



Scoping Review of Social Cognition in Methamphetamine Induced Psychosis and Primary Psychotic Disorder

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INTRODUCTION

Substance abuse is associated with poor outcomes in people with early psychosis. Community Strengthening and Family Training (CRAFT) is an evidence-based approach that helps families reduce substance use, engage in treatment, and improve family well-being; however, it was not studied for psychosis and substance use. The current study sought to design and test a CRAFT based telehealth intervention for families with early psychosis and substance abuse. Twenty family members completed 6-8 CRAFT adapted for early psychosis telehealth sessions (CRAFT-EP). Participants completed an assessment battery at baseline, midpoint, and end of intervention, as well as 3 month follow-up, post-session surveys, and a focus group to determine mean percentage of sessions completed, mean program satisfaction ratings, telehealth preferences, and qualitative feedback. Participants completed each session and satisfaction with the program was excellent or near excellent in 99% of sessions. Half of the participants preferred a primarily virtual hybrid program, while the other half preferred only virtual visits.

DESCRIPTION

The most beneficial topic was communication and participants requested more written examples and resources. In a pilot randomized controlled trial comparing treatment as usual plus CRAFT-EP with treatment as usual, CRAFT-EP is feasible and acceptable as an active intervention. Mental health problems in children and adolescents are increasingly common due to the coronavirus disease (covid-19 pandemic). We aimed to synthesize global evidence on the epidemiological burden and correlates of Child and Adolescent Mental Health (CAMH) problems during this pandemic from existing systematic reviews

and meta-analyses in of this umbrella review. We assessed 422 citations using the Joanna Briggs Institute (JBI) methodology and identified 17 eligible reviews of moderate to high methodological quality. The majority of studies found a high prevalence of anxiety, depression, sleep disorders, suicidal ideation, stress-related disorders, attention deficit disorders/hyperactivity disorder and other mental health problems. CAMH-related factors such as age, sex, place of residence, educational attainment, household income, sedentary lifestyle, social media and internet use, comorbidities, family relationships, psychosocial conditions were also reported in the reviews parents, experience those related to COVID-19, school closures, online learning and social support. Because most studies were cross-sectional and used non-representative samples, more research on representative samples using longitudinal and intervention designs is needed. Finally, multifaceted psychosocial care services, policies, and programs are needed to alleviate the burden of CAMH issues during and after the pandemic. The purpose of this study was to investigate the use of antidepressants in non-psychiatric wards. Data were collected from 2014 to 2018 on patients treated with antidepressants in the non-psychiatric wards of the First Affiliated Hospital of Xi'an Jiaotong University. The annual growth rate of antidepressant use averaged 22.83%. SSRIs, Flupenthixol-TCAs, SNRIs, TCAs, SARIs, and NaSSAs were ranked in descending order based on the number of patients discharged. The main drugs used in SSRIs and Flupenthixol-TCAs were sertraline and flupenthixol-melitracen, respectively. The most common departments prescribing SSRIs, Flupenthixol-TCAs and SNRIs were neurology, cardiology and geriatrics [1-4].

CONCLUSION

According to drug classification, all patients were taking SSRIs,

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but the specific drug used in the unclear diagnosis group was flupenthixol-melitracen, while sertraline was used in the clear diagnosis group. The proportion of flupenthixol-TCA in the anxiety group was higher than in the depression group, while SSRIs have the opposite effect. More guidelines are needed to improve the identification of comorbidities between specialized diseases and psychiatric disorders. In addition, multilevel training to perform standard diagnosis and treatment of mental disorders should be implemented in clinical practice.

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CONFLICT OF INTEREST

The author's declared that they have no conflict of interest.

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