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Self-care concept developed by drug

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Introduction The care to the alcohol and/or other drugs' user focuses on the logic of care for extended clinical and harm reduction, under the focus of the user and his family co-responsibility towards treatment.

Aim This study aimed to understand the concept of self-care developed by drug users.

Methods It is about a descriptive exploratory study with a qualitative approach. It was conducted in a center of psychosocial attention (CPSA), in Recife, Pernambuco, Brazil. The study participants were alcohol and/or other drugs users, over the age of 18 years, both sexes and were in treatment in the mentioned service in morning, afternoon and evening shifts. Data collection occurred in consultation records and individual interviews for the sample characterization, and three operating group sessions, one per shift, guided by the question: "what is self-care for you?" The interviews and sessions were audio-recorded, transcribed and submitted to analysis by ALCESTE software.

Results It was noted that self-care was conceptualized by the drug users from different points of view. For some, self-care is to self-protect, for others it means taking medications. The family, religion and CPSA were identified as a support network for the self-care maintenance. Furthermore, the self-care was related to the desire to recover losses.

Conclusion This study provided the understanding improvement of the self-care concept, supporting the care practice for the interventions planning, targeting the co-responsibility of the alcohol and/or other drugs users.

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Regional features of prevalence of cannabinoid dependence in children in Siberia

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Aim To distinguish socio-cultural predictors of cannabinoid dependence of child population in Siberia.

Methods Clinical verification of dependence, due to cannabinoid use in the age group "0–14 years" across 22 administrative territories of Siberia and the far east. Review, of statistical materials of regional narcological institutions.

Results Cannabinoid dependency in children has been revealed in 8 of 22 territories–intensive indices per 10,000 of the population of the matched age were in two territories–0.2, one territory–0.4, in two–0.7, and in three–2.1, 3.2, 14.0, respectively. In the related territories, the specific weight of cannabinoid dependence in total structure of substance dependence for population as a whole

(children, adolescents, and adults) was as follows: 0.7%, 0.8%, 2.7%, 3.5%, 27.2%, 67.6% and 76.9%. Therefore, for those territories where ill children are under observation their number per 10,000 of the population is closely associated with structural size of addictions: high level of cannabinoid dependence, formed in the territory, is interrelated with greater number of children, dependent on cannabinoids in this territory. With account for made corrections it should be recognized that "saturation level" of the territories, in particular, with cannabinoids results in higher indices of substance dependence among child population.

Conclusions It should be considered that calculation of intensive indices is conducted for the age group "0–14 years" while diagnosed age range includes children aged 9–14 years, therefore, real indices of dependence, with account for this hypothetical correction, are three times higher as a minimum.

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Selincro use in a patient diagnosed with dependence to stimulants, alcohol abuse and hyper-sexuality

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Introduction Hyper-sexuality is an increased sexual activity that causes stress the individual at social levels. There are studies that support the theory that neurophysiological abnormalities of individuals appear in this disorder and do not overlap with the alterations found in substance addictions. However, it is doubtful whether addiction to other substances can trigger behavior in the sexual sphere.

Objective To report a case of abuse of alcohol as a trigger relapse in terms of sexual alterations in a patient diagnosed with alcohol abuse, stimulants dependence and hyper-sexuality.

Case description Here we report a married gentleman in the fourth decade of his life that presents behavior and sexual activity level compatible with a case of hyper-sexuality. After conducting motivational interviews with the psychologist to aim a sustained abstinence of amphetamines and a lack of alterations on the sexual sphere, the patient achieved clinical stability over several years. However, it is referred for psychiatric consultation as he presented recently abusive alcohol consumption associated with Speed. He relapsed in the sexual sphere by increasing sexual desire and impulsiveness. It was decided to prescribe oral nalmefene (1 tablet daily) for two months and then stop treatment regularly (taken PRN in case of high risk situations). As a result, he has had sustained remission for over 6 months.

Conclusion Although, there are studies suggesting that neurobiological changes among the pathologies described are different, the treatment of alcohol abuse can be beneficial in other diseases such as hyper-sexuality as disinhibition associated with alcohol intoxication.

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