

Families in recovery: An addiction model that treats the entire family system

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The Families in Recovery Skills Training (FIRST) program was founded in 2013 in the Addiction Science Division (ASD) at the MUSC outpatient clinic. FIRST came in response to the vast needs being expressed by our patient's families for their own clinical resources. Many of them were seeking support and skills regarding enabling/co-dependency, difficulty with boundary setting, and chronic emotional/financial/physical crisis that they were experiencing as an impact of their loved one's disease. Due to limited existing evidence-based curriculum for family addiction, the Families in Recovery Skills Training (FIRST) program was developed. The program consists of a 10-week training period for families with weekly group therapy, supplemented by individual/family therapy as needed. The program introduces practical skills to improve communication in the family, decrease unproductive dynamics surrounding addiction, address guilt and resentment and develop skills to set boundaries when necessary and to provide families with accurate and valuable psycho education on the disease. We also offer an advanced therapy group for FIRST alumni who choose to continue developing and practicing their skills in a professional/clinical setting with a supportive peer group. Outcome data collection is underway, examining family changes in co-dependency, coping and impact. Data is also being collected toward increasing evidence that FIRST family participation frequently correlates with the addict/alcoholic seeking and/or remaining engaged in treatment. The presentation will include the curriculum overview, family recruitment/marketing/billing options. It will also address preliminary research findings on the program and discuss the introduction of the "family patient" as a target population for a clinic.

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The role of repetitive trans-cranial magnetic stimulation in the treatment of neuropsychiatric disorders

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Repetitive trans-cranial magnetic stimulation (r-TMS) is a non-invasive brain stimulation technique using focused magnetic pulses to induce electrical currents in neural tissue. Repeated trains of pulses can cause durable changes in synaptic connections via the mechanisms of neuro-plasticity. Daily sessions of stimulation can exert therapeutic effects that can last weeks to months. The effect of stimulation on neuro-plasticity is dependent on the administered pattern of r-TMS: High-frequency r-TMS (5-20 Hz or higher) has an excitatory result, while low-frequency stimulation (1-5 Hz or lower) is inhibitory. Unlike more invasive methods of brain stimulation, such as electroconvulsive therapy, anesthesia is not required and no diet or activity restrictions are necessary. Therapeutic r-TMS is currently a standard of care in the treatment of major depression with magnetic pulses usually administered over the dorso-lateral prefrontal cortex (DLPFC). Some lines of evidence suggest that the therapeutic effects of r-TMS in major depression depend on changes in cortico-striatal-thalamic circuits serving the target region, but the precise mechanism of effect is still under investigation. The efficacy of r-TMS in the treatment of other neuropsychiatric disorders, including obsessive compulsive disorder, addiction, cognitive impairment and auditory hallucination in schizophrenia, is currently being investigated. This presentation will review the application of r-TMS in neuropsychiatric disorders, with a main focus on major depression. Practical considerations, the speculated mechanism of action, efficacy (including response and remission rates) and potential side effects will be discussed in detail.

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