

Review Article

Relapse Prevention among Patients with Alcohol Use Disorder in Indian Scenario: Role of Psycho-Social Interventions

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Abstract

Background: The term "psychosocial" refers to the dynamic interaction of one's psychological and social traits. Psycho-social intervention is one of the most effective therapies for substance use disorders (SUDs) that addresses psychological, physical, and social health. In these treatment approaches, the therapist's goal is to modify the patient's drug consuming behavior and cognition. Substance use relapse can occur for a variety of biological, psychological, and socio-cultural reasons, leading to psychoactive drug use disorder. The key intervention for relapse prevention in substance use disorders (SUDs) is successful treatment in terms of bio-psycho-social intervention, rather than detoxification alone.

Methodology: This study relies on secondary data from online-published papers. The researcher used a variety of sources, including Google Search, PubMed, Google Scholar, governmental websites, Cochrane, PsycInfo, journals, periodicals, and news sources, among others, to look for empirical primary studies and earlier reviews. The goal of the study was to understand how psychosocial interventions can help individuals with alcohol use disorders prevent a relapse in an Indian context.

Discussion and Conclusions: This study identified a number of psycho-social challenges faced by individuals with alcohol use disorders, including morbidity, impairment, and physical, psychological, mental, and social issues. Psycho-social therapies, which concentrate on psychological, physical, and social health, cognitive behavior therapy (CBT), relapse prevention (RP), and motivational enhancement therapy, are the most crucial forms of treatment for substance use disorders (SUDs). The findings of previous research papers, it was found that psycho-social intervention is one of the most effective therapies for substance use disorder (SUD), addressing psychological, physical, social, and mental health. The preventive measures such as Relaxation techniques, Cognitive behavioral therapy, psycho-education about substance use, family care and support, and occupational rehabilitation soon would help the person to come to the mainstream of the society.

Keywords: Psychosocial interventions, relapse prevention, patients, alcohol use disorder.

Introduction

Alcohol use disorder is a psychosocial problem

Psycho-social refers to the dynamic interaction between a person's psychological and social traits (<https://papyrus-project.org/>). According to the 2019 National Survey, around 160 million people use alcohol, 22.6 million use opioids, 31 million use cannabis and other drugs, 1.08% use sedatives, 0.18% use cocaine, and 0.7% use inhalants. The International Classification of Impairment, Disability, and Handicap (ICIDH, 1980) found a strong link between substance use disorders (SUDs) and significant morbidity and impairment.

The Rights of Persons with Disabilities Act of 2016 defines a "person with disability" as a person who has a long-term physical, mental, intellectual, or sensory impairment that, when combined with barriers, prevents him from participating fully and effectively in society on an equal footing with others. In this review, 5016 papers matched our search, of which 4282 were shortlisted and abstracts were obtained from 734 researches, and 114 full text publications were examined among Indian substance users. The use of alcohol

was found to be 4.6%, with a male: female ratio of 17:1, followed by cannabis at 2.8% and opioids at 2.1%. In the category of dependent usage, 19% of alcohol users had a dependent pattern, whereas 0.25% of cannabis users had a dependence pattern.

In a study on substance use disorder impairment, social functioning was shown to be the most impaired, whereas cognitive functioning was found to be somewhat impaired. Drug addiction is recognized as a disability under Section 504 of the Rehabilitation Act, Section 34(1) and (e) of the Indian Mental Health Care Act 2017, Section 1557 of the Affordable Care Act, and the American with Disabilities Act (ADA of 1990), all of which have an impact on the world.

Addiction to drugs severely impedes a significant aspect of life. As a result; the study suggests that substance use disorders (SUDs) affect people individually as well as collectively. Examples of Individual and societal social issues and impairments affecting numerous aspects of life are learning, working, socializing, interacting, communicating, and collaborating with others (Sidana and Kaur, 2021).

Individuals, families, and societies all have different patterns of alcohol consumption, which leads to the development of alcohol-related issues. According to the WHO, adults over the age of 15 use 6.2L of pure alcohol per year, which equates to 13.5g of pure alcohol per day. Alcohol use accounts for almost 5.1% of the worldwide illness burden, and it kills nearly 3.3 million people each year. There were numerous sorts of alcohol usage, including social drinking, binge drinking, harmful drinking, and hazardous drinking.

Alcohol affects both physical and mental health, as well as economic and societal effects like cancer, genitourinary, neurological, and physical complications. It also has an impact on sexually transmitted diseases and sexual cravings, social withdrawal from others, unlawful activity, and traffic accidents. In general, India's public health was becoming increasingly affected by alcohol intake. Psycho-educational supports as well as professional therapy are necessary (Kumar, 2018).

