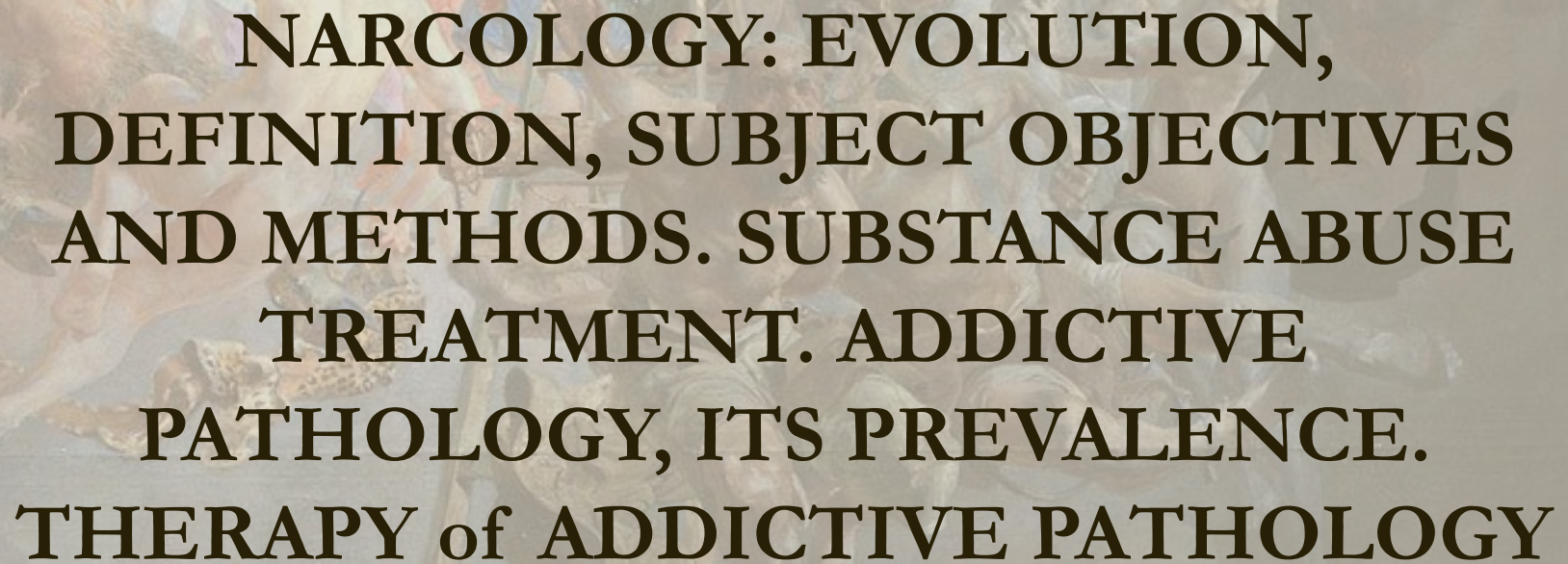


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narcology and sexology



**NARCOLOGY: EVOLUTION,
DEFINITION, SUBJECT OBJECTIVES
AND METHODS. SUBSTANCE ABUSE
TREATMENT. ADDICTIVE
PATHOLOGY, ITS PREVALENCE.
THERAPY of ADDICTIVE PATHOLOGY**

Department of Psychiatry, psychotherapy, general and medical psychology, narcology and
sexology

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DEFINITION

Dependent (addictive) behavior - the form of destructive behavior, as expressed in an effort to escape from reality by changing his mind by receiving chemicals or fixation of attention on certain subjects or activities that accompanied the development of intense emotion and desire to repeat this state.

Lat.

addictus

– blindly loyal,
addicted

Types of addiction

CHEMICAL

NO CHEMICAL

- The dependence of the game
- Workaholism
- Co-dependency, etc.

Psychoactive substances (surfactants)
- Substances with single dose can cause pleasant mental experience, while systematically - physical and mental addiction.

