



Emotion regulation strategies and abilities as predictors of cocaine use disorder severity of withdrawal symptoms and craving

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Background and aims

Emotion dysregulation (ED) is a transdiagnostic construct involved in the onset and maintenance of cocaine use disorder (CUD). Despite the scarce literature regarding the role ED plays in CUD, evidence suggests that substance use is an attempt to avoid distressing emotional states. This study aims to identify whether ED variables predict cocaine craving and severity of withdrawal symptoms.

Methods

Sixty-three participants (42.49 years; SD=8.47) hospitalized in Hospital de la Santa Creu i Sant Pau for cocaine detoxification completed a baseline assessment. This assessment included measuring craving (WCS), severity of withdrawal symptoms (CSSA), emotion regulation abilities (DERS) and emotion regulation strategies (ERQ). Bivariate correlations were computed between DERS and ERQ scores and WCS and CSSA. Multiple linear regression analyses were conducted to identify which emotion regulation variables predicted WCS and CSSA.

Results

CSSA correlated significantly with WCS ($r=.533$; $p<.001$), DERS_impulse ($r=.340$; $p=.010$), DERS_clarity ($r=.380$; $p=.004$), DERS_acceptance ($r=.440$; $p=.001$), DERS_strategies ($r=.474$; $p<.001$) and DERS_total ($r=.535$; $p<.001$). WCS significantly correlated with DERS_impulse ($r=.293$; $p=.022$), DERS_clarity ($r=.332$; $p=.009$) and DERS_total ($r=.324$; $p=.014$). Finally, DERS_total predicts severity of withdrawal symptoms ($F(1,52)=20,88$; $p<.001$; $R^2=.286$), while DERS_clarity predict craving ($F(1,55)=8.302$; $p=.006$; $R^2=.131$). None of the emotion regulation strategies correlated nor predicted WCS or CSSA.

Conclusions

These findings highlight the universal importance of addressing ED in CUD. Targeting ED during inpatient treatment could reduce the craving and severity of withdrawal symptoms, thereby improving outcomes.

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