

Summary

Background: In patients starting mid-term addiction treatment, similar psychosocial and demographic factors can be identified, which subsequently influence patients' motivation to continue treatment. The main factors include social background, age, history of incarceration, type of primary addictive behaviour.

Aims: The aim of the thesis was to identify baseline factors influencing positively or negatively the probability of regular treatment completion, the factors predicting early treatment drop-out and factors predicting remaining in treatment long enough to complete it properly.

Methods: All patients (total number 411) who voluntarily entered medium-term addiction treatment in psychiatric hospital Havlíčkův Brod (PNHB) from 1st January 2016 to 31st December 2019 were included in the study. To assess regular treatment completion the entire group was analysed together. To assess the factors influencing the length of stay in treatment, patients were divided into three groups according to the number of days spent in the hospital (0–60, 61–120, 121–183). Patients' data were obtained from the electronic version of patients' medical records.

Results: The patients entering mid-term addiction treatment were men in 68.4%, most of them were without stable relationship (82.8 %), 38.7% had stable housing, 65.5% had children, and they mostly had secondary education. Over 60 % of patients had the family history of addiction, 32.6 % reported another mental illness in the family and 37.5% had a psychiatric comorbidity except from addiction. Factors influencing regular treatment completion and treatment length are comparable and they include older age, stable housing, being single, and a higher degree of education level as positive factors. Contrarily, history of incarceration was a factor negatively influencing treatment completion.

Conclusion: The length of stay in the mid-term treatment of addiction and its regular completion are influenced by similar factors, including older age, higher education (patients with elementary education had worse results in both observations). Individuals with stable housing and marital status „single“ had also better results. The length of stay as well as regular completion of therapy were negatively influenced by and the history of incarceration.

Key words: addiction therapy, adherence to therapy, factors associated with treatment completion.