Areca Nut (Betel nut) addiction (Preliminary findings of a study from Meghalaya, India)

*Subhash Das[1], Caleb Harris[1], Arvind Nongpiur[1], Vikas Kantilal Jagtap[1], Shanthosh Priyan S[1], Kimberly Syiem[1] (1. North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (India))

[O-2-03]

Understanding cognitive and functional outcomes in schizophrenia: The impact of neurofeedback on task speed, accuracy, and productivity

*Aanchal Narang[1], Devvarta Kumar[1], Aarti Jagannathan[1], Jagadisha Thirthalli[1] (1. National Institute of Menta Health and Neuro Sciences (NIMHANS) (India))

[O-2-04]

Development and Efficacy of Cognitive Behavioral Therapy Program (CAP-G) for Gaming Disorder

*Satoko Mihara[1] (1. National Hospital Organization Kurihama Medical and Addiction Center (Japan))

[O-2-05]

Cognitive Load and Reconsolidation of Traumatic Memories – An Ultra Brief Method to Alleviate Symptoms of Posttraumatic stress.

*Anna Bjärtå[1], Jennifer Meurling[1] (1. Mid Sweden University (Sweden))

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[O-2-01] LEVELS OF NEUROACTIVE STEROID HORMONES IN ALCOHOL DEPENDENT PATIENTS OF DIFFERENT ETHNIC ORIGIN

Tamara V. Shushpanova[1], Nikolay A. Bokhan[1], Anna I. Mandel[1], *Svetlana V. Vladimirova[1] (1. Mental Health Research Institute (Russia))

Keywords：Cultural psychiatry、Galodif、new drug

Introduction: Disturbance of homeostasis of neuroactive steroids (NS) is a risk factor for development of mental and drug disorders. Development of new drugs that affect NS metabolism taking into account individual characteristics and ethnicity that form high risks of development of alcohol dependence (AD) is one of the therapeutic strategies. Objective: To study the levels of NS: cortisol (CS), progesterone (PG), testosterone (T) in Russian and Tuvan patients with AD under the influence of therapy with the original anticonvulsant Galodif (metachlorobenzhydryl urea). Material and methods: The study included: 23 healthy male volunteers, 38 Russian male patients with a diagnosis according to ICD 10 - F.10.232 and F.10.303, who were treated at the Mental Health Research Institute, Tomsk National Research Medical Center, RASci; 67 male patients of Tuvan nationality, treated at the Republican Narcological Dispensary (Kyzyl). The levels of steroid hormones CS, PG and T were determined using ELISA kits. Results: Comparative analysis of NS levels in patients with AD and healthy volunteers showed that the level of PG and T in the blood serum was significantly lower in patients. More pronounced changes were found in Tuvan patients. Reduced PG level leads to a decrease in endogenous modulators of GABA receptors in the CNS. The use of galodif (300 mg/day, 21 days) in patients caused a decrease in the symptoms of alcohol withdrawal syndrome and an increase in the level of PG and T, approaching the control value. The CS level was significantly higher in patients of Russian nationality, but more pronounced changes were noted in Tuvan patients.After therapy with galodif, the level of CS decreased. Conclusion: Changes in the level of NS in the blood of patients with AD reflect a violation of the regulation of NS hormones as one of the mechanisms of development.

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[O-2-02] Feasibility and efficacy of ASSIST linked Brief Intervention in Areca Nut (Betel nut) addiction (Preliminary findings of a study from Meghalaya, India)

*Subhash Das[1], Caleb Harris[1], Arvind Nongpiur[1], Vikas Kantilal Jagtap[1], Shanthosh Priyan S[1], Kimberly Syiem[1] (1. North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (India))

Keywords：areca nut、Brief Intervention、ASSIST、addiction

Background: Areca nut, widely consumed in Southeast Asia and India, contains arecoline, which produces various sensations like warmth, diminished hunger, and sweating. Studies indicate its addiction potential, and the WHO has identified its possible role in causing cancer (Athukorala IA et al., 2021; Warnakulasuriya S et al., 2022; WHO, 2003).In Meghalaya, India, areca nut chewing is prevalent. Brief Intervention (BI), a non-pharmacological approach, is effective in reducing substance use (Mattoo SK et al., 2018). This pilot study aims to assess the feasibility and effectiveness of BI for areca nut addiction.**Aims and Methodology:** The study's objectives are to measure the completion rate of BI and assess the quit/reduction rate after one month. Conducted at a tertiary care teaching hospital in the North East of India, adult participants with WHO-ASSIST scores of 4-26 were enrolled. Two groups of 30 participants each were planned: Group A (relatives of surgical oncology patients) and Group B (Healthcare Workers - HCW). Along with other details (including areca nut consumption), ASSIST scores were recorded at first contact, Day 7, and after one month.**Results:** So far, 30 participants from Group A and 21 from Group B have been approached, totalling 51. The majority are females (80.3%). The mean age for Group A is 38.8 years and for Group B, 29.3 years.Group A: 23.3% (7/30) completed BI and assessment. Their mean ASSIST score decreased from 19.4 to 14.5 (25.25% reduction), with a 71% quit/reduction rate.Group B: 47.6% (10/21) completed BI and assessment. Their mean ASSIST score decreased from 18.7 to 12.7 (32.0% reduction), with a 90% quit/reduction rate.Overall, Group B showed better engagement and higher quit/reduction rates than Group A.**Conclusion:** Preliminary findings suggest that BI is a feasible intervention for reducing areca nut intake, although engaging participants in treatment remains a challenge.

