

Therapeutic Methods Including the Tasks of a Nurse and Evaluation of Their Effectiveness in the Opinion of Patients after Craniocerebral Trauma with a Diagnosis of Alcohol use Disorder

Metody terapeutyczne uwzględniające zadania pielęgniarki i ocenę ich skuteczności w opinii pacjentów po urazie czaszkowo-mózgowym z rozpoznaniem zaburzeń alkoholowych

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Abstract

Introduction. Alcoholism is a phenomenon with multi-factorial conditions and numerous health and social consequences, which makes its treatment a real challenge not only for the addict himself and his relatives, but also for the entire medical team involved in the therapy process. For this reason, in order to strengthen the therapeutic effects of alcoholic disease, it is important to conduct research aimed at determining the factors that shape the effectiveness of the implemented methods. With this in mind, it has been assumed that the aim of the research is to determine the relationship between the therapeutic methods used in the Clinical Alcohol Dependency Therapy Unit (COTUA), taking into account the tasks of a nurse, and the assessment of their effectiveness in the perception of patients after craniocerebral trauma with a diagnosis of alcohol disease.

Material and Methods. 100 COTUA patients were tested, in which the diagnostic survey method was used and a questionnaire was chosen as a technique.

Results. The conducted analyses showed that, in the opinion of the respondents, the leading tasks of the nurses at COTUA include informing patients about the principles and methods of therapy, familiarizing them with the topography of the ward, the Charter of Patient's Rights, the regulations of the ward, the schedule of the day and its specifics, administering medicines, providing a sense of safety, providing psychological support, transferring knowledge and learning how to live with the disease and cooperating with the therapeutic team. In addition, three quarters of the respondents indicated that the nurses working in the ward are willing to talk to patients about alcohol dependence, and a comparable percentage of the respondents assessed the effectiveness of the therapeutic methods used by the therapeutic team in relation to their own alcohol dependence problem very well and well.

Conclusions. Patients' assessment of the effectiveness of the therapeutic methods used depends on the nurses' tasks of conducting therapeutic conversations with patients, providing them with knowledge, learning how to live with the disease, cooperating with the therapeutic team and the nurses' readiness to talk to patients about alcohol dependence. (JNPN 2021;10(1):26–34)

Key Words: alcoholic disease, craniocerebral trauma, effectiveness of therapeutic methods, nurse's tasks

Streszczenie

Wstęp. Alkoholizm jest zjawiskiem o wieloczynnikowych uwarunkowaniach oraz licznych zdrowotnych i społecznych konsekwencjach, co sprawia, że jego leczenie stanowi prawdziwe wyzwanie nie tylko dla samej osoby uzależnionej oraz jej bliskich, ale również dla całego zespołu medycznego zaangażowanego w proces terapii. Z tego też względu, dążąc do wzmocnienia prowadzonych w oddziałach specjalizujących się w leczeniu choroby alkoholowej, oddziaływań terapeutycznych, istotne jest prowadzenie badań ukierunkowanych na określenie czynników kształtujących skuteczność wdrożonych metod. Mając to na uwadze przyjęto, iż celem badań jest określenie zależności zachodzących pomiędzy stosowanymi w Całodobowym Oddziale Terapii Uzależnienia od Alkoholu (COTUA) metodami terapeutycznymi z uwzględnieniem zadań pielęgniarki a oceną ich efektywności w percepcji pacjentów po przebytych urazie czaszkowo-mózgowym z rozpoznaniem choroby alkoholowej.

Materiał i metody. Badaniom poddano 100 pacjentów COTUA, w których zastosowano metodę sondażu diagnostycznego, a jako technikę wybrano kwestionariusz ankiety.

Wyniki. Przeprowadzone analizy wykazały, że w ocenie badanych do wiodących zadań pielęgniarek w COTUA należy informowanie pacjentów o zasadach i sposobach terapii, zapoznanie z topografią oddziału, Kartą Praw Pacjenta, regulaminem oddziału, rozkładem dnia i jego specyfiką, podawanie leków, zapewnianie poczucia bezpieczeństwa, udzielanie wsparcia psychicznego, przekazywanie wiedzy i nauka życia z chorobą oraz współpraca z zespołem terapeutycznym. Ponadto, trzy czwarte osób wskazało, że pracujące w oddziale pielęgniarki chętnie prowadzą rozmowy z pacjentami na temat uzależnienia od alkoholu, a porównywalny odsetek badanych ocenił bardzo dobrze i dobrze skuteczność metod terapeutycznych stosowanych przez zespół terapeutyczny w odniesieniu do własnego problemu uzależnienia od alkoholu.

