Impact of acceptance and commitment-based psychoeducation on the adjustment of .expressed emotion in families of patients with bipolar disorder

Expressed emotion is one of the key factors resulting in relapse of psychiatric disorders. Expressed emotion is a critical, hostile and emotionally over-involved attitude that relatives have toward a family member with such disorder. Since stress from the expressed emotion leads to relapse in person with a disorder, the present study aimed to investigate the effect of mental training based on the acceptance and commitment on the .regulation of expressed emotion in families of patients with bipolar disorder Materials and Methods: This quasi-experimental study was carried out on families of patients with bipolar disorder referring to Kargarnejad hospital (Kashan, Iran). The purposive sampling method was used to select the participants. As an intervention .acceptance and commitment-based psychoeducation of the families was held in 10 sessions .Expressed emotion questionnaire was completed by relatives pre- and post-intervention Results: The results showed that the level of expressed emotion reduced after the intervention in families of patients with bipolar disorder (P<0.001). A significant reduction , was observed in the level of expressed emotion in all four subscales (negative attitudes .(tolerance/expectations, harassment and intervention and emotional response) (P<0.001 Conclusion: Family psychoeducation based on the acceptance and commitment can be effective in the regulation of expressed emotion in families of patients suffering from .bipolar disorder

Perceived emotions in patients with obsessive-compulsive disorders: Qualitative study

Various social factors play important role in obsessive compulsive disorder (OCD). Type of behavior andemotions of family members to patient have been identified as effective factors in onset, severity and relapse of OCD. This study has been carried out to determine of family emotions to their patients. This is quantitative study that was performed with targeted sampling method on 10 patients with OCD. In this study, focus group method was used for gathering data. All of statements was recorded andwrittenwords by word. Data were analyzed by content analysis method. The finding of this study show that perceived emotions of patients classify in four field such as overinvolvement, criticism, neglect and lack of emotional support and hostility; that this emotions was causing feeling including lack of self-confidence, the feeling of being in control, lack of privacy, lack of empathy, nervousness, guilt andhopelessness, lonely, depression, worthlessness, neglect, anxiety, self-blaming. Patients' perceived emotions indicates on maladaptive reactions of family in communication ofpatients that these threatening patients health and failure of therapeutic outcomes, severity and relapse of OCD. Also these emotions propose of lack of family education, lack of information about of nature of psychiatric disorders, family psychopathologyand abnormal communications. Therefore

holding family psychoeducation as base and supplement of treatmentinprevention of disorder relapse should be in attention of clinicians.

Sleep quality and related factors among the nurses of the Hospital of Kashan University of Medical Sciences, Iran

Sleep and rest are the essential physiological needs of human. Nurses are at risk of developing sleep problems than others because of having various shift work. The aim of the

present study was to evaluate the sleep quality and related factors in the nurses. Methods: Inthis cross-sectional study, 200 nurses were selected randomly from Shahid BeheshEducational Hospital of Kashan University of Medical Sciences, Iran, 2016. Persian versionof Pittsburgh Sleep Questionnaire Index and demographic questionnaire were used for thedetection of sleep quality. Results: The mean age of cases was 51.31 years, and most of them (Vr %) were female. The majority of them had rotating shift work and worked over 150 h per month. 95.5% (191 cases) of them had poor sleep quality. The mean total score of sleequality in females was higher than males (P = 0.04). The nurses with rotating shift work hadhigher mean total score of sleep quality than nurses with fixed shift work. Nurses with over150 h per month had more problems in daily function than others (P = 0.04). Conclusion:These results present that the majority of the nurses had poor sleep quality. Poor sleep quality could be affect function, mental and physical health, and secondary effect delivery service patients. Therefore, attention to this issue and strategies for improved sleep quality is necessary.

