



LISBON ADDICTIONS 2019



“A look at the dark side of addiction treatment:
a profile of those who drop out”

João Pedro Augusto / Margarida Duarte / Tânia Caetano

Villa Ramadas – International Treatment Centre – Portugal

ORAL PRESENTATION SESSION
TREATMENT ADHERENCE
24/10/2019 - LISBON

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Road Map

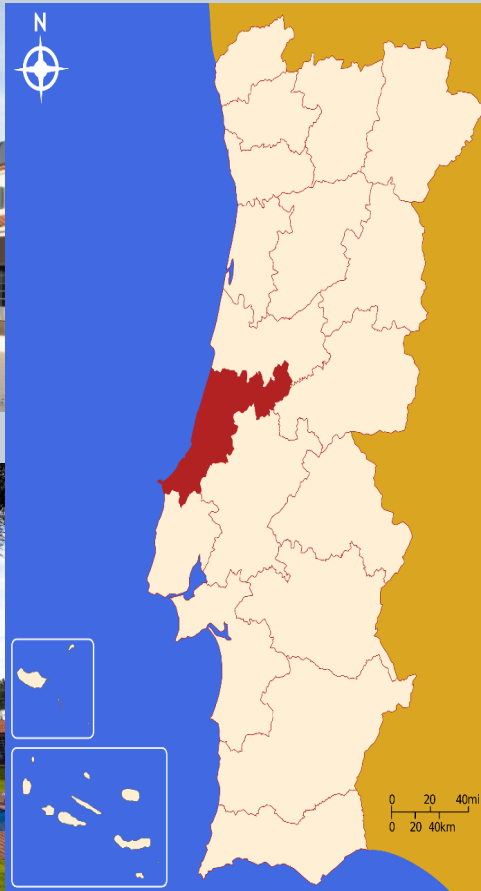
- What is Villa Ramadas
- Treatment Program Structure
- Goals / Objectives (from this starting point)
- Study / Methodology
- Main findings
- Challenges

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What is Villa Ramadas (1)



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Treatment Program Structure

Residential Treatment

LoS expected 90-150 days

Individual Therapy

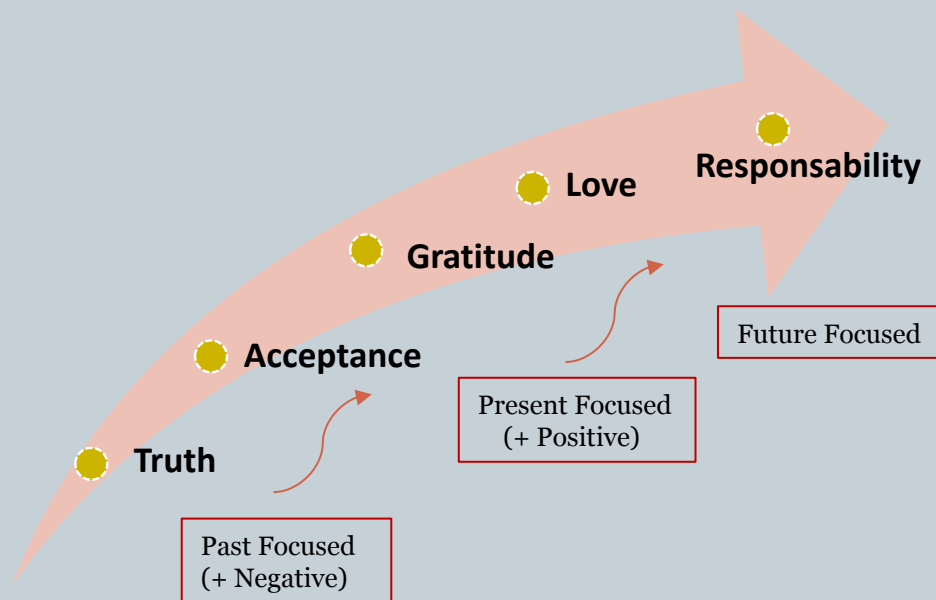
- **1 Session** 45-60 min / daily / psychologist
- **1 Session** 30-60 min / monthly / psychiatrist
- **1/2 Sessions** 15-60 min / monthly / GP

Group Therapy

- **3 Sessions** 60-90 min / daily / M-F / 9-17 h
- **1 Session** 30 min / after 17 h

Change & Grow® Therapeutic Model

created & developed in Villa Ramadas



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Goals / Objectives

- Therapeutic & Managerial motives
- Understand the profile of those who abandon / Reduce Drop-out rate
- Transform data into valuable insights we can act on
- Make information accessible & transparent
- Standardized metrics help to make meaningful comparisons / benchmark units
- Through a robust set of indicators, assess the quality & value of the provided services
- Have up-to-date info to short feedback cycles in all departments
- Improve care for patients by assigning the right resources

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Study / Methodology

Participants

- Sample Total 2018: 65 patients
- **M** 47 (72 %) & **F** 18 (28 %)
- Age range: 16 to 64 years / Average Age: 36 years
- Not ended treatment Sample: 15 patients (23 %)
- **M** 11 (73 %) & **F** 04 (27 %)

Procedure

- First week of treatment
- Psychiatric evaluation intake
- Sociodemographic questionnaire
- Measures administered by clinical psychologist

Measures

- *AUDIT (Alcohol Use Disorders Identification Test)*
- *BDI-II (Beck Depression Inventory –II)*
- *SIQ (Suicide Ideation Questionnaire)*
- *STAI Y1 / Y2 (State-Trait Anxiety Inventory)*

Analyses

- IBM SPSS 23
- Descriptive statistics
- Test t student

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Main findings

Main Diagnosis

	Drop-Out	Success
• Cannabis	% 41,7	19,4
• Cocaine	% 33,3	50,0
• Medication	% 16,7	00,0

Medication

	Drop-Out	Success
• Zero at Adm	00,0	25,0
• Anxiolytics	92,9	47,9
• Antips/Neurol	42,9	20,8

Other Indicators

	Drop-Out	Success
• OD report	16,7	25,0
• Self-harm bhv.	23,1	37,8
• Use/several Sub.	66,7	83,3

Measures

	Drop-Out	Success
• AUDIT	17,3	16,9
• BDI-II	19,8	16,8
• SIQ	37,3	42,7
• STAI State	43,9	45,4
• STAI Trait	46,0	51,1



Challenges

- Optimize resources through the intelligent use of data
- Transform data into valuable insights / have a solid track record
- Link methodologies and technology with a research outlook/position
- Importance of clinical coding and data collection on data registration
- Use of advanced analytics / add value for clinical & therapeutic work
- Evolve from a limited & simple set of variables to more complex analytics models
- Provide an accessible overview for professionals, managers & researchers
- Connect quality & value to improve care and outcomes / toward VBHC

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Questions / Doubts

Period open for clarification.

Name: João Pedro Augusto
Position: Admissions & Expansion Manager V. R.
Contact: dae@villaramadas.com

Name: Margarida Duarte
Position: Psychiatrist / V.R. / Leiria Hospital

Name: Tânia Caetano
Position: Head of Research Unit V. R

Address: Av. Comb. Grande Guerra nº 24 2º Esq. Frt / 2400-121 LEIRIA – PORTUGAL / +351 918 120 945