ISSN P-ISSN: 2314-7334

Volume 13 | ISSUE 3

12th International Conference on

**Addiction Psychiatry & Mental Health**

June 23-24, 2022 | Dublin, Ireland

Journal of Neuroinfectious Diseases

**Abstract (600 word limits)**

**Inconceivable Dosage of Diazepam in Severe Alcohol Withdrawal Syndrome**

Alcohol is a psychoactive substance with dependence-creating properties.In 2012, about 3.3 million deaths, or 5.9% of all global deaths, were attributable to alcohol consumption[1]. Symptoms of severe alcohol withdrawal are fewer than 10% and manifest delirium tremens and seizure. [2].The purpose of this study was to discuss the effect of diazepam infusion requirements for delirium tremens. The age of the cases were respectively 39, 43, 57 and 59. The age of first alcohol use were respectively 13, 9, 13, 15.The average daily alcohol consumption were 23,25,16,25 standard drinks and 4 patients had been drinking regularly for 23,18,37,40 years.Two patients had been drinking 2 liters/day of 80% alcohol containing drinks (Turkish cologne).The four of the patients progressed delirium tremens at the first day of hospitalization.The administrated diazepam dosages were respectively 140 mg/day, 480 mg/day, 400 mg/day and 240 mg/day on the first day.The dosage was reduced by 10% of gradually in the following days.Withdrawal treatment was accomplished within 15 days. We consider that early onset alcohol drinking and family history are the predictors of inconceivable doses of diazepam for the patients we have reported.There is not any consensus with the dosages of diazepam treatment for delirium tremens.[3]The studies reveal that symptom-triggered treatment or fixed-dose regimen can be used in the treatment of alcohol withdrawal.[4]However in some cases as we reported vagarious manners may emerge and clinicians have to bend the treatment protocols.It is crucial to determine the risk factors for severe alcohol withdrawal syndrome.

**Biography (200 word limit)**

I study as an Associate Professor in the Department of Psychiatry at Çanakkale University in Turkey. I am the coordinator of the Addiction Psychiatry Section (APS) of Psychiartic Association and I primed the Addicition division 4 years ago in the Psychiatry Department of the Medicine Faculty. I have been studying in the addiction field since 2012. Prior to that I studied in different areas of psychiatry; pschoanalyisis, psychodinamic psychatriy, epidemiology and personality disorders.In our outpatient/inpatient clinic we mainly treat the patients who have alcohol use disorders; The researches we are currently conducting in the area of addiction are as follows: epidemiology of alcohol and substance use among college students, childhood trauma and severity of alcohol addiction,impulsivity and brain research of alcohol addicition, emotion regulation.

Email: gulecdemet@yahoo.com

Phone Number:+905053523645

Track Name:Alcoholism Addiction

Type of Presentation:Oral presentation

https://addictionpsychiatry.euroscicon.com/

**References (With Hyperlink)**

1. [World Health Organisation](https://addictionpsychiatry.euroscicon.com/). Global status report on alcohol and health 2014.
2. Rahman, A., Manju, P., 2018. Delirium Tremens, [StatPearls Publishing](https://addictionpsychiatry.euroscicon.com/).
3. Michael, F., 2004. [Management of Alcohol Withdrawal Delirium](https://addictionpsychiatry.euroscicon.com/). Arch Intern Med. 164, 1405-1412
4. Kattimani, S., Bharadwaj, B., 2013. [Clinical management of alcohol withdrawal](https://addictionpsychiatry.euroscicon.com/): A systematic review. Ind Psychiatry J. 22(2), 100–108.

**Organization / University Logo**



https://addictionpsychiatry.euroscicon.com/