Between 1980 and 2000, the consumption of pure alcohol per person across the Asian subcontinent increased by 50%, making it the fastest-growing region. 3.5% of all diseases, including mortality and disability, were brought on by alcohol. Between 1972 and 1996, India's per capita consumption of alcohol by adults over the age of 15 increased by 106.7%, following the trend of more industrialized nations. The pattern of drinking in India has changed from irregular, ritualistic consumption to frequent, social consumption.

Nowadays, the most popular reason for drinking alcohol is to get intoxicated. The Ministry of Chemicals, the Ministry of Welfare, the Department of Excise, and the Ministry of Finance are all departments under the control of the Indian government and serve as sources for epidemiological research on alcohol consumption in India. With a growth rate of 17% annually, the Indian beer industry produces 4.32 million hectoliters of beer annually. India made foreign liquor' (IMFL): whisky, gin, rum, brandy, liqueurs, vodka) and the common varieties of 'country liquor' are arrack, desi sharab, and tari were projected to employ approximately 1.5 million people in manufacture and sales of alcohol beverages.

Indian research in northern India discovered a one-year prevalence of alcohol usage ranging between 25% and 40%. Alcohol usage currently ranges between 3% and 50%, with a higher prevalence among the less educated and poor. The global pattern of alcohol and government policies suggests that drinking is related with relative income. There is a cross-sectional relationship between alcohol use and per capita income. There were three types of prohibition policies such as complete prohibition of production and consumption; partial prohibition where one or more types of spirits were prohibited for certain days of the week or month; and total prohibition where one or more types of spirits were prohibited for certain days of the week or month. With past restrictions on alcohol consumption and production imposed by the federal and state governments, alcohol consumer behaviour has altered considerably. There is compelling evidence for the health professionals to increase health advocacy to policymakers and reduce rates of alcohol consumption. A hospital-based study found that substance usage at a young age increased from 2% to more than 14% worldwide.

A descriptive study of 50 people who attended a psychiatry de-addiction clinic at a private medical college in Bagalkot, Karnataka, from April to September 2016 and the goal of this study was to look at the clinical and socio-demographic profiles of men who have been diagnosed with alcohol dependence syndrome. The socio-demographic information was gathered using a semi-structured Performa. According to the study findings,

the initial mean age of drinking was 23-58 years. Family members brought 48.7% of patients for de-addiction or withdrawal symptoms. Peer influence was the most prevalent cause of alcohol introduction in 60% of patients, followed by experimentation and a family history of alcoholism in 68%. The study finds that they require early care with a family-centered strategy to avoid future difficulties (Dewani *et al.*, 2017).

Relapse prevention psychosocial therapies for people with alcohol use disorders

One of the most effective therapies for substance use disorders (SUDs) is psycho-social intervention, which focuses on psychological, physical, and social health. The therapist's goal in this therapy strategy is to provoke change in the patient's drug behaviour and cognition. Cognitive behaviour therapy (CBT), relapse prevention (RP), contingency management (CM), motivational enhancement/motivational interviewing, and brief intervention (BI's) for alcohol and tobacco use disorder are all examples of psycho-social treatment or intervention for substance use disorder (Jhanjee, 2014).

Psycho-social intervention is a low-cost method of reducing substance usage. The purpose of intervention is to modify behaviour and attitudes, as described in brief intervention components such as FRAMES (Feedback, Responsibility, Advice, Menu Options, Empathy, and Self-Efficacy) and DARES (Drug Abuse Resistance Education). The stage of motivation of substance use must be assessed-to make the individual aware of the potentially detrimental effects of substance use, followed by the need to minimize substance use and change one's attitude, lastly to reinforce the impulse to reduce/stop substance use. Empathy is used to enable communication with intervention, which may increase their individual strength, confidence, and self-efficacy in order to reduce/stop substance use. This brief intervention is highly effective psychological, emotional, and social motivation and enhancement strategy for substance users (Sarkar *et al.*, 2020). Psycho-social interventions are aimed primarily at understanding individual behaviour and overcoming psychological problems in one's life (Singh *et al.*, 2021).

Substance use disorders (SUDs) are prevalent globally and have historically been found in both genders. According to a US epidemiological survey, men were 2.2 times more likely than women to abuse various substances and 1.9 times more likely to have SUDs. According to a recent survey from the United States, 42% of the 41.2 million persons who used illicit drugs in the previous year were women; 40% of those women used tobacco and 50% used alcohol. A family history of substance abuse is a risk factor for substance use disorder.

