

A Significant Area of Research on Relapse Prevention in Addiction Treatment: Drug-Related Dreams

Bağımlılık Tedavisinde Relaps Önleme Çalışmalarında Önemli Bir Alan: Madde Bağlantılı Rüyalar

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To the Editor,

The DSM-5 notes that experiencing "unpleasant dreams involving substance use" is a symptom that may manifest during the withdrawal from psychomotor stimulants like cocaine and methamphetamine (APA 2013). Drug-related dreams (DDs) are described as dreams featuring drug-related themes, which occur among individuals dependent on drugs during their withdrawal or recovery phases (Reid and Simeon 2001, Tanguay et al. 2015).

In DDs, themes may include searching for the substance, trying to use it, seeing it but not using it or being unable to use it, declining the substance when offered, or observing others using it (Reid and Simeon 2001, Colace 2004, Tanguay et al. 2015, Colace 2018). These dreams are commonly reported within the first week of abstaining from substance use, but they can persist for weeks, months, or even years after stopping the use of the substance. However, it has been observed that as the duration of treatment extends and recovery progresses, there is a decline in the frequency of these dreams (Colace 2004, 2018).

Some individuals dependent on substances who have DDs feel relieved upon waking and realizing they did not actually use any substance (Reid and Simeon 2001, Colace 2004, Tanguay et al. 2015). Conversely, others may experience guilt or regret after dreaming about using substances (Reid and Simeon 2001, Colace 2004, 2018). Additionally, there are cases where individuals feel anger and disappointment when they wake up to find they haven't used any substance, contrary to their dreams (Colace 2004, 2018).

Some studies have concluded that such dreams, occurring early in the cessation period when individuals quit using the substance, may increase the desire for substance use and predict an impending relapse (i.e. a negative prediction) (Christo ve Franey 1996, Yee et al. 2004). However, contrary findings suggest that individuals who experience DDs may have a higher likelihood of abstaining from substance use (i.e. a positive prediction) than those who do not experience such dreams (Choi 1973, Hajek ve Belcher 1991, Colace, 2004). Researchers have emphasized that the predictive value of these dreams cannot be determined (Steinig et al. 2011, Colace 2018).

Recent studies have focused more on possible determinants of the predictive value of DDs, finding that prognostic processes are associated with the contents of dreams and the emotions experienced during and after dreaming (Reid ve Simeon 2001, Colace 2004). DDs, also known as Type A dreams, which are satisfying in terms of content and emotions, are associated with alleviating and managing the desire for substance use and are correlated with a good prognosis. In contrast, unsatisfactory Type B dreams are thought to reignite drug cravings and may lead to potential relapses (Reid and Simeon 2001, Colace 2004).

A study investigating the methods for assessing alcohol and substance cravings in addiction treatment centers across the United States discovered that among 152 treatment counselors from various institutions, only four incorporated drug-related dreams into their clinical practices (Pavlick et al. 2009, Colace 2018). Regarding the situation in Türkiye, to the best of our knowledge, no addiction clinics currently include the assessment of patients' DDs in their standard treatment protocols.

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At our clinic (Ankara Training and Research Hospital, Alcohol and Drug Treatment Center, Ankara), however, the importance of patients sharing their DDS is emphasized during initial consultations. Throughout their treatment, these dreams are tracked using a specially created diary, which includes questions derived from research on DDs. When these dreams predominantly feature Type B content, which is associated with ongoing substance cravings, this information is communicated to the patient in an unbiased manner. Patients with these types of dreams are encouraged to schedule more frequent appointments to address and manage their cravings effectively.

DDs may provide insights into patients' substance cravings and the likelihood of potential relapses (Colace 2018). Given that not all individuals who experience these dreams may voluntarily share them, it is crucial for clinicians to proactively ask their clients about the presence of such dreams (Colace 2018).

In cases where patients report DDs accompanied by emotions such as guilt, indifference, disappointment, or anger, it is advisable to reassess their motivations and the current treatment strategies aimed at managing these feelings. It is also recommended that guidelines be developed to describe both Type A and Type B dreams, and that these guidelines be integrated into the standard clinical treatment protocols at addiction treatment centers. These measures can enhance the utility and applicability of drug-related dreams in clinical settings (Colace 2018).

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