Wnioski. Dokonywana przez pacjentów ocena skuteczności stosowanych metod terapeutycznych zależy od zadań pielęgniarek polegających na prowadzeniu rozmów terapeutycznych z pacjentami, przekazywaniu im wiedzy, nauce umiejętności życia z chorobą, współpracy z zespołem terapeutycznym oraz gotowości pielęgniarek do prowadzenia rozmów z pacjentami na temat uzależnienia od alkoholu. (PNN 2021;10(1):26–34)

Słowa kluczowe: choroba alkoholowa, uraz czaszkowo-mózgowy, efektywność metod terapeutycznych, zadania pielęgniarki

Introduction

According to estimates by the World Health Organization (WHO), more than 100 million people in the world suffer from alcoholic disease. In Poland, the number of people addicted to and abusing alcohol ranges from 4 to 5 million, and women and men requiring treatment range from 1 to 1.5 million [1].

Alcoholism, also referred to as alcohol dependency syndrome, alcohol dependency, or alcohol toxicomania is defined as a disorder consisting in the loss of control over the amount of ethanol consumed, which results from a sense of mental and somatic coercion and is not subject to the will of the addict [2,3]. According to the WHO definition [4], alcoholism is defined as any form of drinking that goes beyond the measure of traditional and customary consumption, or beyond the framework of community-based social drinking, regardless of the factors that lead to it.

It is a disease with complex conditions, and among the factors predisposing to its development are genetic factors that explain from 40.0% to 60.0% of the risk of addiction; early alcohol initiation; alcoholism in the family environment, and a number of sociodemographic factors [1,5–9]. It should be noted that alcoholic toxicomania is perceived as a primary disease, which means that it is the cause of many somatic and mental illnesses [5]. It has been shown that harmful ethanol

consumption is responsible for 5.1% of the global disease burden, with the risk being much higher in men (7.1%) than in women (2.2%) [1]. Among them there are various types of neurological and mental disorders, gastrointestinal diseases, cardiovascular diseases, cancer, hormonal or hematological disorders, as well as an increased risk of various injuries, including craniocerebral injuries, resulting from impaired visual motor coordination and weakened response time [10–18].

In addition, alcohol is a major risk factor for premature mortality and disability among 15–49 years old, accounting for approximately 10.0% of all deaths in this age group. Harmful alcohol consumption in 2016 caused about 1.7 million deaths from non-communicable diseases, including about 1.2 million deaths from gastrointestinal and cardiovascular diseases and 0.4 million deaths from cancer [1,2].

In this context it should also be noted that alcohol toxicomania is a chronic and progressive disease. Thus, it can be described as a disease process, which cannot be cured, but only by means of proper therapy and psycho education the addicted person can be enabled to maintain their life in sobriety. Therefore, regardless of the cause of the disorder, the alcoholic should be treated [19–21]. In the case of abandonment of therapy, the patient has an increasingly destructive impact on themselves and the immediate environment, which leads to social exclusion, family conflicts, the possibility of

losing one's job on the one hand, and on the other hand contributes to the further development of addiction, leading to increasingly serious health and social consequences [22].

The process of returning to sobriety is very difficult and complicated. The studies conducted so far show that about one third of patients achieve permanent abstinence after the therapy. A comparable percentage of alcoholics obtains an improvement in functioning without maintaining total abstinence, and in two thirds of people treated for alcoholic disease the abstinence is not consistent over time [23]. It should be added that at an advanced stage of the disease development, it is usually impossible to successfully go through the process of returning to sobriety without the help of specialists [24]. The centers specializing in the treatment of alcohol dependence syndrome have appropriately prepared medical staff and infrastructure facilities, thanks to which it is possible to correctly diagnose the problem and counteract it [22,25]. It is also worth emphasizing that effective treatment of alcoholic disease requires not only the involvement and proper motivation of the patient, which are usually significantly weakened in the initial stage of therapy, but also the support of family members, as well as the cooperation of an interdisciplinary therapeutic team, consisting of doctors, psychologists, addiction therapists and nurses [26,27].

