Case Study

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Case Study

A 42-year-old man, Wan DeRer with a positive medical history of severe alcohol dependency was admitted to the healthcare facility to seek help form healthcare providers. He was diagnosed with severe alcohol dependency and socially he was homeless. The case was observed with all of his physical and medical assessment was performed. The history of the client has suggested that he was punished brutally in his childhood. Also, he has suffered violence and aggressive behaviors in society in his childhood. He was observed with strong and positive signs of responsibility for work as he was working at higher wages as compared to his peers. He was severely engaged in alcohol use that occasionally found by the police departments in a drunk state. The patient was seeking help as he was aware of his condition and wanted to get proper treatment (Agabio et al., 2018). Though the dependency of alcohol has not enabled him to complete his treatment he always preferred to get rehabilitation or inpatient residential programs.

He was gifted with his professional skills of getting a job easily and also, he was skilled professional though has been found combating his alcohol dependency (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). He has been observed with substance dependency for long, therefore, he needed an essential and effective treatment for his recovery.

**Reason for Assessment**

Wan DeRer was assessed as troublesome for the healthcare staff and has been observed with severe alcohol dependency. The case was presented with interesting signs of "first he was agreed to initiate detoxification, residential program” (Agabio et al., 2018). Later, “he denied with a lame excuse for what it would not work for him”.

**Sources of Information**

The interviews were conducted from police departments, his working owners and relatives of his nearby areas. The interviews were presented with a chronic relapsing client who challenges the compassion of program staff. The information related to his medical history and family history was provided by the patient himself. Also, the healthcare facility emergency departments have provided essential information regarding the condition of Wan DeRer. He also visited a healthcare facility most often and informed the healthcare providers about his status and family background. He was positive in connection to the program irrespective of his relapses, he continues to come back to the healthcare providers for help and care. Medical record was maintained at the healthcare facilities to gather the data of the patient. The patient has provided his medical records, diagnostic reports and family history (Agabio et al., 2018). The patient has also informed the healthcare providers about his working routine and agencies during his visits.

**Biopsychosocial History**

Patient visiting for help was diagnosed with severe alcohol dependency. The patient, Wan DeRer was a highly paid welder. His biological background has suggested that he has been severely punished in his childhood. The psychological history of the patient was not normal. He has a habit of drinking behaviors because of which he has to leave the workplace (Mann et al., 2017). Because of his alcohol dependency, he was observed as a responsible worker. The psychological condition of the patient has suggested that he was not able to control his drinking behavior (Mann et al., 2017). He was punished and neglected in his childhood and both of his parents have passed long ago.

**Biological, Psychological and Social History.** The biological history of the patient was a severe alcohol dependency. The condition of the patient has suggested that he was not supported in his childhood as both of his parents have passed in his childhood (Mann et al., 2017). The client was neglected and punished in his childhood and because of which he has developed a habit of drinking. Studies have shown that alcohol dependency is a phenomenon that develops because of continuous drinking. Additionally, it has been suggested by the psychologists that continuous and regular use of alcohol cause addiction in individuals. Persons involve in drinking usually start drinking to get rid of their stress and depression (Agabio et al., 2018). They start drinking for pleasure and relaxation, however, with time it becomes a part of their life. This ultimately results in more and more consumption of alcohol. The human brain develops a dependency on alcohol with time.

The psychological condition of the patient was not normal as he has developed alcohol dependency (Mann et al., 2017). He has been diagnosed with severe alcohol dependency which depicts that he would not able to overcome this habit of drinking (Agabio et al., 2018). Therefore, he was seeking help in the residential program. Psychologically, he was also observed that counseling helped him several times though, because of dependency he was not able to stop using alcohol.

Socially he was an active person. He has been working as a welder and has a good sense of responsibility. However, he was neglected in his childhood and because of which he has developed some negative and socially impaired behaviors (Mann et al., 2017). This is the reason he was found by the police occasionally. He was living alone and as a homeless person (Agabio et al., 2018). He was involved in over drinking in his workplaces because of which he has no good repute at his workplaces. As a counselor, I have observed that positive social energy was lacking in this case as his parents have died in his childhood and he was punished and neglected. After this loss, the patients usually develop and adapt to the socially impaired behaviors from society. No significant peers or family relationship has been observed in this case.

