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Research Article

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## [Internet Addiction and its Relationship with Attachment Styles Among Tunisian Medical Students](#)

Internet addiction is a growing addictive behavior and a major public health problem worldwide. Several psychological factors can contribute to the problematic use of the Internet. This study aimed to determine the prevalence of Internet Addiction (IA) in a sample of university students and to examine the relationship between IA, self-esteem, and attachment styles.

The present study was a cross-sectional study, involving 135 students from the Faculty of Medicine of Monastir. The participants completed a questionnaire, which contained the socio-demographic data, the reasons for Internet use, the Young Cyberaddiction scale to seek IA, the Relationships-style-questionnaire-RSQ to assess attachment style, and the Rosenberg Self-Esteem Scale (RSES).

The mean age of the students was  $21.5 \pm 1.9$  years old. They were 112 (83%) females. The prevalence of Internet addiction was 23.7%. The average connection time was  $3.5 \pm 1.8$  hours/day. The most frequent online activities were chat (online discussion, forums ...) in 94.8% of cases followed by download activities (78.5%), scientific research (75.6%), online games (23.7%), and online shopping (13.3%). IA was associated with school failure, alcohol use, online gaming, and low self-esteem. The majority of the participants (84.4%) in this study reported an insecure attachment style. Logistic regression analysis showed a strong association between IA and fearful attachment style.

IA was frequent among students. Fearful attachment style was found to be a risk factor for IA. This study highlights the impact of relationships between child and their caregivers on the development of addiction.

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Research Article

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## [Patient's perception of the benefits of long-term opioids: Reinforcement associated with short-term effects](#)

The appropriateness of opioid therapy for patients with Chronic Non-Malignant Pain (CNCP) has been questioned by a variety of researchers and policy makers [1-3]. One comprehensive review concluded that the benefits of such therapy for pain relief and functional improvement are modest at best and that opioid therapy is associated with significant harms including various symptoms (e.g., headache, nausea, sedation), development of opioid use disorder, fractures and death from overdose [3].

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Mini Review

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## [Cognitive behavioral therapy treatment for drug addiction](#)

Drug addiction remains a major health concern following its devastating consequences to the users and the economy. Current statistics show a rising trend in substance abuse around the globe with approximately 284 million people engaging in drug abuse. Various approaches are used to treat the victims of drug abuse. Cognitive behavior therapy, a form of nonpharmacological intervention, has also been shown to be an effective treatment option for drug addiction. The use of Cognitive Behavioral Therapy (CBT) has grown since the 1970s to become one of the most important models of psychotherapy in this decade. Various empirical studies have shown the efficacy of CBT in well-controlled trials. A total of 19 randomized trials (cases) (with over 1400 patients treated) were selected and studied. In the various cases, results showed that patients were treated for drug and substance abuse disorders with the majority being those who abused cannabis, cocaine, alcohol and other opioids. In most cases, the CBT techniques that were used for drug addiction included cognitive restructuring, relapse prevention and contingency management. Components of CBT for drug addiction include skills and training, amplification of non-substance-related activities, approaches for managing urges, drug rejection and improvement of social aptitudes. Cognitive restructuring focuses on the identification of misconceptions and influencing the way people think about themselves by eliminating distorted thinking. Relapse prevention focuses on the identification and prevention of high-risk situations that may trigger the patient to engage in drug abuse. Contingency management reinforces positive behaviors and reduces negative behaviors through the use of rewards and incentives.

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['Life-Changing Bubbles' – How carbonated water can relieve swallowing problems for many dysphagia sufferers worldwide](#)

Today, there are said to be some 590 million people of all ages around the world, who are suffering from a range of swallowing problems – probably about 4 million in the UK. Either living at home or as residents in some 20,000 Care Homes, with perhaps another 25,000 as patients in hospitals every day.

Professor David Smithard, of the Lewisham and Greenwich NHS Trust, has been leading a national campaign for some years to raise general awareness of Dysphagia and to improve the treatment of patients with varying conditions.

He and his team at the Queen Elizabeth Hospital have now completed a detailed Review of the use of carbonated water (CW) in the treatment of Dysphagia, which has just been published and can be accessed here:

<https://www.mdpi.com/2308-3417/8/1/6>

The Review concludes that further evidence-based research is essential before CW can be adopted as standard in clinical practice – but that although the amount of evidence is small, there is a suggestion that swallows are safer and that secretion management improves, and consequently until further studies are undertaken, Carbonated Water should be limited to individual patient use.

My experience as a Dysphagia sufferer is that the use of CW has resulted in life-changing benefits, and this paper is devoted to describing how CW worked for me, and what the practical requirements are, so that many others may be able to benefit as I have done.

The paper has three sections: My Personal Experience, Practical Considerations, and Conclusions.

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