Building a program of living in sobriety is connected with a great effort to change both the quality of one's own life and one's attitude towards other people, and therefore, as already mentioned, the treatment of alcohol toxicomania is a long-term process requiring comprehensive therapeutic measures [28,29]. Nurses play an important role in hospital wards providing such treatment. Their tasks and the work they perform in caring for patients, strengthening the effectiveness of actions taken by other members of the therapeutic team, increase the chances of people undergoing therapy to improve their health and return to sobriety [30–32]. The nurse is the first person in alcohol therapy units that the patient comes into contact with during admission. Therefore, the ability to establish and maintain contact is a very important element of the nurse's care [33–35]. Often an addicted person comes to the clinic under external pressure of circumstances caused by alcohol consumption, for an apparent desire to submit to external pressure, or wants to find out what to expect from the treatment. In addition to this, their physical and mental well-being is also affected, which is why there are three rules in the nursing care provided in these types of centers, which focus on:

1. showing kindness and understanding for the psychological difficulties and physical ailments of patients, as well as faith in the effectiveness of the assistance provided;

2. providing clear, unambiguous information about the principles and forms of treatment and the standards of the ward;
3. enabling the patient to be quickly included in the therapeutic program, as well as informing about the work schedule and regulations [36–38].

From the point of view of the effectiveness of treatment of alcohol dependence syndrome, in addition to the above mentioned rules applicable to the work of nurses with addicts, it is also important to conduct systematic research aimed at monitoring and identifying the factors that shape the effectiveness of the methods used [39–41]. Therefore, the aim of our own research is to determine the relationships between the therapeutic methods used in the Clinical Alcohol Dependency Therapy Unit (COTUA), taking into account the tasks of a nurse, and to assess their effectiveness in the perception of patients after craniocerebral trauma with a diagnosis of alcohol disease.

Material and Methods

Characteristics of the Examined Group

The persons included in the study are patients after a craniocerebral trauma with a diagnosis of alcoholic disease who are treated in the COTUA of the Neuropsychiatric Hospital SP ZOZ in Lublin. The sample consists of 100 people, including 29.0% (N=29) women and 71.0% (N=71) men. The most numerous group are patients between 31 and 50 years of age (62.0%; N=62), 22.0% (N=22) are between 21 and 30 years of age, 15.0% (N=15) of women and men are between 51 years of age and above, and 1.0% (N=1) of the group is under 20 years of age. In the studied population, married people dominate (49.0%, N=49). Almost one third of patients are unmarried (32.0% N=32), 15.0% (N=15) of women and men are divorced and 4.0% (N=4) of people are widows or widowers. The highest percentage of respondents have higher education (39.0%; N=39), 32.0% (N=32) of the population have completed secondary school, 21.0% (N=21) have vocational education, while the lowest percentage of patients are those with lower secondary education (3.0%; N=3) and primary education (5.0%; N=5). The sample is dominated by people who live in a city with more than 50 thousand inhabitants (53.0%; N=53), 31.0% (N=31) of the group comes from rural areas, and the percentage of patients living in a city with less than 50 thousand inhabitants is 16.0% (N=16). For three quarters of the respondents this is their first stay in COTUA (77.0%; N=77), 16.0% (N=16) of people undergo treatment for the second time due to an alcoholic disease, and 7.0% (N=7) at least the third.

Research Methods, Techniques and Tools

The diagnostic survey method was used in the research, and the original questionnaire was chosen as the technique. Due to the fact that it is not a standardized tool, it was evaluated by three competent judges, who were medical workers of the COTUA ward. The proper survey was preceded by a pilot study carried out in a group of 15 patients. Their aim was to verify the questionnaire. After its analysis and pilot studies, the competent judges stated that the research tool does not need to be corrected and can be used to carry out the proper studies. The results of the pilot studies were not added to the proper studies.

Questions included in the survey were assigned to three categories. The first one contains basic information about COTUA ward patients such as: gender, age, marital status, education, place of permanent residence, number of stays in COTUA ward, craniocerebral trauma suffered. The second part of the questionnaire includes questions about the therapeutic methods identified by the patients treated at the ward, including the tasks of nurses. However, the question assigned to the next category is important from the perspective of the assessment of the effectiveness of the therapeutic effects in the context of alcohol disease.