**Developmental.** Childhood development is mainly dependent on social interactions and family contribution, according to Piaget’s theory of development, early life years are very important in the development of children (Mann et al., 2017). The individual has not met all of his developmental milestones. He has been involved in punishment in his childhood which has created a negative influence on his development. His parents have died in his childhood and therefore, the client was left alone and neglected by society (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). The client may have suffered bullying or ridicule in his childhood through history has not been provided in this regard (Stålheim et al., 2018). The client has been neglected in his childhood and because of which he may have developed anxiety and depression and to get rid of feelings of pain, he has been now developed severe alcohol dependency (Mann et al., 2017).

**Family.** It has been observed that family plays an important role in the development of behaviors and stability in a person’s life (Agabio et al., 2018). The loss of parents has caused stress for the patient in his childhood. Additionally, he was neglected and punished and due to which perhaps he has developed a trauma or during youth. The client has no significant and strong family background for his support (Mann et al., 2017). Loss of parents and no support from any family members has affected his development and growth in childhood and youth. If he was supported by any family member, he would have developed a good sense of responsibility and socially acceptable behaviors.

**Current Status**

The client has been assessed and diagnosed with severe alcohol dependency. The case was observed with all of his physical and clinical assessment was performed. The history of the patient has suggested that he was a victim of child abuse in his childhood. Similarly, he has suffered violence and violent behaviors in his childhood (Mann et al., 2017). The patient was observed with strong and positive signs of concern of work as he was working at a high salary as compared to his peers. He was severely engaged in alcohol use that occasionally found by the police departments in a drunk state (Mann et al., 2017). The patient was seeking help as he was aware of his condition and wanted to get proper treatment (Agabio et al., 2018). Though the dependency of alcohol has not enabled him to complete his treatment he always preferred to get rehabilitation or inpatient residential programs (Agabio et al., 2018). Wan DeRer needs a prompt treatment plan for the control of alcohol dependency. Although, the dependency of alcohol has not permitted him to complete his treatment he always preferred to get rehabilitation or inpatient residential programs.

**Indicators of Abuse and Dependency**

Clinical signs such as diagnostic tests of tissues and organs can help in the diagnosis of alcohol dependence. However, Wan DeRer's behaviors such as the careless attitude of deinking and excessive drinking at workplaces suggested that he has been involved in alcohol dependence. Also, various indicators of the conditions such as the psychological assessment of the patient and his positive medical history of alcohol dependency have suggested this state. Most of his organs have been not functioning appropriately, the signs of dependency and addiction has suggested that brain and neuronal functioning is severely damaged (Mann et al., 2017). The signs of repercussions and influences have suggested that the patient has been involved in severe dependency. Attitude and behavior of the patients such as police have found his occasionally drunk, his habit of excessive drinking at workplaces (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). All of these elements have suggested his alcohol overuse and dependency.

**Attitude and Behavior**

Unstable and excessive alcohol drinking behavior. His inconsiderate attitude at workplaces and no clear idea about his interactions and relationships with people have suggested that he has a careless attitude.

**Social Functioning**

Impaired and no positive association with friends and peers. There is little doubt whether Wan DeRer has been connecting with anyone or not. There was no clear direction for a counselor to understand whether he has any relationship at the current state of not. Also, he has been involved in excessive drinking therefore, he has no good social interaction and functioning.

**Occupational Functioning**

Wan DeRer was not an unprofessional and unskilled person. He was good at finding jobs. He was unable to work properly because of his drinking attitude.

**Financial Aspects**

It may be suggested that he has no financial issues as Wan DeRer was easily able to get a job because of his Union hall. However, no clear picture has been suggested whether he has any financial issues at present or not.

**Familial Relationships**

He has an abusive family history coupled with a neglected attitude of family. Neglectful attitude represents that caregivers have less eye contact and were not responsive (Beraha et al., 2016). They have not taken complete responsibility for his childhood (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). This suggests that Wan DeRer was not able to develop a strong and significant relationship with his parents and family. Ignorant and neglected behaviors of family have promoted him to adapt to the socially impaired behaviors.

**Legal**

Though he was not found involved in any legal discrepancy, Wan DeRer has faced many complications because of his alcohol dependency.

**Health**

Alcohol dependency has causes many health issues and concerns. Wan Derer has lost the capacity to absorb his nutrients and food (Mann et al., 2017). His digestive tract has not been responding to food appropriately. It is also suggested that with time, alcohol dependency would lead him to liver disease or cirrhosis.

**Spiritual**

There is an indication that Wan Derer has a good spiritual life. He might need a little support from society to completely develop his spiritual life. He first has to encounter with his habit of alcohol dependency to get back to the right track. The lack of spiritual life may have influenced him to think that he has the only option of alcohol to escape from his depression and stress.