The significance of psychosocial factors is crucial in the continuance of substance use in women; it is a complex pathway, found with a greater rate of physical or sexual abuse in childhood or adulthood. The first pathway is "predisposition and modeling," which includes SUDs among family members, peers, or partners, as well as a lack of information and easy availability of substance. The second pathway is social isolation, which leads to physical and mental problems as well as treatment ignorance. It results in a lack of social support and stigma. The third pathway involved the role of transition and life cycle changes, which might lead to increased drug availability and a lack of understanding about their negative effects.

Psychiatric comorbidities of both genders included psychiatric illnesses such as depression and anxiety disorder reported to be the most prevalent psychiatric diagnosis among women with substance use disorder (SUDs). In females, the consequences of SUDs are more physiological medical complications, such as harm to reproductive health or gynecological problems, irregular menstrual cycles and menopause, calcium absorption and osteoporosis, and high risk pregnancy, with the main concern being negative consequences to the fetus. Psychosocial implications in women with SUDs make them more vulnerable to sexual, physical, and domestic violence. As a result, a unique strategy to psychosocial treatment of women at the individual, familial, and systemic levels is required, such as insights into psychological and social relationships for substance use disorders (Thomas and Pandian, 2015).

The severity of alcohol dependency requires investigating the relationship between family history, age of initiation of drinking, length of alcohol intake, and severity of alcohol dependence in an Indian setting. In Banaras Hindu University, Varanasi, 100 samples of alcohol-dependent patients were collected using the Diagnostic Statistical Manual 5. Socio-demographic and clinical Performa questionnaires were administered. It was determined, both family history and age of drinking were substantially associated with the severity of alcohol dependency ($p < 0.05$), although duration of alcohol consumption and other interactions were not significantly connected with the severity of alcohol dependence. The study concluded that two important triggering variables of alcohol dependency in a broader community sample are the age of drinking onset and a positive family history. There is a need to counsel and focus on prognostic aspects of alcoholism, as well as

to develop government policies and programmes to restrict alcohol intake with the support of community psychology. The various counseling settings, such as school-based clinics, community to raise awareness and general hospital, need to be developed to avoid alcoholism in the community (Lakshmi, *et al.*, 2015).

Psycho-social therapies are designed to address psychological, social, and substance-related problems, and different stages of treatment incorporated the family and community to assist with social reintegration into society's main stream. Motivational interviewing, brief interventions, family counselling, contingency management, and self-help groups are all examples of psychosocial interventions that can help people recognize their drug-related difficulties. Motivational intervention, which is a dialogue style used to boost their own motivation to modify their cognition and behaviour, is discussed further below. The author has employed five stages 1) showing empathy for the client; 2) assisting the client in identifying gaps between their behaviour and their aims 3) Refraining from arguing with the patient about their intentions and conduct. 4) dealing with the patient's reluctance to discuss some topics, and 5) bolstering the patient's sense of self-efficacy. Brief intervention is a conversational style of motivational interviewing used to address problematic drug use, which includes brief sessions, changing their behaviour, and negotiating with five phases known as the 5As- ask, advise, assess, assist, and arrange (Babore *et al.*, 2017).

Cognitive behavioral therapy (CBT) is a type of psychotherapy that includes a variety of behavioural methods. Cognitive therapy is founded on the concept that how people perceive and process reality influences drug treatment. Clients were assisted in identifying and dealing with substance use triggers. After being identified with drug addiction issues, cognitive treatment was administered. Family therapy was utilized to treat drug use and behaviour disorders, including psychological symptoms including adjustment, marital problems, and high-risk sexual behavior.

Interventions incorporating concrete rewards for client behaviours are referred to as contingency management. This method involved recognizing and managing the relationship between behaviour and its outcomes. For instance, with opiate and cocaine users, as well as with homeless people, Contingency management was utilized to reinforce and reward compliance. Self-help groups are non-profit organizations where people met to discuss and address issues such as alcohol, drug, or other addictions. According to one study, psychosocial intervention is well established as part of drug treatment and recovery, and it plays an essential role in treating drug issues and addictive behaviours. In Europe, psychosocial interventions are widely used in the treatment of people with drug addiction problems. It can assist drug users in identifying their drug-related issues, making a commitment to change, and reinforcing their accomplishments (Lakshmi, 2015).