Psychoactive substances (surfactants)

Alcohol

Drugs

Toxic
substances

Surfactants, not related to
the drug list

*any substance that meet the following criteria:
a) has surfactant properties (medical criterion);
b) the non-medical consumption of the substance
has a large scale, the effects of this gain social
importance (social criteria);
c) in accordance with the law and recognized
Narcotic included in the list of narcotic drugs (legal
criteria).*

DEFINITION

Drug addiction - a disease caused by the systematic use of psychoactive substances in the state list of drugs, which is manifested psychological and physical dependence on them.

Substance abuse - a disease caused by the systematic use of psychoactive substances that are not included in the state list of drugs, which is manifested psychological and physical dependence

The approach to patients with substance abuse and principles of their treatment are identical.

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DEFINITION

Polydrug - simultaneous dependence on two or more drugs.

Polysubstance - simultaneous dependence on two or more narcotic substances.

complicated narkomaniya-
simultaneous dependence on one drug and other narcotic substances.

Episodic abuse -
drug abuse or other surfactant formed clinic without dependence (mental and / or physical) is not considered a drug addiction or substance abuse. (Drug addiction, for abuse behavior)

ALCOHOLISM



Drug Addiction



SUBSTANCE ABUSE



DIGESTIVE ADDICTION



Classification of surfactants

- With sedation (alcohol, opiates, barbiturates, benzodiazepines)
- Since stimulating effect (caffeine, cocaine, ephedrine, amphetamine)
- Psychedelic (LSD, cannabis, volatile narcotic effect in the islands)

Some surfactants are medicines:
narcotic analgesics
barbiturates
benzodiazepines
ephedrine

The etiology of the dependencies

1. Psychological causes: (individual psychological predisposition to addiction to alcohol)

- Self-medication (alcohol intake to relieve psychological stress, stress, anxiety, decrease feelings of depression when depression);

- Features of character, personality development.

- A higher risk of developing alcoholism in some races.

The etiology of the dependencies

2. Social reasons:

- The tolerant attitude of society to alcohol abuse
- Underemployment
- Poverty
- Disharmony in the family
- Stressful situations at work
- Children imitate the behavior of adults
- Children begin to consume alcohol under pressure from peers

The etiology of the dependencies

3. The biological reasons for this:

- Disproportionately high levels of alcoholism among men than women (5: 1);
- Increased risk of developing alcoholism in sons / brothers-alcoholic men;
- Data on adopted twins indicate an increased risk for alcoholism (risk increased by 4 times), if the biological parents suffer from alcoholism;
 - A higher risk of developing alcoholism in Some races.

Dependency Clinic

BIG Abuse Syndrome

Abuse Big syndrome is universal to all forms of addictions. He defines the essence of the disease.

1. Syndrome of altered reactivity

2. Psychic dependence syndrome

3. Physical dependence syndrome

DEPENDENCY CLINIC BIG ABUSE SYNDROME

Syndrome of altered reactivity

1. CHANGES IN THE FORM OF CONSUMPTION

2. CHANGE OF TOLERANCE

3. DISAPPEARANCE protective reaction OVERDOSE

4. CHANGE OF FORM INTOXICATION

DEPENDENCY CLINIC BIG ABUSE SYNDROME

Psychic dependence syndrome

1. MENTAL (obsessive) craving for drugs

- Lifting the mood in anticipation of receiving
- Depression, constant thoughts about the drug
- Dissatisfaction in the absence of the drug
- Conflict of motives

2. ABILITY TO ACHIEVE MENTAL COMFORT ONLY INTOXICATION

DEPENDENCY CLINIC
BIG ABUSE SYNDROME

Physical dependence syndrome

1. Physical (compulsive) TOWARDS anesthesia

2. The ability to achieve a state of physical comfort in ONLY INTOXICATION

3. Withdrawal syndrome (abstinence)

STAGES OF ADDICTION



I Stage of mental dependence

**II STAGE OF PHYSICAL AND CHEMICAL
DEPENDENCE**

**III STAGE DRUG degradation of the
individual**

The main stages of dependence

stage 1

Syndrome of altered reactivity:

- a. Receiving regular drug
- b. Height tolerance (tolerance)
- c. Protective reactions weaken
- d. Fading of the initial drug effect.

