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## BACKGROUND AND IMPORTANCE



**Substance abuse** is a common **comorbidity** in patients with severe psychiatric disorders such as schizophrenia and bipolar disorder. The interaction between these conditions and substance use **complicates diagnosis and treatment**, as it can worsen symptoms and affect management.

## AIM AND OBJECTIVES

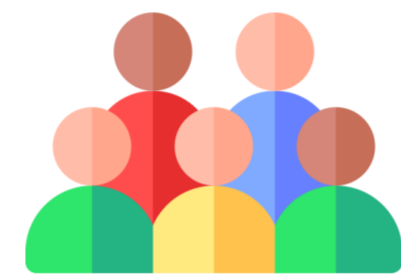


- To study the **prevalence of substance abuse** in patients diagnosed with **schizophrenia or bipolar disorder** in a psychiatric unit.
- To **examine the differences in substance use** by sex, diagnosis, and type of substance consumed, alongside the presence of psychotic episodes before diagnosis.

## MATERIAL AND METHODS



- 1 year retrospective observational study
- 450-bed university hospital



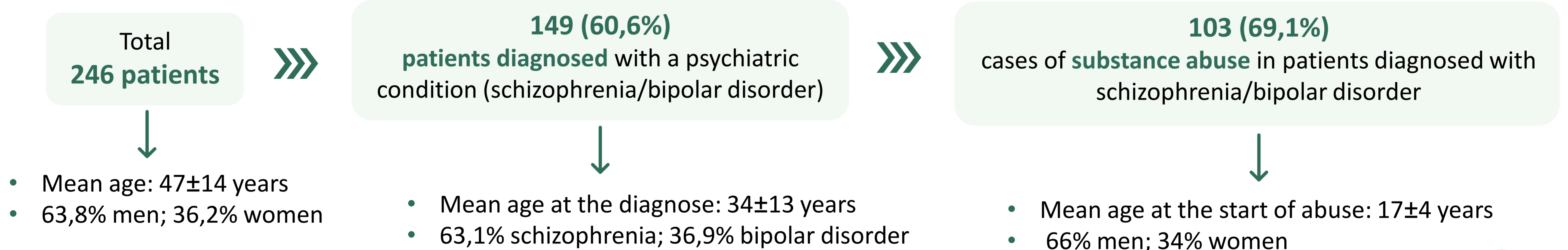
**Patients** admitted to the psychiatric unit (acute and subacute) diagnosed with schizophrenia or bipolar disorder, and/or documented substance abuse

**Variables collected:** sex, birthdate, type of diagnosis, diagnosis date, substance use (alcohol, opioids, cannabis, cocaine, amphetamines, hallucinogens, others), age of substance use onset, and history of psychotic episodes before diagnosis.



- Descriptive statistical analysis was conducted using frequencies for categorical variables and measures of central tendency and dispersion for quantitative variables.

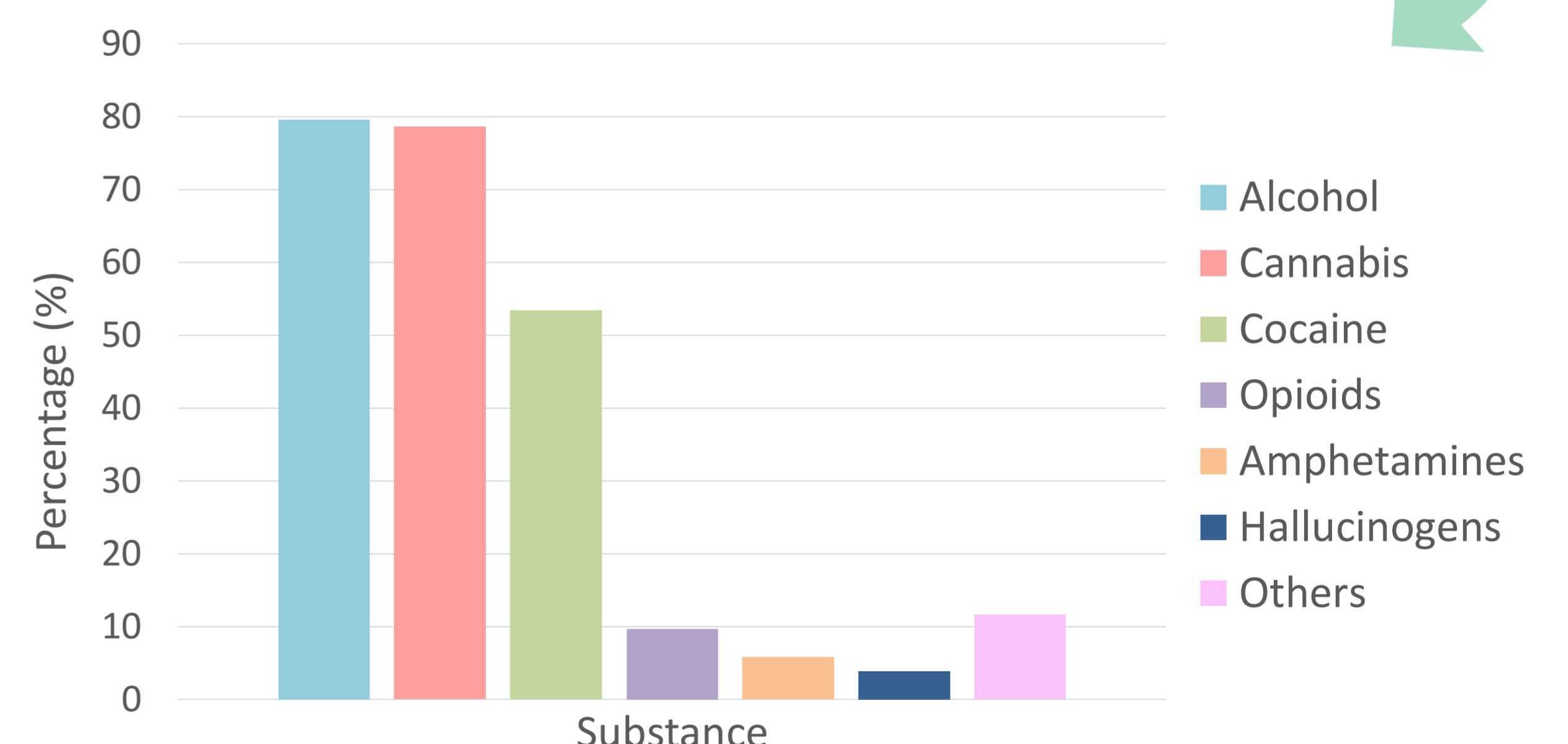
## RESULTS



### Diagnose-specific prevalence

	Schizophrenia	Bipolar disorder
Substance abuse	67%	72,7%
Polysubstance use (Use of ≥2 substances)	72,7%	67,5%
Psychotic episodes prior to diagnose	61,9%	50%

### Most consumed substances



## CONCLUSION AND RELEVANCE



There is a **high prevalence** of substance abuse in **patients with schizophrenia and bipolar disorder**, particularly among men and schizophrenia patients. **Polysubstance** use and prior psychotic episodes were more common in schizophrenia patients. It is important to understand the dynamics of substance abuse in schizophrenic and bipolar patients for a comprehensive approach to managing their conditions.



6ER-036

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Authors declare no conflicts of interest