Organization and the Research Process

The examinations were carried out individually at the Neuropsychiatric Hospital SP ZOZ in Lublin. They were voluntary and anonymous. Participants were informed about the purpose of the study and the possibility of receiving feedback around individual results. Patients confirmed their consent to participate in the study in writing. Before starting to answer, they were informed about the rules of completing the questionnaire. In case of any doubts they had an opportunity to obtain additional information and explanations from the researcher. The respondents filled in the survey questionnaires in the presence of the person conducting the research. Upon submitting the questionnaires, completeness of the answers and legibility were checked. In case of any deficiencies, patients were asked to make corrections. After any corrections were made, the completeness and legibility of the obtained data was checked again, and then each questionnaire was placed in an envelope, which was sealed in the presence of the person conducting the survey. The time of the survey was not limited and lasted 15 minutes.

Data Analysis

Characteristics of the qualitative variables were carried out on the basis of percentage distributions of frequency of individual categories. Analyses of correlation matrices were performed using the Cranmer V correlation coefficient. Cut-off level for Type I error was adopted, which is $p < 0.05$. Statistical tests were performed and interpreted at a bilateral significance level.

Results

In the first stage of the presented study results, the tasks of nurses identified by COTUA patients were analyzed. Patients most often think that the tasks of a nurse include informing patients about the rules and methods of therapy, familiarizing them with the topography of the ward, the Charter of Patient's Rights, ward regulations, daily schedule and its specifics (12.6%). Almost as often they declare that the task of a nurse is to administer drugs (12.3%) and provide a sense of safety to patients (12.2%). Slightly less often they indicate the role of the nurse in providing mental support (11.9%) and passing on knowledge and learning to live with the disease (11.4%). The percentage of people who claim that a nurse should cooperate with the therapeutic team within the framework of her tasks is 10.2%, and 6.3% of the respondents consider that the tasks of a nurse in COTUA include contact with the patient's family. On the other hand, respondents least frequently indicate that the task of a nurse is to perform injections (5.9%) and help in making self-diagnosis (5.9%). The obtained results are presented in Table 1.

Three quarters of the surveyed patients declare that the nurses at the Clinical Alcohol Dependency Therapy Unit are willing to conduct supporting talks on the topic of alcohol addiction. 25.0% of the surveyed persons expressed a different opinion on this subject (Table 2).

The largest part of the respondents assesses the effectiveness of therapeutic methods used by the therapeutic team in the initial group as good (51.0%). More than one third of the patients evaluate the effectiveness of the therapeutic methods used in COTUA as very good. The evaluation was given by 11.0% of the respondents and 1.0% of patients believe that the methods used in the Clinical Alcohol Dependency Therapy Unit are ineffective. The efficacy of the therapeutic methods used in COTUA with respect to person's own problem of alcohol dependence is presented in Table 3.

Correlation analyses performed indicate that there is a significant moderate relationship between the assessment of therapeutic efficacy and the discussions

Table 1. Nurses' tasks identified by the respondents

From the following nurse's tasks, mark those that you think the nurse is performing in the COTUA ward	N	%
Administration of medicines	92	12.3
Injection	44	5.9
Therapeutic interview	85	11.4
Providing mental support and assistance	89	11.9
Informing about the rules and methods of therapy, getting acquainted with the topography of the ward, the Charter of Patient's Rights, ward regulations, schedule of the day and its specifics	94	12.6
Helping patients to perform self-diagnosis	44	5.9
Providing a sense of security	91	12.2
Cooperation with the therapeutic team	76	10.2
Cooperation with the family	47	6.3
Transmitting knowledge and teaching how to live with the disease	85	11.4

Source: Own research

Table 2. Nurse's conversations with patients about alcohol dependence

Are the nurses at the COTUA ward willing to talk to you about alcohol addiction?	N	%
Yes	75	75.0
No	25	25.0

Source: Own research

Table 3. Effectiveness of therapeutic methods used in COTUA in the assessment of the respondents

How do you assess the effectiveness of the therapeutic methods conducted by the therapeutic team in the initial group with regard to your own problem of alcohol dependence?	N	%
Very good	37	37.0
Good	51	51.0
Sufficient	11	11.0
Not sufficient	1	1.0

Source: Own research

Table 4. Tasks performed by nurses and effectiveness of therapeutic methods

Variable	Evaluation of the effectiveness of therapeutic methods used in COTUA in relation to patients' own alcohol dependence problem	
	V	p
From the following tasks of the nurse, mark those that you think the nurse is performing in the COTUA ward:		
Administration of medicines	0.11	0.736
Injection	0.12	0.685
Therapeutic interview	0.49	0.001
Providing mental support and assistance	0.15	0.518
Informing about the rules and methods of therapy, getting acquainted with the topography of the ward, the Charter of Patient's Rights, ward regulations, schedule of the day and its specifics	0.11	0.736
Helping patients to perform self-diagnosis	0.17	0.386
Providing a sense of security	0.12	0.717
Cooperation with the therapeutic team	0.28	0.045
Cooperation with the family	0.18	0.341
Transmitting knowledge and teaching how to live with the disease	0.49	0.001