Psychological dependence:

- a. Formed psychological (obsessive) attraction to intoxication
- b. Achievements mental comfort only during intoxication

Physical dependence:

not formed

The main stages of dependence

stage 2

Syndrome of altered reactivity:

- a.modified form of consumption,
- b.maximum tolerance,
- c.lack of protective and toxic reactions,
- d.modified form of intoxication

Psychological dependence:

- a.Severe obsessive attraction to intoxication,
- b.Ability to mental comfort only in intoxication

Physical dependence:

- a.compulsive, physical attraction to intoxication,
- b.the capacity for physical comfort in intoxication,
- c. abstinence syndrome (withdrawal)

The main stages of dependence

stage 3

Syndrome of altered reactivity:

- a. Reactivity changed due to the depletion of the body, Decrease of tolerance,
- b. The drug acts as a tonic, buoyed body means.

Psychological dependence:

- a. Severe obsessive attraction to intoxication,

Physical dependence:

- a. compulsive, physical attraction to intoxication,
- b. the capacity for physical comfort in intosikatsii, withdrawal symptoms (withdrawal)

COMPLICATIONS COURSE DEPENDING

AFTER INTOXICATION SYNDROME

after a single use of large doses of surfactant due to poisoning of the body, forming a complex somatic-vegetative disorders, which can be externally similar to the symptoms of withdrawal syndrome.

The main difference from the abstinence syndrome - absence of craving for surfactant (and often intense aversion), because and poisoned body without surfactants and products of its destruction.

COMPLICATIONS COURSE DEPENDING

ABSTINENCE SYMPTOM

Surfactant deficiency causes metabolic disorder (because after prolonged use of the surfactant is incorporated in the metabolic processes) or insufficient activation of receptors (which are adapted to receive continuous SAW). Therefore, to restore the normal state of health the body requires a surfactant.

Psychosis in surfactant consumption

ALCOHOL - "metalkogolnye" - against the backdrop of the abolition of alcohol intake, as a complication of withdrawal symptoms (Minimum 2 steps): delirium ("delirium tremens"), hallucination, Korsakov (amnestic) syndrome, paranoid, encephalopathy, etc.

For other surfactants - intoxication - at the height of intoxication (ie, at any stage, even after a single use of high-dose or low-quality materials): delirium, hallucination, paranoid.

Basic principles of treatment of substance abuse disorders

- voluntariness
- rejection of the use of surfactants (!)
- maximum individualization
- complexity

Important to remember:

Dependencies are incurable! A dependent will always be addicted!

It is possible to achieve the formation of persistent and prolonged remission (ie, an alcoholic does not drink, does not use a drug addict drug).

That is, if the patient's symptoms are formed and depending on it for some reason (treatment, conscious choice, imprisonment) does not use a surfactant for a while, then when he starts to eat again, all depending on the symptoms manifest at the same level. Often it is enough to "one drink"!

The main types, techniques and tools? In the treatment of substance abuse disorders

Biologically oriented effects Antidepressants

- **Normotimiki**
- **Tranquilizers**
- **Neuroleptik**
- **Opiate receptor blockers (naltrexone)**
- **Sensitizer**
- **Means of substitute therapy (methadone)**
- **Drug-free methods**
 - **(Reflexology / electrical)**

PSYCHOTHERAPY

Psychotherapeutic-oriented effects

Suggestive methods (in Vol. H. Of placebo therapy)

Behavioral methods (in Vol. H. URT)

Group methods. Existential psychotherapy. family therapy

Synthetic and PT methods combined.

Socially-oriented effects

self-help groups (AA, Alanon, Anon)

Socio-psychological training



THANK YOU FOR ATTENTION!