Addiction treatment in Japan

Psychotherapeutic Approaches to Patients with Addiction



Sapporo Medical University Miki Mental Clinic

Toshikazu Saito, MD, PhD

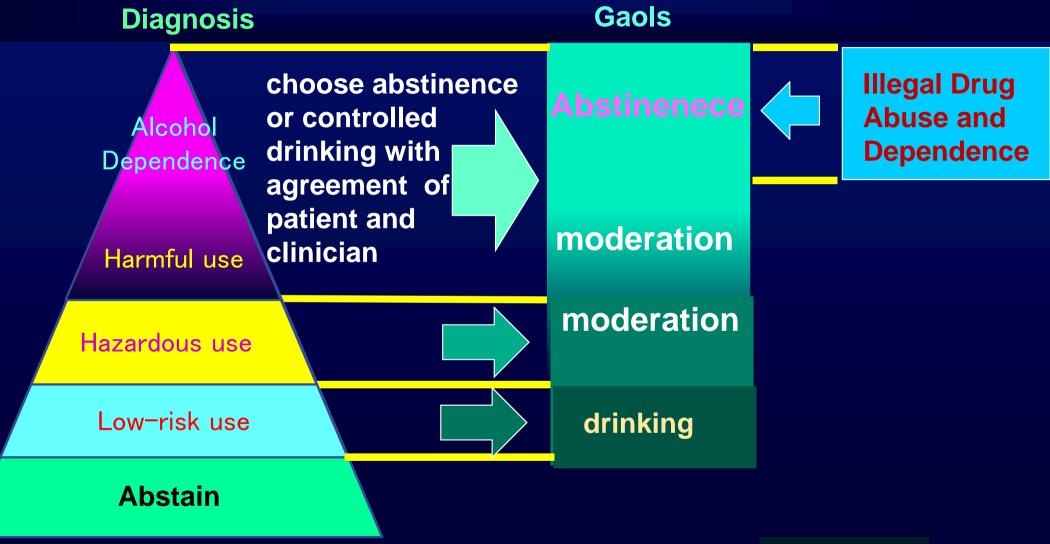
Youkoso-Gairai (Welcoming Outpatient to our Clinic with Warm Hospitality)



At the beginning

- Showing admiration patient for his/her courage to decide visiting to our clinic to stop/reduce alcohol/drug use.
- Taking patient's history carefully, not only medical but also all his/her life.
- Taking clinical course of addiction of the patient
- Never report his/her problem of addiction to the police
- Treatment
 - Rather keeping therapeutic relationship with patient than leading patient to face his problems
 - Having group-psychotherapy and CBT
 - Not blaming to slip down using drug again
 - Leading to join self-help group

Treatment Goals for Substance Use Disorder



atric Center

Brief Intervention



- Brief intervention: a technique to initiate change for an unhealthy or risky behavior such as problem drinking.
- As an alcohol intervention it typically targets harmful/hazardous drinking. A prevention approach used by health care professionals to help at-risk drinkers make an informed choice about alcohol use.

Based on a motivational interviewing that is evidence-based, directive, client-centered, nonjudgmental & non-confrontational; and counseling that aims to enhance intrinsic motivation and behavior change by helping patients to explore and resolve ambivalence.

- Crucially, it includes 'screening' or 'identification' whereby drinking risk level is assessed by a validated tool e.g., Alcohol Use Disorder Identification Test (AUDIT).
- When assessment is complete subjects receive personalized feedback on their alcohol consumption and related behaviors.
- Subjects are prompt to think differently about their alcohol use and ultimately consider what might be gained through change. Brief interventions typically consist of 1–4 short counseling sessions.

Group Therapy



- Group therapy has long been a proven, effective method.
- This type of dynamic is very different from a one-on-one session, and it can be quite powerful. This type of setting also helps members realize that they are not alone and allows them to share information and experiences with one another. Sharing experiences and feelings has been shown to reduce stress, guilt and pain among group therapy members.
- A group therapy setting not only allows sharing with others, but it also means that group members will be able to motivate and cheer each other on.
- If a group member has a specific
- goal he/she wishes to attain,
- the group setting will enable
- others to provide positive feedback
- and ongoing support.



SMARPP

Self-teaching workbook





The self-teaching workbook used in the present study was prepared by simplifying the Serigaya Methamphetamine Relapse Prevention Program (SMARPP) workbook that we previously used in a comprehensiveoutpatient drug-dependence treatment program.