Source: Own research

conducted by nurses with patients in COTUA, $V=0.49$; $p=0.001$. The transfer of knowledge by nurses and teaching patients to live with the disease shows an average correlation with the evaluation of effectiveness of therapeutic methods used, $V=0.49$; $p=0.001$. Moreover, the perceived effectiveness of therapeutic methods is poorly correlated with the cooperation of nurses with the therapeutic team, $V=0.28$; $p=0.045$. Tasks performed by nurses at COTUA consisting of administering medicines ($V=0.11$; $p=0.736$), performing injections

($V=0.12$; $p=0.685$), informing about the principles and methods of therapy ($V=0.11$; $p=0.736$), providing mental support ($V=0.15$; $p=0.518$), helping patients to make self-diagnosis ($V=0.17$; $p=0.386$), providing them with a sense of safety ($V=0.12$; $p=0.717$) and cooperation with the family ($V=0.18$; $p=0.341$) are not significantly related to the assessment of effectiveness of therapeutic methods used in the Clinical Alcohol Dependency Therapy Unit. Table 4 shows the relationships between

Table 5. Nurses' conversations with patients about addiction and effectiveness of therapeutic methods

Variable	Evaluation of the effectiveness of therapeutic methods used in COTUA in relation to their own problem of alcohol dependence in patients' assessment	
	V	P
Are the nurses at the COTUA ward willing to talk to you about alcohol addiction?	0.34	0.008

Source: Own research

the tasks performed by the nurses and the evaluation of the effectiveness of therapeutic methods used in COTUA.

In the last stage of the analysis, the level of significance of the relationship between the nurses' discussions on alcohol dependence and the effectiveness of therapeutic methods used in COTUA in patients' assessment was verified. Nurses' discussions with patients about alcohol dependence are poorly correlated with the evaluation of the effectiveness of therapeutic methods used in COTUA ($V=0.34$; $p=0.008$). The obtained data are presented in Table 5.

Discussion

The treatment of alcohol dependence syndrome is long term and due to risk of relapse, it starts at the beginning of the addiction until the end of patient's life, therefore professional medical care plays a key role in this process [19–21,23]. For this reason, it is important to conduct systematic research aimed at determining the factors associated with the perceived effectiveness of the applied therapeutic effects [39–41]. Taking into account the premise above, the aim of the research was to assess the relations between the therapeutic methods implemented in COTUA, factoring in nurse's tasks, and the evaluation of their effectiveness from the point of view of patients after craniocerebral trauma with a diagnosis of alcohol disease.

Preliminary analyses revealed that, in the opinion of the respondents, the major tasks of the nurses at COTUA include informing patients about the rules and methods of therapy, familiarizing them with the topography of the ward, the Charter of Patient's Rights, the rules of the ward, the schedule of the day and its specifics, administering medicines, providing a sense of safety and psychological support, transferring knowledge and teaching how to live with the disease, and cooperating with the therapeutic team. It is also important that three quarters of people indicated that the nurses working in

the ward are willing to talk to patients about alcohol addiction.

The results seem to be understandable in the light of the findings of the researchers involved, since the nurse, as a person not directly involved in the treatment process, can be seen as a safe person to talk to and confidant of patients' problems [22,42]. She is available at times convenient for those in need, when they are ready to talk about the alcohol-related illness [43]. Nurses are trained around the world to work with addicts, both in outpatient and in-patient treatment. One of them is the Alcohol Intervention Training Program (AITP). There is a reason why training in such programs includes sessions on the nurses' communication skills: active listening, probing and motivational interviewing [44]. These are key skills from the perspective of establishing contact with the patient, meeting the patient's needs [45] and, as shown by the results of own research, related to the evaluation of the effectiveness of the therapy, which three quarters of respondents rated high and very high in relation to their own alcohol dependence problem.

