Organization of the narcological care in the Russian Federation

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CND Thematic Discussions
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Areas of the state policy implementation

- Decrease in alcohol consumption and other psychoactive substances use
- Improving the demographic situation in the country
- Increasing the life expectancy of the population
- Reduction of mortality in working age population
- Creating a unified prevention environment, with healthy lifestyle and broad preventive measures as its main components
In the Russian Federation the full cycle of rendering of specialized medical care to patients with drug addictions is developed and introduced in practice

- Primary prevention
  - Formation of the treatment subculture as an antithesis for the alcohol and drug subcultures
  - Rehabilitation and anti-relapse activities
  - Psychotherapy and personality disorders correction
  - Treatment of craving

- Secondary prevention
  - Intervention: an inclusion in prevention or treatment and rehabilitation programs
  - Treatment of alcohol withdrawal syndrome
WHAT IS COMMON
Systematic and comprehensive approach
Interaction between different sectors of society (state structures, public and religious organizations)
Motivational interventions – both individual and group ones
Pharmacological treatment
Different methods of psychotherapy
Psychosocial and behavioral interventions
Drug-free rehabilitation programs
Therapeutic communities
Life skills training, vocational training, as well as sports and recreational activities
Ensuring the availability of drug abuse treatment services during the COVID-19 pandemic

- Partial reassignment of the specialized drug treatment beds to provide medical care to people who use drugs with COVID-19
- Maintaining a full spectrum of emergency and intensive care for narcological patients
- Testing for COVID-19 before the hospitalization of all patients admitted to a drug treatment hospital
- Organization of filtration (diagnostic) departments
- Separation of patient flows
- Enhanced room disinfection measures
- Personal protective equipment for employees
- Face masks wearing for all patients
- Use of bactericidal irradiators, quartz lamps
- Use of sanitizers, disinfection solutions and gels
- Social distancing
- Remote thermometry
- Examination of all employees
- Self-isolation of infected employees
Anti-drug media campaign

Secondary prevention:
Socio-therapeutic intervention (early detection and intervention)

Tertiary prevention:
Treatment and rehabilitation programs for the various groups of patients

Isolation to the corrective-labour establishments of the Federal Penitentiary Service and mandatory treatment

Obligatory (alternative) treatment by the court definition

Primary prevention:
Identifying risk factors
Educational programs in the organizations and in mass media

Anti-drug media campaign

The scheme of social pressure on narcological population
Risk factors for addictive disorders are targets for primary prevention

1. Genetic factors
2. Congenital risk factors: complications during pregnancy or childbirth
3. “Mother-child” complex
4. Attention deficit hyperactivity disorder and intracranial hypertension found in children aged 2 to 6 years
5. Risk factors related to the psychological atmosphere in the family: hypoguardianship, hyperguardianship
6. Information environment as a risk factor
7. Adolescent crisis (early rapid puberty)
8. Psychological problems during adolescence
9. Problems relating to socialization in the reference group
10. Exposure to alcohol or drug subculture
Medico-genetic approach to personalization of prevention and medical care

- Personalization of prescription of medications
- Personalization of the rehabilitation process
- Personalization of dependent behavior prevention
- Personalization of the educational process
Study of alcohol and other substances use among the hospitalized somatic patients

Scientific Research Executors:

Moscow Research and Practical Center on Addictions of the Moscow Healthcare Department

City Clinical Hospital No. 68 named after V.P. Demikhov of the Moscow Healthcare Department

Lovisenberg Diakonale Hospital, Oslo (Norway)
RESULTS
obtained at the chemico-toxicological lab of the Moscow Research and Practical Center on Addictions

- More than 3,000 blood samples analyzed

- Alcohol abuse revealed in 15% of samples (phosphatidylethanol (PEth more than 0.3 µmol/l) and carbohydrate deficient transferrine (CDT more than 1.3)

- Narcotic drugs and psychotropic substances (including diazepam and phenobarbital) abuse revealed in 6.3% of samples
Stages of the comprehensive prevention program in labor collectives

1. An obligation to undergo examination and to visit the addiction psychiatrist in case of narcological disorders detection is mentioned in the additional agreement to the employment contract.

2. Preventive measures are carried out on a contractual basis. Financing: enterprise funds and social insurance funds.

3. The principle of confidentiality is observed (visits for persons with the increased CDT level will be organized in a separate narcological office outside of the plant territory)
Thank you for your attention!