Comorbid 'The Effects of Acceptance and Commitment Therapy on Man Smokers Depression and Anxiety Symptoms and Smoking Cessation: A Randomized Controlled Trial

The use of second-generation atypical antipsychotics has an increasing role in thedevelopment of metabolic syndrome. However, these medications due to metabolic disorders can leadto an increased risk of cardiovascular disease and subsequently mortality as well as reduced adherence to treatment. The main objective of current study was to determine the ability of melatonin to reduce the metabolic effects of second-generation antipsychotics. Methods: This double blind controlledclinical trial was conducted on 100 patients aged 18–64 years old were treated with the secondgeneration antipsychotics for the first time. The patients were divided randomly into two groups of 50. The case group received slow-release melatonin at a dose of 3 mg and the control group was oral placebo at 8 p.m. Results: The findings in melatonin group indicated significantly increase of HDL and decreased fasting blood sugar and systolic blood pressure, as well as had statistically

Effects of long-term treatment of atypical antipsychotics Preliminary test of group acceptance and commitment therapy on obsessive compulsive disorder for patients on optimal dose of selective serotonin reuptake inhibitors.

The aim of this study was to investigate the effects of adding group acceptance and commitment

therapy (ACT) to adults diagnosed with obsessive compulsive disorder (OCD) who were already on an optimal dosof selectiveserotonin reuptake inhibitors (SSRIs). Forty-six Iranian women, on SSRIs, were randomized to group ACT + SSRI or continued SSRIconditions. SSRI dosages stayed stable during the study. Assessments included the Structured Clinical InterviewSCID-I, (Yale-Brown Obsessive-Compulsive Scale Self report (Y-BOCS-SR), Beck Depression Inventory-IIBDI-II, (Ruminative Response Scale (RRS), and Acceptance and Action Questionnaire (AAQ-II) Theresults showed significant reductions on the Y-BOCS-SR and BDI-II in both conditions at posttreatment with significantly greater reductions in the ACT + SSRI condition at follow-up. The RRS and AAQ-II saw significant improvements in the ACT + SSRI condition at posttreatment and follow-up compared to the SSRI condition. Results provide crosscultural support for group ACT as a treatment for OCD and as a successful adjunct to SSRI treatment.

The Efficacy of Aripiprazole versus Risperidone as AugmentationTherapy in the Treatment of the Resistant Obsessive-CompulsiveDisorder: A Double-Blind, Randomized Clinical Trial

Background: Obsessive-compulsive disorder (OCD) is the fourth common psychiatric disorder. Among the anxiety disorders, OCDhas the least therapeutic response and 40-60% of OCD patients do not satisfactorily respond to the first-linestandard treatment known as treatment-resistant OCD. One of the best therapeutic strategies is the augmentation therapy, which is adding antipsychotics the standard treatment (SSRIsObjectives: This study was aimed at comparing the efficacy of Risperidone and Aripiprazole as augmentation

therapy in the resistant cases of obsessive-compulsive disorder. Methods: In this double-blind randomized clinical trial, 100 patients with treatment-resistant OCD were diagnosed based on the

DSM-IV-TR and were followed for 12-weeks. The patients were randomlydivided into two groups of Aripiprazole and Risperidoneand received an average daily dose of 5 mg and 1.5 mg for twelve weeks, respectively. The efficacy of treatmentwas measured and compared by the Yale-brown obsessive-compulsive scale (Y-BOCS) at 4, 8 and 12 weeks. The mean Y-BOCS score of patients in Risperidone and Aripiprazole groups were 25.26_4.17 and decreasing trend of Y-BOCS scores in both groups, which was demonstrated by the repeated measurement analysis (P < 00.1).

It was found that both Aripiprazole and Risperidone could be effective in the treatment of

treatment-resistant OCDpatients. However, Aripiprazole showed a higher efficacy compared to Risperidone

Effects of Mindful Parenting Training on Clinical Symptoms in Children :with Attention Deficit Hyperactivity Disorder and Parenting Stress

Randomized Controlled Trial

Background: Children with attention deficit hyperactivity disorder (ADHD) are at risk of impairment in multiple domains. This study aimed to investigate the effectiveness of mindful parenting training in reducing clinical symptoms in children with ADHD and parenting stress of their parents