The SMARPP workbook, which is based on the Matrix model5 used in the USA, is simplified by consultations with the staff of a juvenile classification home, and it is called SMARPP-Jr.1 The SMARPP-Jr. provide psychoeducation on drug abuse and dependence, workbook consists of 12 parts that are designed to training in coping skills for drug cravings, and resource information for recovering from drug abuse and dependence. If the subject completes one part per day, the entire workbook can be completed

Content for relapse prevention session of e-SMARPP

1. What is drug dependence?

Video ➤ Mental and physical consequences caused by drug use(11'02")

- \succ Changes in the brain (11' 39")
- \succ How to stop a drug craving (7' 43")
- Exercise Think about your pros and cons for drug use and quitting drugs.
- Define your drug use situation: when, where, who, why,
- what and emotion.
- 2. Triggers of drug use
- Video \succ Process of craving and drug use (5' 27")
- ≻Various internal and external triggers of drug craving(11′00″)

Anchors keeping you from drug use (5' 01")

Exercise ■ Define your internal and external triggers.

Who and what are your anchors?

課題1-2 どんなとき使っていましたか?



あなたはどんなときに、薬物・アルコールを使っていましたか? どんなときに使いたいという気持ちが強くなりましたか? 何曜日の何時頃でしょうか? 何をしているとき、何かをする前、何かをした後でしょうか? 誰かと一緒に使っていましたか?それとも一人のときですか? どんな気分のときでしたか? 具体的な時間帯や状況、気分について、思いつくだけ書いてみてください。

Residential Treatment

Provides an alcohol and drug-free environment & 24h medical care

Varies in intensity and the kind of treatment offered;

Therapeutic exercise (long distance walk) **Psychoeducation** **Occupational therapy for** in/out-patient with addiction: lunch. Hospital staff & patients cooking & eating together

Beneficial in patients with severe dependence, severe withdrawal, or psychiatric/medical comorbidity;

Beneficial where patients need a change of environment, have greater functional impairment, or are at very high risk of relapse.



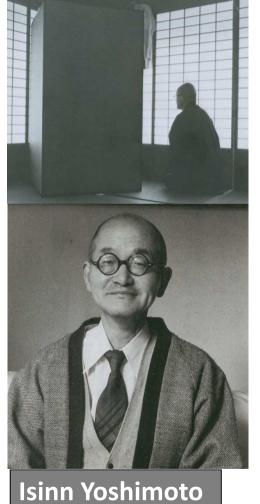




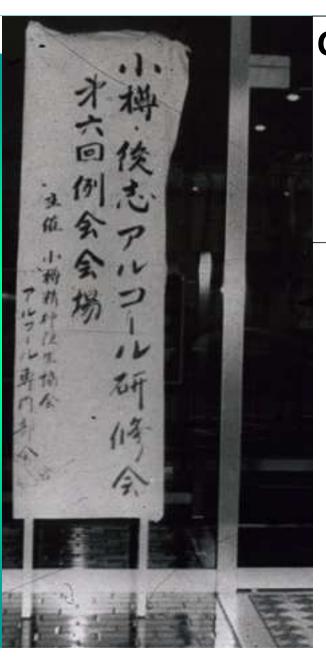


Naikan (self-observation) Therapy





- Mr. Isinn Yoshimoto modified "misirabe", an ascetic practice for Buddhists, to create Naikann Therapy.
- Patient sits in the corner of a room covered with a folding screen, and checks what (my mother) did for me, what I did back to (my mother), what I troubled (my mother) with.
- Patient is interviewed every hour and asked what s/he checked.



Community Based Medical Care for Patients with Addiction

Psycho-education for medical staff in the community, including public health nurses in health centers, social workers in welfare offices are very important for community-based medical care for patient with addiction



Alcoholics Anonymous and Danshukai



- The Japanese self-help group Danshukai has similarity with Alcoholics Anonymous (AA).
- Both AA and Danshukai share the same primary purpose of staying sober and helping other alcoholics achieve sobriety. They also share the fundamental principals of attending meeting and encouraging equality and confidentiality among members.

The definitive difference is that Danshukai abandoned anonymity.

 Danshukai has lists of members and managing cost of Danshukai is covered with membership fee (not donation).

Annual meeting of Nippon Danshu Renmei





Narcotics Anonymous



Half way house

DARC was Established in 1985 by Mr. Tsuneo Kondo, recovered methamphetamine addict



Drug Addiction Rehabilitation Center

There are over 50 DARC In Japan



Father Meaney was in front of entrance of Sanya MAC

Father John Meaney from Maryknoll Fathers established Halfway house for alcoholics in Ohmiya in 1974. Father Meaney addicted to alcohol in Kyoto and he recovered from alcoholism with AA in the US. After returning to Japan, he decided to help other alcoholics achieve sobriety by AA 12 steps.

In 1975 he started AA meeting with 12 steps. In 1978, Father Meaney established the first Maryknol Alcohol Center (MAC) in Minowa. There are 10 MAC in different cities and they have AA meetings in many cities now.



Mr. Tsuneo Kondo