

Titre:

Is the length of inpatient stay the best predictor of maintained abstinence after cocaine detoxification ?

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Background: Today, no pharmacological treatment is approved for cocaine use disorder. Thus, the treatment is based on behavioral and cognitive relapse prevention interventions. Still, patients with the more severe forms of the disorders require an initial inpatient detoxification to be able to engage in the first days of cocaine abstinence. Specific research to evaluate the most effective modalities of such inpatient cocaine detoxification stays are needed. Here we conducted an observational prospective study trying to determine the factors associated with maintained abstinence after inpatient cocaine detoxification.

Method: The design is an observational study with a 3-months follow-up of unselected consecutive severe cocaine use disorders patients willing to engage in an inpatient detoxification. Clinical characteristics of the addictive disorders were recorded at entry, neuropsychological testing and a brain MRI were performed in the first week of the inpatient stay, and the follow-up was proposed until 3 months post-discharge. The length of the inpatient stay was described as: premature (< 7 days), normal (7-14 days), prolonged (>14 days in the acute ward) or consolidated (followed by a convalescence).

Results: Eighty-seven patients were included. They were mostly males (78%) and aged 40 years-old (± 8). They used cocaine 19(± 9) days per month at entry, and 42% used a rapid route of administration, either smoked or intravenous. The mean abstinence after discharge was 18 days(± 21), and was associated with the mean duration of the hospital stay (16 days ± 10 , spearman's $\rho=0.247$, $p=0.047$) and duration category (Jonckheere-Terpstra tendency test=2.47, $p=0.013$).

Discussion: In multivariate models including the several socio-economic and clinical variables associated with relapse, the duration of stay should be studied to produce evidence-based guidelines for treatment.

Liens d'intérêt:

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L'ensemble des auteurs certifie que le travail présenté n'a aucun lien avec l'industrie pharmaceutique, du tabac, de l'alcool, de la cigarette électronique et avec les compagnies de jeux.

Dans les 3 dernières années : VB a bénéficié de frais de congrès payés par des compagnies pharmaceutiques (CAMURUS AB), FV a bénéficiée de frais de congrès payés par des compagnies pharmaceutiques : CAMURUS AB, RECORDATI ; et a été rétribuée comme expert pour des advisory boards (CAMURUS AB, Accord HealthCare), sommes versées à une entité de recherche.