

Can well-being therapy be helpful in cocaine use disorder?

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A case report published in the current issue of *Psychotherapy and Psychosomatics* explores the therapeutic potential of a special form of cognitive behavioral treatment that includes well-being therapy in cocaine use disorder.

The Authors present a case report in which CBT was based on desensitization and reactivation of drug seeking behavior with cocaine-paired contextual cues, while the subject received propranolol 2 h prior to CBT. The CBT protocol included ten sessions of 60 min (table 1), with an 80-mg propranolol tablet taken orally 2 h before each session. Two types of session were used, therapist-conducted and home-based sessions. During the session with the therapist, the patient was asked to list and then classify cue-related cocaine craving by intensity. Then, the patient classified cocaine-related cues into 3 categories: (1) Insight: internal cues related to inner life, (2) Professional: external cues related to work, and (3) Friends: external cues associated with interpersonal relationship and social environment. During the home sessions, the patient repeated the list of cue-inducing cocaine craving by decreasing intensity.

The most significant improvement was seen in the Friends category (interpersonal and social [external cues](#)). The HADS Anxiety Subscale total score decreased from 11 at visit 0 to 7 at visit 10, while the HADS Depression Subscale total score decreased from 10 to 6. The patient tolerated propranolol well, and no side effects associated with propranolol intake were reported. Three weeks into the intervention, the

patient reported a decrease in cocaine-seeking behavior with an improvement in his well-being. At 4 years of follow-up, HADS scores for both anxiety and depression were below 6. In addition, during the 4 years of follow-up he agreed to 2 random [cocaine](#) urine screening tests, which were negative.

More information: Marie-Victoire Chopin et al. Cocaine Use Disorder Treated with Specific Cognitive Behavioral Therapy and Adjunctive Propranolol, *Psychotherapy and Psychosomatics* (2015). [DOI: 10.1159/000441036](#)

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