

Overview

Alcohol and personality

Alcohol y personalidad

Mario Souzza y Machorro*

«In the approach of people with addictive disorder and dual pathology, scientific knowledge must be applied, both of medicine and of current psychiatry and psychology. Treatment based on scientific evidence should focus on the patient, be comprehensive, be integral of quality and free access. All this will help avoid the mistakes of the past and will prevent severe stigmatization and again, both to the patient as well as to their families.»

*Spanish Society of Dual Pathology,
Dual Pathology Foundation,
World Association of Dual Disorders
World Association of Psychiatry.*

Souzza y Machorro, Mario, *Alcohol and personality*. Alfil Publishing House, Mexico, 2018.

The review of this book observes a paper written with the aim of «scientific journalism» dedicated to education for mental health,

* Psychiatrist (UNAM) and psychoanalyst (UNAM-IMPAC) with Masters in Medical Psychotherapy (UNAM) and Psychoanalytic Psychotherapy (CIES-SEP). Pioneer in Mexico in the Teaching of Addictions and Dual Pathology souzaym@yahoo.com
Translation was not reviewed by the author.

Received on April 18, 2019. Accepted on April 30, 2019.

presented last November 30 at the National Institute of Psychiatry «Ramón de la Fuente Muñiz». It comes from research and teaching work over the last 5 decades, in different health and educational institutions in Mexico and abroad. It is a bridge between the scattered scientific documentation in the world literature and the health personnel (HP); It gathers opinions of researchers and clinicians from universities and care centers to spread scientific truth and achieve a better diagnostic-therapeutic action of Dual Pathology (DP).

Today clinical interventions are required to be simultaneous and specific; based on judgments of pharmacological weighting of risk-usefulness and cost-effectiveness that go beyond the cost-benefit perspective. The use of recommended protocols is crucial in the general strategy that includes complementary psychotherapeutic modalities. Their goals are: Reduction of demand; Control of pathogenic coexistence and its consequences; Promotion of the Therapeutic Alliance and achievement of adherence to treatment; Elimination of recidivism; Inclusion and long-term strengthening of growth factors, and acquisition and development of self-affirming skills for life. The text in 343 pages, includes 13 chapters: Panorama of the Addictive Disorder (AD) by alcohol dependency and its scopes. Classification of Disorders by Consumption of Alcohol (ICD-10). Etiopathogenesis and role of the Personality Disorders (PD). Neurobiology of dependency, neuroimaging and neuropsychology. AD for alcohol dependence and PD. Clinical approach and initial interview of the dual patient (DPa). Therapeutic alliance and attachment to treatment in psychoanalysis and psychotherapy. Avoidance of relapses, repair of damages and prevention. Rehabilitation and social reintegration of the DPa. Epilogue, summary and a glossary of terms, for the understanding of the interested parties not familiar with the subject. A list of references, with more than 50 years of the topic in the world literature is attached. Under a humanistic vision that includes the people suspected

of the case, the diagnosed DPa, the expected medical actions and the participation of the HP, it will have to promote rehabilitation and social reintegration actions for the benefit of all.

The text offers a journey through the history of AD due to alcohol dependence from the classification of its disorders for diagnostic-therapeutic purposes in accordance with the current international vision. The personality is visualized as «the sum of the interactions between the constitutional aspects, the experiences of early development and later life» and their pathological manifestations as participants in the origin of the AD by dependence. Their joint prevalence and main characteristics that define them and their classification in groups are indicated: A (rare; strange eccentric), B (dramatic-emotional) and C (anxious-fearful). To this is added the psychodynamics of the character traits pointed out by Fromm, which Silva picks up from the conjugal relationship to highlight the so-called mature character (loving and productive) within the framework of the premises of love: knowledge, care, respect and responsibility.

Likewise, the hypotheses about the comorbidity between PD and AD by dependency, and the types most frequently found in the clinic, are discussed to recommend the pertinent management options. Contemporary advances on neurobiology highlight the use of neuroimaging as a resource that contributes to diagnosis and its treatment.