# Case Study 2

**Diagnostic Impression**

The clinical and physical assessment of the patient has suggested that he is being involved in alcohol use from long ago. Also, Wan Derer has confirmed with his statements and behaviors that he has alcohol dependency (Mann et al., 2017). The client has been observed with a positive medical history of alcohol dependency. It may also be confirmed from his medical tests such as tests related to livers, kidneys, and stomach (Agabio et al., 2018). Medical science has suggested that patients with alcohol dependence may develop cirrhosis and liver disease with time (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). Also, Wan Derer has been found issues with his stomach, digestive track so it is just a matter of time that he may develop liver or lung disease. However, with time, he may have developed other related diseases that can be diagnosed with prescribed tests recommended by the physicians.

**Treatment Plan**

Studies have suggested that cognitive behavioral therapy assisted with medication can help the patients to learn socially acceptable behaviors. Wan DeRer would be given therapy for his behavioral change. Problem-solving attitude would be developed with time by asserting him an attitude of acceptance (Mann et al., 2017). Based on his attitudes, he would be guided with positive feedback for his expressing behaviors and to share his stresses. Involving him in social interaction would help him to understand the needs of society and to develop spiritual connections with people.

Encouragement, support, and individual coping therapies would be provided. Psychologists have suggested that socially impaired behaviors can be effectively treated with medication-assisted with cognitive development. Problem-solving behaviors would be encouraged in the provide therapies (Mann et al., 2017). Coping skills and lifestyle change attitude would be practiced at a healthcare facility to help him to understand his state and adapt to the socially active behaviors to escape from his depression.

The caregiver attitude of healthcare providers and enabling behaviors of staff will help him to engage in coping attitude (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). Alternate coping therapies would be provided to him. Examination after every therapy would be assessed to evaluate the efficacy of the treatment program. Self-assessment and self-help associations would be developed for him. A safe and clean environment and also the availability of nurses or patients to give him company during his treatment would be suggested.

Medication would be suggested as Disulfiram which would help him to maintain abstinence from alcohol. Acamprosate would be recommended to decline the alcoholism by dropping receptors for the excitatory neurotransmitter glutamate. Methadone would be suggested to handle the cravings or to lower the effect of cravings. Medication-assisted therapies will enable Wan DeRer to cope with his cravings and maintain a balanced and stable life. The behavioral therapies will preferably enable him to get stability and a problem-solving attitude.

**Aftercare Recommendations**

It has been observed that patients seeking treatment for alcohol dependency or drug abuse may develop the symptoms after engaging themselves in the same society. Therefore, aftercare recommendation is very important for Wan DeRer. Such as engagement in a healthy activity and involvement in social work where he would be able to interact with people is essentially recommended. The ability to redevelop alcohol use would be suspected in such cases, therefore, he should be monitored regularly through follow-ups. His interaction with a good company is essentially important in this case (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). Maintenance of proper diet and regular exercises would be suggested to enable him to cope with his stress and anxiety, regular and recommended use of prescription for the specific period is also important.

A person seeking help from alcohol dependency needs additional support and care from the healthcare facilities and staff therefore, providing them a suitable care environment is important. Rehabilitation services need to be provided with quality care (Mann et al., 2017). Psychologists have suggested that these clients need additional attention and care from the healthcare providers to gain energy and strength to cope with their stress and behaviors. Alcohol use should be discouraged at schools, colleges, and universities so that individuals should not be able to access it (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). Family contribution and interactions with peers are essentially important in maintaining a good environment for patients with alcohol dependency.

Many patients seeking help from alcohol dependency have successfully recovered from their state by the services of healthcare providers with medication and behavioral therapies. According to the studies, it has been suggested that medication-assisted with cognitive behavioral therapy are important in addressing the persons suffering from alcohol dependency (*Chegg: Uppers, Downers, All Arounders: Physical and Mental Effects of Psychoactive Drugs*, n.d.). Therefore, Wan DeRer can effectively decline his socially impaired behaviors and he would be able to overcome his cravings and dependency of alcohol after getting complete treatment of medication suggested and recommended behavioral therapies. Cognitive-behavioral therapy is essential in addressing attitudes and behaviors of people particularly socially impaired actions. Therefore, physicians and psychologists have suggested that medication-assisted behavioral therapies can effectively treat patients with drug abuse or alcohol dependency.

# References

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