Abstract : <u>Does clinical insight level predict successful quit attempts during the first three months of outpatient addiction treatment?</u>

Context: Low clinical insight in psychiatry is defined as poor recognition of one's mental illness, including disability to self-evaluate symptom severity. It has been reported as common in addiction and is associated with lower treatment compliance. Longitudinal studies suggest that low clinical insight could be linked to more relapse. However, association with successful quit attempt remains unknown. Objective: Examine the prospective link between baseline clinical insight level and self-report of successful attempt to quit during the first 3 months of outpatient addiction treatment. Methods: Participants were recruited in ADDICTAQUI cohort at outpatient treatment intake for addiction (substance or behavior). They completed a baseline evaluation using Addiction Severity Index (ASI), Mini International Neuropsychiatric Interview (MINI), and modified Hanil Alcohol Insight Scale (m-HAIS). Participants completed a follow-up ASI 3 months later. Data were analyzed using multiple logistic regression and non-parametric tests. Results: Analyses showed that lower clinical insight level at baseline was associated with less successful quit attempts during the first 3 months of outpatient treatment compared to a higher clinical insight level, controlling for sociodemographic factors, addiction severity at T0, and comorbidities (n = 58; exp(B) = 1.31; p (FDRcor) = 0.015). Discussion: This study highlights that poor clinical insight may be an obstacle to treatment success, and future studies should examine the causes to better understand its involvement in treatment responses and relapse processes.