

**Results:** Medication-based treatments included an assortment of agents from several classes of medication, including benzodiazepines, selective serotonin reuptake inhibitors [SSRIs], the serotonin dopamine antagonist-[SDA] agent Olanzapine and Sulpirid, atypical antipsychotic drug of the benzamide class used in low dosage to treat anxiety and mild depression. Beside prescribed benzodiazepines, the most used drugs in reducing anxiety-depressive symptoms were SSRI- agents 54.09%, followed by SDA 42.62%. Escitalopram was prescribed in 17 cases or 27.86%, mostly in the dosage of 10 mg. The second agent prescribed for such conditions was Sertraline, in 16 cases or 26.22% while dose ranges varied from 50 mg mostly at 68.75%, 25% of them took 100 mg, and the least prescribed dose was 150 mg (6.25%). The next mostly used medications were SDA agents, on the first place Sulpirid in 14 cases of 61 or in 22.95% mostly in the dosage of 50 mg twice a day. The second SDA agent was Olanzapine prescribed in 12 cases of 61, or 19.67% and in all cases in the anxiolytic dosage of 5 mg.

**Conclusions:** Our analyse indicate that both SSRI and SDA agents in certain doses are medications for the treatment of alcohol dependence co-morbid with anxiety-depressive symptoms. Escitalopram was the most prescribed SSRI, and on the second place Sertraline. On the third place was SDA agent-sulpiride succeeded with olanzapine, both in anxiolytic doses.

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## SELF-FORGIVENESS IN ALCOHOL USE DISORDER TREATMENT

Nikola Babić & Vesna Šendula-Jengić

Psychiatric Hospital Rab, Rab, Croatia

Self-forgiveness is a strategy which leads to positive self esteem and resolves emotional distress (e.g. feelings of guilt, shame, anger, regret and disappointment) caused by perceived discrepancy between ones values and behavior. Process of genuine self-forgiveness involves emotional coping (e.g. regulation of shame) and problem coping - behavioral change.

Shame is a specific emotional response often found in alcohol abusing individuals related to harmful behaviors during influence of alcohol or alcohol abuse itself and it generally focuses on the self (e.g. „I am a bad person“). It is deleterious for someone's self-respect, leads to negative affect and alcohol craving and it can enhance proneness to use alcohol as an emotional coping strategy.

In Psychiatric hospital Rab we conducted a research (N=60) to investigate relationship between self-forgiveness trait and feeling of shame, rumination about alcohol use, negative affect and alcohol craving. Also, we investigated differences in negative affect and alcohol craving between groups of inpatients divided by level of self-forgiveness. Our poster presentation reports our results.

Our goal is to emphasize the importance of self-forgiveness in AUD treatment and therapeutic techniques which support this process as a mean of treatment outcomes improvement.

## OPRAŠTANJE SEBI U TRETMANU POREMEĆAJA UZIMANJA ALKOHOLA

Opraštanje sebi definira se kao strategija koja uključuje pomak ka pozitivnijem samopoimanju osobe kako bi se razriješio emocionalni stres (npr. u vidu krivnje, srama, ljutnje, žaljenja i razočaranja) koji dolazi iz percipiranog nesklada između vrijednosti do kojih osoba drži i njezinog ponašanja. Proces iskrenog oprاشtanja sebi uključuje suočavanje usmjereni na emocije (npr. regulacija osjećaja srama), kao i suočavanje usmjereni na problem u vidu promjene ponašanja koje je dovelo do nesklada s vrijednostima osobe.

Sram je specifični emocionalni odgovor koji se često javlja kod osoba koje zloupotrebjavaju alkohol vezano za štetna ponašanja počinjena pod utjecajem sredstava ovisnosti ili zloupotrebe same po sebi te se generalno fokusira na samu osobu (npr. „Ja sam loša osoba“). Osjećaj srama posebno je štetan za samopoštovanje osobe, dovode do povećane razine negativnog afekta i alkoholne žudnje te može povećati sklonost osobe da konzumira sredstva ovisnosti u pokušaju suočavanja s tim osjećajem.

U Psihijatrijskoj bolnici Rab provedeno je istraživanje (N=60) na uzorku pacijenata na liječenju od poremećaja uzimanja alkohola kako bismo ispitali povezanost crte oprashtanja sebi s razinom osjećaja srama, ruminacijama o pijenju alkohola, negativnim afektom i alkoholnom žudnjom tijekom tretmana. Također, ispitali smo razlike u negativnom afektu i alkoholnoj žudnji između grupe pacijenata podijeljenih po stupnju oprashtanja sebi. Ovom poster prezentacijom izvještavamo o rezultatima našeg istraživanja.

Cilj nam je istaknuti važnost oprashtanja sebi u tretmanu poremećaja uzimanja alkohola i terapijskih postupaka koji podržavaju ovaj proces radi poboljšavanja ishoda liječenja.