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Associations of coping styles with suicide behavior in hospitalized asthma and chronic obstructive pulmonary disease patients: Substance abusers versus non- substance abusers

Mitra Safa, Fatemeh Ghassem Boroujerdi and Firouzeh Talischi
Shahid Beheshti University of Medical Sciences, Iran

Background: The process of treating patients, especially chronic ones, who require hospitalization becomes possible when acceptance, accompany, and choosing reasonable coping strategies by the patients are effective. Choosing unsuitable strategies such as substance abusing is a serious crisis in the treatment. Thus the goal of this research is to explore the association of coping strategies with suicide behavior in substance abusers and non substance abuser patients of chronic pulmonary diseases (asthma and chronic obstructive pulmonary disease).

Materials and methods: This comparative study was performed through accessible method of sampling, so that 100 patients with chronic pulmonary disease (asthma and chronic obstructive pulmonary disease) were placed in two groups of substance abusers and non substance abusers, with 50 patients in each group. Ways of Coping Questionnaire of Lazarus and Suicide Behavior Questionnaire- (Revised) were completed by them. Five Persian speaking patients described this questionnaire understandable and easy in pre-test stage. Cronbach's alpha was used to measure internal consistency.

Results: The average (SD) age of participants were 40 (14). 58% of individuals were men. 62% of individuals had used problem-focused coping. The most abused substances were cigarettes (78%) and opium (42%). 6% of substance abusers had thought about self elimination 5 times or more, in the last year. 5% of substance abusers had attempted to serious suicide. Tendency to commit suicide was more in men, substance abusers and participants who used emotion-focused coping style, based on regression model. Average score of suicide tendency was significantly higher in substance abusers ($B=2.196$, $p\text{-value}=0.007$).

Discussion and conclusion: Chronic disease is a crisis and patients need to acquire appropriate methods to cope with it, especially in substance abuser patients and patients suffering from psychological problems like suicide; otherwise, treatment procedure would be affected. Therefore, precise recognition of coping strategies in chronic pulmonary patients with substance abuse is necessary by cooperation of psychiatric and psychological team along with internal physician team in hospitals because medical treatment, along with psychological problems of patients in current project is not sufficient alone, and undoubtedly, patient's quality of life and even life expectancy might decrease seriously.

anahita86@yahoo.com; mitra_safa121@yahoo.com