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[O-2-03] Understanding cognitive and functional outcomes in schizophrenia: The impact of neurofeedback on task speed, accuracy, and productivity

*Aanchal Narang[1], Devvarta Kumar[1], Aarti Jagannathan[1], Jagadisha Thirthalli[1] (1. National Institute of Menta Health and Neuro Sciences (NIMHANS) (India))

Keywords：Schizophrenia、EEG Neurofeedback training、Cognitive enhancement、Entry Level Job tasks

Background:
Schizophrenia is a chronic mental illness often associated with cognitive impairments that significantly affect occupational functioning. While pharmacological treatments target clinical symptoms, functional recovery, especially in work-related skills, remains limited. Neurofeedback has emerged as a promising non-pharmacological intervention to enhance attention and cognitive control, which are essential for vocational performance.
Aim:
To assess the effect of neurofeedback training on speed, accuracy, and productivity in entry-level job tasks among patients with schizophrenia.
Methods:
A total of 68 participants diagnosed with schizophrenia were randomly assigned to either a neurofeedback intervention group (n = 34) or a waitlist control group (n = 34). The intervention group received 15 sessions of theta/beta neurofeedback over four weeks. Participants completed simulated entry level job tasks (Index Card Filing, Toilet Tank Assembly, Restaurant Order Placing, and Data Entry) and underwent neuropsychological assessments pre- and post-intervention. Repeated measures ANOVA was used to assess changes.
Results:
Significant time × group interaction effects were observed for speed, accuracy, and productivity of job tasks- Index Card Filing, Toilet Tank Assembly, and speed and productivity for Data Entry and Restaurant Order Placing tasks. Neuropsychological assessments showed significant changes in attention ($F=5.05$, $p=0.02$) and working memory ($F=4.11$, $p=0.04$).
Conclusion:
Neurofeedback training led to measurable improvements in real-world job task performance in individuals with schizophrenia. These gains occurred independently of changes in clinical symptoms, highlighting neurofeedback's potential as a targeted cognitive and functional rehabilitation tool to enhance vocational outcomes.

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[O-2-04] Development and Efficacy of Cognitive Behavioral Therapy Program (CAP-G) for Gaming Disorder

*Satoko Mihara[1] (1. National Hospital Organization Kurihama Medical and Addiction Center (Japan))

Keywords：Gaming Disorder、Cognitive Behavioral Therapy、Adolescence addiction

Purpose: The development of treatment methods for gaming disorder (GD) and their effectiveness verification have already been attempted in various countries, but the accumulation of research results with a high level of evidence is still awaited. We developed the Comprehensive Treatment Program for Gaming Disorder, CAP-G) based on congnitive bahavioral therapy (CBT), and conducted an effectiveness study. **Methods:** The study subjects were 30 men and women between the ages of 10 and 35 years old who visited the specialized outpatient clinic for IA at Kurihama Medical Center and were diagnosed as having GD. A total of 8 sessions of the CAP-G program were conducted in a group setting in the form of an open trial. Effectiveness was measured by self-administered questionnaire and a questionnaire of family members five times: before the intervention, at the end of four sessions of the program, at the end of the program, and 3 months and 6 months after the end of the program. The questionnaires included questions on gaming time, GAMES test, IGDT-10, SOCRATES, and the Sheehan VAS scale. The study was approved by the Ethical Committee of the Center. **Results:** Compared to baseline, the GAMES test and IGDT-10 scores assessed by family members, 3 and 6 months after the end of the program, and the time spent playing games on weekend days decreased significantly. There was also a significant decrease in scores on the Sheehan VAS scale evaluated by the subjects and their families. **Conclusions:**Although the number of subjects in this study was small and the study was conducted at a single facility, the results suggested that the CAP-G may be effective for the treatment of GD. In the future, an increase in the number of subjects, multi-institutional implementation, longer-term outcome evaluation, and randomized controlled trials are needed.

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[O-2-05] Cognitive Load and Reconsolidation of Traumatic Memories – An Ultra Brief Method to Alleviate Symptoms of Posttraumatic stress.

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Keywords：PTSD、Reconsolidation、Cognitive load

In an era of global uncertainty marked by conflict, displacement, and widespread psychological distress, it is more important than ever to advance the evidence base for scalable, accessible, and culturally sensitive interventions that effectively target core symptoms of trauma and stressor related disorders. In our laboratory, we have developed and tested a brief reconsolidation-based intervention targeting intrusive memories, a hallmark symptom of posttraumatic stress disorder (PTSD) and a common feature across several other psychiatric conditions. The method involves reactivating a traumatic memory, followed by a guided imaginal exposure designed to tax cognitive resources. This approach aims to reconsolidate a less emotionally intense version of the memory, leading to a reduced emotional response at future recall. The intervention consists of a single online session with a booster and has shown very promising in reducing both the frequency of intrusions and overall PTSD symptoms. In a current project, we are translating and adapting the intervention to meet the needs of migrants with refugee background residing in Sweden. The talk will focus on the theoretical underpinnings of the method, its development, empirical evaluation, and future directions for research and implementation. It will conclude with a discussion of related approaches informed by neuropsychological models and their potential for cross cultural clinical applications.