The discussion focused on the etiopathogenic aspects of both disorders is essential to understand the interaction between both pathologies. The usefulness of the neuropsychological evaluation of the DPa is proposed. The importance of the relationship between the professional and the DPa, the genesis and the vicissitudes of the therapeutic alliance and the consequent attachment to treatment, both resources, fundamental tools of every healing-rehabilitating process in medicine, especially among carriers of the coexisting diseases.

The psychotherapeutic and psychoanalytic vision that broadens and enriches the text from its complementary character to the psychopharmacological handling, is approached from the consideration of a useful and practical clinical resource. In the end, the prevention of relapses from a cognitive-behavioral perspective is described, as a preferred approach at present. Emphasis is placed on the importance of rehabilitation, supported by the activities of occupational therapy, the decisive pillar of social reintegration. Likewise, the repair of the damages caused by the dependence from the neuropsychological level as a link and social participates, with emphasis on the prevention of cases.

The epilogue emphasizes the social responsibility of psychotherapy as a contributing element of therapeutics, as well as the contribution of the psychotherapist in the best practices for DP, given the great absence in the country of a national program for its care. It should be noted that the syndromic expression of AD for alcohol consumption refers to the clinical variety of them and their nosographic entities, for which the term is respected as it appears in the CIE-10. However, to refer to the phenomenon of dependence that causes this psychotropic substance (PSCT), instead of the old and imprecise term «alcoholism» the term of AD is used for alcohol dependence, as it is considered more descriptive. Likewise, the commonly used term of Addiction has been replaced by that of Dependence and the word Drug by substance PSCT. Addictive behaviors such as T. Mental, as scientific research in neuroscience has shown, indicate that «In the approach to DPa, scientific knowledge must be applied, both in medicine and in current psychiatry and psychology. Although, the absence of evidence in psychosocial work –in positivist terms– is not evidence of the absence of effectiveness, since not everything in psychiatry is documented and new and better designs are required to cover the clinical expression of those affected; Evidence-based treatment should focus on the patient, be comprehensive, quality and freely

accessible. This is where education for health at all levels becomes more necessary, although throughout the process that seeks to achieve and maintain health, it is also the place where the debate takes place and the doubts are clarified; precisely there, where the work of spreading scientific truth becomes essential.

The intra / interinstitutional coordination suggested by the Spanish Society of Dual Pathology, is irreplaceable the functional integration of all public health networks that treat the mentally ill, must include specific assistance devices intended for DPa in any of its modalities; Unfortunately, they still remain dissociated in the country. Both different complementary services must provide, from their devices, the necessary network functionality, under the coordination of a healthcare team. However, the culture of coordination and cooperation between mental health services and care facilities for DPa is still underdeveloped. The use of formal channels of communication between institutions, devices and professionals does not reach an adequate level of operation.

They are also objectives to be developed: The information strategy addressed to the DPAs and their families about resources and services to be used; The establishment of support mechanisms and advice to family associations and DPa so that they can effectively exercise functions of mutual support, fight against stigma and defense of their rights. Routine assessment of personality traits in the DPAs that initiate AD treatment, by PSCT, should be among the usual approach procedures, with some necessary specification. With this vision, the etiology of AD and its behavioral manifestations could be better understood, pursuing the objective of adapting the treatment and the respective interventions to the DPa in a more adequate manner.

The development of a system of indicators to structure measurement in different areas is essential to ensure the quality of the information used. Hence, the unique (electronic) clinical history remains very praiseworthy as a powerful collective tool. It is im-

portant to promote the professional updating of the HP and to offer society a clear vision of the state that keeps the matter in our country. Any achievement must be directed to the support of the clinical relationship between the disease and society and its desirable consequences of individualized approach, which requires that the professional and non-professional HP: attend, teach, manage and promote health effectively, with the more elementary social conscience. The art, the technique and the science of man, at the service of man!