Methods: This randomized clinical trial was conducted on 2 groups (experimental and control) in 3 phases (pretest, posttest, and 8 weeks' follow-up). Sixty children with ADHD, who had been referred by the child psychiatrist in the Iranian city of Kashan in the second half of the year 2016, were selected along with their mothers. The mothers were assigned to one of the 2 groups via permuted blocked randomization. The mothers completed the parenting stress index–short form (PSI–SF 36) and the Swanson, Nolan, and Pelham Parent and Teacher rating scale (SNAP-IV). All the children in both groups received pharmacotherapy with either risperidone or Ritalin. The intervention group received 8 sessions (1 session each week, each session lasting 90 minutes) of mindful parenting training based on the Kabat-Zinn protocol. The data were analyzed using SPSS, version 20, via the t .test, χ2test, repeated measures analysis of variance, and nonparametric Friedman test Results: This study showed a reduction in parenting stress, negative parent-child interactions, and children's problematic characteristics in the mindful parenting training group compared with the control group in the posttest and follow-up. Our results also demonstrated a significant improvementin ADHD symptoms in the experimental group by comparison with the control group in the posttestand follow-up. Conclusion: Mindful parenting training was effective in reducing parenting stress and ADHDsymptoms in our intervention group.

Therapeutic effect of adjunctive N-acetyl cysteine (NAC) on symptoms of chronic schizophrenia: A double-blind, randomized clinical trial.

Background: Schizophrenia is one of the most disabling psychiatric syndromes with the prevalence of 1% in the general population. Despite availability of various antipsychotics, negative symptoms and cognitive impairmentare difficult to treat. In addition antipsychotic monotherapy is not effective in most of these patients. Currentevidence indicates the roles of glutamatergic system in this disorder. N-acetyl cysteine NAC) also increases extracellular glutamate. This study was conducted to evaluate the clinical effects of oral NAC as an add-on tomaintenance medication for the treatment of chronic Materials and methods: This 12-week, double-blind, randomized, placebo-controlled, .schizophrenia clinical trialwas performed to determine the effectiveness of 1200 mg N-acetyl cysteine as an adjunctive treatment

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The effects of combined sertraline and aspirin therapy on depression severity among patients with majordepressive disorder: A randomized clinical trial

Background: Different studies have been conducted to find the best adjuvant therapies for depressionmanagement. There are controversies over the effects of aspirin as an adjuvant therapy for depression.

Objective: To determine the effects of combined sertraline and aspirin therapy on depression severity among patients with major depressive disorder.

Methods: This randomized clinical trial was conducted at Kargarnejad Psychiatric Hospital in Kashan, Isfahan,Iran, from September 1, 2016 to November 1, 2016. The study participants included 100 patients with majordepressive disorder who were assigned to aspirin and placebo groups by the use of computer-generated random numbers. Patients in these groups respectively received sertraline-aspirin and sertraline-placebo for eightconsecutive weeks. Patients were prescribed 80 milligrams of aspirin twice a day. Also, sertraline wasadministered at a dose of 50-200 milligrams daily. Beck Depression Inventory was employed for depressions everity assessment at four time points, namely before, two, four, and eight weeks after the beginning of the intervention. Medication side effects were

also assessed eight weeks after the beginning of the intervention. Datawere analyzed by SPSS version 12.0, using Chi-square and the Independent-samples t-test (α =0.05).

Results: Both groups were matched in terms of age (p=0.46), gender (p=0.539), and depression severity(p=0.509, with mean score 33.5 ± 4.1 vs. 32.8 ± 5.9) at baseline. However, depression scores were reducedsignificantly four and eight weeks after initiation of therapy just in the sertraline-aspirin group (p<0.05).

Conclusion: As an adjuvant therapy, aspirin can reduce depression severity among patients with majordepressive disorder. Yet, further studies are needed to prove the effectiveness of aspirin and other antiinflammatoryagents in reducing depression severity

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Acid Folic Supplementation in Major Depressive Disorder Treatment:

A Double-Blind Randomized Clinical Trial.

Background: Augmentation therapy involves the addition of a second drug, such as mood stabilizers, antipsychotics, and nutritional supplements, to a primary antidepressant treatment. Studies on adding folic acid to a preexisting antidepressive regimen as a form of augmentation therapy have had different and even controversial results. Objectives: This study aimed to determine the effects that adding folic acid to a pharmaceutical diet with cital opram has onthe treatment of depression. Methods: This double-blind randomized clinical trial was conducted in Kashan, Iran on 90 patients who suffered from depression. Patients were allocated to study groups using random permuted blocks. One group (n = 45) received a dosage of 20 mg cital opramin combination with $^{\gamma}$ $^{\Delta}$ mg folic acid on a daily basis, and the other group (n = 45) received the same daily dose of cital opram with a place bo for eight weeks. To measure the severity of each patient's depression, the Beck depression inventory II