The efficacy of psychosocial interventions in preventing relapses in patients with alcohol use disorder

Alcohol-related brain damage (ARBD) refers to a variety of neuropathological abnormalities associated with psycho-neurological syndromes, such as Wernicke's Korsakoff syndrome. A meta-analysis of 30,704 postmortems from 11 centers in America and Europe discovered alcohol-related alterations in the brain in 1.5% of the general population and 30% of heavy drinkers.

Various intervention programmes were developed over a two-year period and included five therapy phases

1) Stabilization, which was the treatment of acute withdrawal symptoms and encephalopathy. 2) The evidence for psycho-social assessment was based on rapid improvements in cognitive and behavioral abilities. 3) Therapeutic rehabilitation with a greater emphasis on behavioral skills 4) Adaptive rehabilitation is cognitive progress and the adaptation of the social and physical environment to maximize independence. 5) Social integration and relapse prevention is the prevention of alcohol relapse through social ties.

In late 1980, two studies were conducted to follow up on 104 patients aged one to two years who were referred to a specialty inpatient rehabilitation centre. Adoption of person-centered goals in the framework of 'structured' life and daily routines, with a focus on self-care skills and group orientation. When comparing these studies, 53% of Lennane's subjects and 27% of his own subjects believed that specialized service is connected with better outcomes. People working with cognitive damage may benefit from rehabilitation, which provides a viable therapeutic intervention (Wilson *et al.*, 2012). A study was done to evaluate the efficacy of social work intervention using a systematic approach to improve the overall health of opioid addicts in addiction treatment centers. The study's goal was to determine the effect of social work

intervention on improving general health among opioid addicts in addiction treatment centres. It was an experimental study (before and post-test with a control group) of 60 drug-addicted people who had received treatment in addiction centres. The sample was divided into 30 testing and 30 control groups, with the testing group receiving 10 sessions of intervention and the control group receiving no intervention after four months of follow-up testing with a general health questionnaire. The study's findings revealed that systematic social work intervention approaches were helpful in improving the general health of drug-addicted individuals in treatment, including physical, psychological, and social issues. The inference yielded that the Social work intervention has been shown to reduce anxiety, sleeplessness, and somatic symptoms, improve self-understanding and self-recognition, and improve social functioning (Raheb *et al.*, 2016).

In another study done titled Psychiatric hospitals and social integration of people with psychiatric disorders: a five-country prospective cohort study with the goal to see how frequent admission to psychiatric hospitals affected the social integration of patients with psychiatric problems. This study sought to determine whether long length/durations of stay and (LOS) recurrent admissions to psychiatric wards were connected with disparities in patients' social integration. The study method was a prospective cohort study in which data were collected from 181 patients hospitalized in the UK with ICD-10 diagnoses of psychotic, affective, or anxiety disorders. The baseline was social integration one year after admission using the six indices, which includes four dimensions: employment, housing, family situation, and friendship. Regression model assessments were carried out to test the relationship between long length of stay (LOS), the number of admissions, and the change in social integration across the study period (Smith *et al.*, 2020). This study looked at the effectiveness of interventions for reducing stigma associated with substance use disorders. The goal of the systematic review was to offer existing research that empirically evaluated methods for reducing stigma associated with substance use disorders. The length of stay in a mental hospital is connected with deterioration in the social integration of patients' key parameters of employment and housing, level of social integration of patients over the study. The findings revealed that 15% of the variance in long length of stay hospital impaired social functioning. This study underscores the relevance of policies and interventions aimed at reducing the length of hospital stays in order to preserve patients' social integration.

Conclusion

The purpose of this study was primarily to examine the findings of previous research article papers. It was found that psycho-social intervention is one of the most effective therapies for substance use disorder (SUD), addressing psychological, physical, social, and mental health. Psycho-social intervention aimed primarily at understanding individual behaviour and increasing the likelihood of overcoming psychological problems in one's life. The successful management of bio-psycho-social intervention rather than detoxification alone is found to be superior in relapse prevention in substance use disorders (SUDs). Many researchers have discovered that motivational intervening and enhancement therapy, cognitive behaviour therapy (CBT), and psycho education were effective in substance-addicted patients. Motivational interviewing, Relaxation techniques, Cognitive behavioural therapy, psycho-education about substance use, family care and support, and occupational rehabilitation soon would help the person to come to the mainstream of the society occupational rehabilitation. In addition, Social work intervention has been shown to reduce anxiety, sleeplessness, and somatic symptoms, improve self-understanding and self-recognition, and improve social functioning. Various studies also propounded the importance of self-help groups such as Alcohol Anonymous (AA) and Narcotics Anonymous (NA) in the prevention of relapse in people.

Declarations

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