The nurse's tasks, including therapeutic conversations, knowledge transfer, teaching how to live with the disease and cooperate with the therapeutic team, as well as their willingness to talk to patients about alcohol dependence, proved to be important in the assessment of the effectiveness of therapeutic methods. The nurse, as the person having the most frequent contact with the patients, has a strong influence on them [46]. A wide range of her tasks, largely related to the therapeutic activities used in the ward, may shape the assessment of the effectiveness of therapeutic methods by patients [47]. The nurse supports the therapeutic team mainly in the periods between therapeutic sessions. Having a thorough knowledge of the specifics of the therapeutic process, she knows when and how to strengthen the implemented interactions. Thanks to the conversations conducted by the nurses and their openness to the problems of the patients, the knowledge acquired during the therapeutic meetings is transferred into the sphere of everyday life experiences. Patients learn how to live with alcoholic illness, make constructive plans, avoid certain situations, and expand the circle of social support [48,49]. According to the results of the study, Tsai and colleagues [50], nurses are aware of the barriers and factors that contribute to effective interventions in alcohol therapy. In addition, they understand the importance of the tasks performed in an addiction treatment unit and their impact on the success of treatment.

It has been shown that nurses enjoy the trust of patients and patients turn to them first with their problems. Their commitment to the alcoholic's return to sobriety includes, among other things, providing support during alcohol withdrawal [46]. It is the nurses

who are most often present with patients during these difficult moments. By being eager to talk about alcohol addiction, they allow patients to work through topics discussed during group therapy. This includes structuring the acquired knowledge and transferring it to the reality of everyday life. Nurses' awareness of the factors that contribute to success of the therapy and their involvement in the work contributes to a positive assessment of the effectiveness of therapeutic methods by patients [51].

Therefore, it is advisable to create opportunities to improve the competence of nurses with particular emphasis on the area of providing professional support to patients affected by alcoholic disease. Recommended actions should include participation of people forming this professional group in training on active listening, advanced methods of showing understanding of patients and building trust in relationships. At the same time, in order to maintain the high level of care provided in alcohol dependency treatment centers, nursing care standards should be continuously monitored [51–54].

Conclusions

The analyses carried out led to the following conclusions:

1. In the opinion of the respondents, the leading tasks of the nurses at COTUA include informing patients about the rules and methods of therapy, familiarizing them with the topography of the ward, the Charter of Patients' Rights, the rules of the ward, the schedule of the day and its specifics, administering medicines, ensuring a sense of security, providing psychological support, transferring knowledge and teaching how to live with the disease and cooperating with the therapeutic team.
2. Three quarters of people indicated that the nurses working in the ward are willing to talk to patients about alcohol addiction.
3. More than half of the respondents assessed as good and one third as very good the effectiveness of the therapeutic methods used by the therapeutic team in relation to their own alcohol dependence problem.
4. The factors that determine the patients' assessment of the effectiveness of the therapeutic methods used in COTUA turned out to be the task of the nurses to conduct therapeutic discussions with the patients, to provide them with knowledge, to teach how to live with the disease and cooperate with the therapeutic team, as well as the nurses' willingness to talk to the patients about alcohol dependence.

Implications for Nursing Practice

The results of the conducted research show that the activities carried out in the 24/7 Alcohol Addiction Therapy Unit should be strengthened, expanded and monitored. The changes in the area of applied therapeutic methods should include a clear division of tasks between medical staff working at COTUA, including informing patients about the course of therapy, alcohol addiction and treatment procedures.

In addition, it is worth maintaining and developing good practices, consisting of accurately informing all patients about the course of therapy. It is also advisable to create favorable conditions for them to develop the skills of coping with alcoholism, which they acquired during the treatment. In this area, the belief of addicts in the possibility of maintaining abstinence and returning to normal life with the help of therapy should be strengthened.

Considering that the therapeutic activities in COTUA were conducive to expanding the self-awareness of patients about the need to undergo drug addiction treatment, it seems important that the therapeutic methods used should also strengthen the level of patients' insight in other areas of functioning. In addition, consideration should be given to including interactions in the treatment plan that increase the motivation of addicts to undergo treatment and to complete therapy.

Therefore, it is advisable to create opportunities to improve the competences of nurses, with particular emphasis on the area of providing professional support to patients. Recommended activities for people who make up this profession should include participation in training in the areas of active listening, advanced methods of showing understanding to addicts and building trust in the relationship. At the same time, in order to maintain a high level of nursing care provided in the 24-hour Alcohol Addiction Therapy Unit, its standards should be constantly monitored.

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