(BDI-II) questionnairewas used prior to starting the antidepressant therapy and was repeated four, six, and eight weeks after beginningthe treatment. Are duction from the original BDI-II scores that was greater than 50% was considered to be are sponse to treatment. Results: The average depression scores before treatment were $30.11_{-}10.41$ in the intervention group and $31.24_{-}10.26$ in the control group (P = 0.6). At the end of the study, the depression scores in the intervention and the control groups were $13.31_{-}6.57$ and $19.11_{-}8.59$, respectively (P < 0.001). A reduction in the average depression scores of the intervention group was statistically significant after six and eight weeks (P = 0.01 and P = 0.001, respectively). At the end of the study, the frequency of response to treatment was 1.000 in the intervention group and 1.000 in the control group (P < 1.000). Conclusions: Folic acid, when used as a complementary therapy, can improve apatient's response to antidepressants used for the treatment of major depression.

Morphology of the corpus callosum and schizophrenia: A case-control study in Kashan, Iran

Corpus Callosum (CC) plays a significant role in hemispheric communication and in lateralized

brain function and behaviors. Structural abnormalities in the corpus callosum of schizophrenic patientswerereported. However, previous studies regarding the relationship between morphology of CC inpatients withschizophrenia and healthy people are controversial. Objective: To evaluate the morphological differences of the CC between patients with chronicschizophrenia andhealthy people and to examine the relationship between the characteristics of the CC and schizophrenia severity. Methods: This cross-sectional study was conducted on 63 patients with chronic schizophrenia (thecase group)referred to Kargarnezhad Psychiatric Hospital in Kashan, Iran, and 63 healthy people (thecontrol group) betweenJanuary 2013 and December 2014. All participants underwent brain magneticresonance imaging. Shape, anteroposterior length, and area of the CC were measured and compared in both groups. The severity of thesymptoms occurring in patients with schizophrenia was evaluatedusing the positive and negative syndrome scale. In this study, we employed Chi-square test, t-test, Pearson product-moment correlation coefficient test, bivariate analysis of variance and logisticregression were used to test the association between different variables using SPSS software Results: Results showed that the most common shape of the CC in each group was splenial bulbosity. The lengthand area of the CC in patients with schizophrenia were less than those of the control group and were greater inmen compared with women in both groups. Although there was asignificant difference in the surface area of theCC between the schizophrenic and control groups(p<0.001), no significant difference was seen regarding theanteroposterior length of CC (p=0.75). Moreover, a significant correlation was found between the surface areaand anteroposterior length of the CC (p<0.001 and p<0.014, respectively). Conclusions: Morphologic characteristics of the CC can be helpful to anticipate schizophreniaespecially inpatients' family, and it can be used for suitable and faster treatment to prevent progressive cognitive dysfunction.

The Effects of Acceptance and Commitment Therapy on Man Smokers' Comorbid Depression and Anxiety Symptoms and Smoking Cessation: ARandomized Controlled Trial.

Background: Besides physical problems, cigarette smoking is associated with a high prevalence of comorbid depression and anxiety symptoms. One of the reasons behind high post-cessation smoking lapse and relapse rates is inattentiveness to these symptoms during the process of cessation. The aim

of this study was to examine the effects of acceptance and commitment therapy (ACT) on male smokers' comorbid depression and anxiety symptoms and smoking cessation.

Methods: This two-group pre-test-post-test randomized controlled trial was done on a random sample of seventy male smokers. Participants were randomly and evenly allocated to an intervention and a control group. Patients in these groups received either acceptance or commitment therapy or routine psychological counseling services include cognitive behavior therapy, respectively. Study data were collected through a demographic questionnaire, the Structural Clinical Interview (SCI) for Diagnostic and Statistical Manual of Mental Disorders-4 th Edition (DSM-IV) disorders, Beck Depression Inventory (BDI), Beck Anxiety Inventory (BAI), and Micro Smokerlyzer carbon monoxide monitor.

The SPSS software was employed to analyze the data. Findings: After the intervention, depression and anxiety scores and smoking cessation rate in the intervention group were respectively lower and higher than the control group (P < 0.050). Conclusion: ACT can significantly improve comorbid depression and anxiety symptoms and smokingcessation rate. Thus, it can be used to simultaneously manage depression, anxiety, and cigarettesmoking